## UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE				
Case No.	Date Filed			
08-RC-257004	2/26/2020			

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representa ive of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 140 South Main Street OH Mount Gilead 43338-Morrow County Firefighter's & Squadmen's Association (MCFSA) d/b/a 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 140 South Main Street OH Mount Gilead 43338 Jeffery Sparks 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (419) 946-6747 Chief801@mcems.net (419) 946-7727 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Care & transportation of the sick & injured. Mount Gilead, OH 5b. Description of Unit Involved 6a. No. of Employees in Unit: 9 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V No Check One: Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is curren ly recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b Address 8c Tel No 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of labor organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recogni ion as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. F-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: 

Manual Mail Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): March 30, 2020 0800hrs 140 South Main Street Mount Gilead, OH 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Kennard Ray Skaggs II
International Association of EMTs & Paramedics (IAEP)/NAGE/SEIU Local R7-059
International Association of twitich Is 12c. Full name of national or international labor organization of which Petitioner is an affiliate or consituent (if none, so state) International Association of EMTs & Paramedics/NAGE/SEIU 12g. E-Mail Address kskaggs@nage.org 12d. Tel No. 12e. Cell No. 12f. Fax No. (863) 585-3045 (863) 582-9506 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code) Doug Hall Esq. Associate General Counsel International Association of EMTs & Paramedics (IAEP)/NAGE/SEIU 3510 Main Street CT Bridgeport 06606 13c. Tel No. 13d Cell No. 13e. Fax No. 13f. E-Mail Address dhall@nage.org (860) 230-5874 (203) 371-6378 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date National Representative Kennard R. Skaggs II Kennard Ray Skaggs II 02/26/2020 14:22:01

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

## PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

Attachment

DO NOT WRITE IN THIS SPACE			
Case	Date Filed		
08-RC-257004	2/26/2020		

## Employees Included

All full-time dispatchers to be included via "Armor-Globe" election (reference case# 08-RC-185223).

## **Employees Excluded**

all other professional employees, office clerical employees, guards and supervisors as defined in the National Labor Relations Act.

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FORM NLRE-502 (RB) (4-15)

> NATIONAL LABOR RELATIONS BOARD RD PETITION

DO NOT WRITE IN THIS SPACE Case No. 08-RD-255785 Date Filed

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov, submit an original of this Petition to an NLRB office in the Region In which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the pelition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filted with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RD-DECERTIFICATION (REMOVAL OF REPRESENTATIVE) - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Heritage-WTI Inc., d/b/a Heritage Thermal Services 1250 Saint George St, East Liverpool, OH 43920-3471 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Christopher Pherson SAME AS ABOVE 3c. Tel No 3d. Cell No. 3e. Fax No. at E-Mail Address (330)385-7337 (330)385-7813 4a. Type of Establishment (Fectory, mine, wholesaler, etc.) 4b. Principal groduct or service 5a. City and State where unit is located: Waste Incinerator East Liverpool, OH Trash 5b. Description of Unit Involved 6s. No. of Employees in Unit: 46 Included: All Service Tech I, Service Tech II, Receiving and Filed Service employees at the Employer's facility 6b. Do a substantial number (30% located at 1250 Saint George Street, East Liverpool, Ohio 43920 or more) of the employees in the unit no longer wish to be Excluded: All other employees, including professional and managerial, laboratory/quality control, maintenance, E & I, represented by the certified or currently recognized bargaining Operators, outbound and transportation coordinator and lab pack, office/clericals, guards and supervisors as defined by representative? Yes [ ] No [ the Act. 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about Check One: (Date) (If no reply received, so state). 7b. Politioner is currently recognized as Bargaining Representative and desires certification under the Act 8a. Namo of Recognized or Certified Bergaining Agent 8b. Address International Chemical Workers Union Council, Local 767-0 1655 West Market Street, 6th Floor, Akron, OH 44413 Bf. E-Mail Addross 8d.Cell No. Be. Fax No. 8c. Tel No. (330)926-0816 (330)926-1444 8g. Affiliation, if any 6h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent December 2, 2015 Contract, II any (Month, Day, Year) May 1, 2017 - May 1, 2020 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? has picketed the Employer since (Month, Day, Year) (Name of labor organization) 10. Organizations or individuals other than those named in items 8 and 8, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in flem 5b above. (if none, so state) 10c Tel. No. 10d Cell No. 10a, Name 10b. Address 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11s. Election Type: X Manual Mall Mixed Manual/Mall any such election. 11b. Election Date(s): 11d. Election Location(s): 11c. Election Time(s): ASAP 3:30 p.m. - 5:30 p.m. (2:days) The In Floor Conference Room Address (street and number, city, state, and ZIP code) 12a, Full Name of Petitioner (b) (6), (b) (7 (b) (6), (b) (7)(C 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so afei 12/, Fax No. 12d Tel No. (b) (6), (b) (7)(C) will accept sorvice of all papers for purposes of the representation proceeding 13. Representative of the Petitioner who (b) (6), (b) (7)(C) 13e. Fax No. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) SAME AS ABOVE I doclare that I have read the above polition and that the statements are true to the best of my knowledge and belief. Title Sig(b) (6), (b) (7)(C) Name (Print) (b) (6), (b) (7)(C 2-5-2020

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.B. CODE, TITLE 18, SECTION 1001)

Individual/Petitioner

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 of seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the Information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

PORM NLRts-502 (RD) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD DO NOT WRITE IN THIS BPACE Date Filed 2-6-2020

INSTRUCTIONS: Unless	e-Filed using the	Agency's websi	te, www.nirb.gov, submit a	an original of thi	s Petition to a	n NLRB office in the Region	
in which the employer co	incerned is locate	ad. The petition	must be accompanied by	both a showing	of interest (se	e 6b below) and a certificate	
of service showing service	se on the employ	er and all other p	parties named in the petition	on of: (1) the per	Ittion; (2) Stat	ement of Position form	
(Form NLRB-505); and (3)	Description of F	Representation C	ase Procedures (Form NL	RB 4812). The s	howing of in	erest should only be filed	
with the NLRB and shoul	d not be served (	on the employer	or any other party.				
raccontract nargaining repres	adutative is no ionger	their roofdsaniauva.	L OF REPRESENTATIVE) - As The Petitioner alleges that the int to Section 9 of the National	e following circum	stances eviet or	or that the certified or currently in requests that the National	
2s. Name of Employer			2b. Address(es) of Establishmen	t(s) involved (Street	and number, clt	, State, ZIP code)	
Heritage-WTI Inc., d/b/a H	eritage Thormal S		1250 Saint George St, East 1	Liverpool, OH 43			
3s. Employer Representative Christopher Pherson			SAME AS ABOVE	2b - state same)			
ac. Tel. No. (330)385-7337	3d. Ce		3e. Fex No. (330)385-7813				
4a. Type of Establishment (Fact	tory, mine, wholesste		pal product or sarvice			and State where unit is tooated:	
Waste Incinerator  5b. Description of Unit Involve	-d	Trash			East Li	verpool, OH	
그림이다 나는 그 아이를 하고 있다면 내가 되었다. 이 사는 사람이 없는데 없는데 없다면 하다.						8s. No. of Employees in Unit:	
located at 1250 Saint George Excluded: All other emplo	ge Street, East Liv oyees, including p	rofossional and m	and Filed Service employe 20 anagerial, laboratory/quality ck, office/clericals, guards as	control, mainten	anco, E & I,	8b. Do e substantial number (30% or more) of the employees in the unit no longer wish to be rapraented by the certified or currently recognized bargaining representative? Yes [ ] No [	
	equest for recognition	as Bargaining Repo	esentative was made on (Date)		ad Employer dec	fined recognition on or about	
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7b. Pe	atitioner to currently o		ning Representative and dealres	certification under th	ne Act.		
8a. Name of Recognized or Ce	artified Bargaining	Agent	8b, Address				
International Chemical Wo			1655 West N	Market Street, 6th			
De Tal Ma					8f. E-Mail Address		
Bo. Tel No.	8d,Cell	I No.	80. Fax No.		ar. E-Mail Add	7835	
8a. Tel No. (330)926-1444	8d,Cel	ING.	88. Fax No. (330)926-0816 8h. Date of Recognition of December 2, 2015	r Certification	81. Expiration Contract, if an	Date of Current or Most Recent y (Manth, Day, Year)	
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PRIVACY ACT STATEMENT

Splicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 28 U.S.C. § 151 et seg. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2005). The NLRB will further explain these Gets light information to the NLRB is voluntary; however, fature to supply the information will cause the NLRB to decline to invoke its processes:

(b) (6), (b) (7)(C)

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UNITED STATES GOVERNMENT

DO NOT WRITE IN THIS SPACE				
Case No.	Date Filed			
08-RD-256420	2/18/2020			

NATIONAL LAE	OR RELATIONS	BOARD	L'a	se No.	Date Fil	jed	
RD P	ETITIO	N ,		08-RD-256420	ANALOS DE CAMBOLINAS DE LA COMPANSIONA DEL COMPANSIONA DE LA COMPANSIONA DE LA COMPANSIONA DEL COMPANSIONA DE LA COMPANS	18/2020	
INSTRUCTIONS: Unless e-Filed usi	na the Agenc	v's website.	ww.nirb.gov, submit a	n original of this	Petition to an	NLRB office in	the Region
In which the employer concerned is	located. The	e netition must	be accompanied by	both a showing o	f interest (see	6b below) and	a certificate
of service showing service on the	mployer and	all other partie	s named in the petitio	on of: (1) the petit	tion: (2) Stater	nent of Position	form
(Form NLRB-505); and (3) Descripti	on of Represe	entation Case I	Procedures (Form Ni	RB 4812). The st	nowing of inte	rest should only	be filed
with the NLRB and should not be s							
PURPOSE OF THIS PETITION: RD- DE recognized bargatning representative is n	CEDTICICATION	U IDEMOVAL OF	REPRESENTATIVEL - A &	ubstantial number of	employees assert	that the certified or	currently National
Labor Relations Board proceed under	the proper autho	orlty oursuant to S	Section 9 of the National	Labor Relations Act			
2a. Name of Employer		2b, Ac	idress(es) of Establishmen	t(a) involved (Street a	and number, city,	State, ZIP code)	
ARCHER DANIELS MIDLAND CO		1308	Miami St, Toledo, OH				
3a. Employer Representative - Name and	litte		SAME AS ABOVE				
Jason Boyer 3c. Tel. No.	3d Cell No.		3e. Fax No.		3t. E-Mait Addre	199	
(419)691-7480	3d. Cell No.	50-2417			Jason.	boyer (a) A	DM. com
4n. Type of Establishment (Factory, mine, w	holesəler, etc.)	4b. Principal pro			5a. City a	nd State where whit	is located:
Factory		Load/unload	gricultural material		Toledo,		
5b. Description of Unit Involved				100		8s. No. of Employe	es in Unic
Included: All full time and regular pa Excluded: All managerial employees, defined in the Act.						6b. Do a substantia or more) of the emporation of the longer wish represented by the currently recognize representative? Yes	oloyees in the to be certified or id bargaining
Check One: 7a. Request for re-	cognition as Bart	naining Represents	ative was made on (Date)	31	d Employet decil	ned recognition on o	
		(If no reply receive					
7b. Petitioner is ou			epresentative and desires	certification under the	e Act.		
8a. Name of Recognized or Cartified Barg			8b. Address				•
International Longshoremen Local 17			THE PERSON NAMED IN COLUMN TWO IS NOT THE OWNER.	7405, Oregon, Ok			
8c. Tel No.	8d Cell No.		8e. Fax No.		8f F-Mail Addre		' '
(419)266-4123 8g. Affiliation, If any	L		8h. Date of Recognition o	r Certification		(b) (7)(C	')
Se Allianova i cory					Contract, if any February 15,	(Month, Day, Year) 2020	
9. Is there now a strike or picketing at the Er	nployer's establis	shment(s) invalved	? No If so, app	roximately how many	employees are p	articipating?	
(Name of labor organization)			eted the Employer since (A	Month, Day, Year)			
10. Organizations or Individuals other than to have a representative interest in any employ	hose named in its	ems 8 and 9, which ascribed in item 5b	h have claimed recognition above. (If none, so state)	as representatives a	nd other organiza	tions and individual	s known to
10a. Name	10b, Ad	dragg		10c, Tel, No.		10d, Cell No.	
International Longshoremen Local 17	0.57555	ox 167405, Ore	eon, OH 43616	(419)266-4123		10f. E-Mail Address	
		, ,	PT. T. T. T. T. C. T. C.	10e. Fax No.			
				1			
11. Election Details: If the NLR8 conducts an election in this matter, state your position with respect		ir position with respect to	11a, Election Type	X Manual	MailMbo	IlaM\leuneM ba	
any such election.  11b. Election Date(s):  11c. Election Time(s):			11d, Election Loca	tion(s):			
3/10/2020 6:30 AM to 7:30 AM		1	Breakroom				
12s. Full Name of Petitioner				12b Address (stre	et and number, c	tv. state, and ZIP of	ode)
(b) (6), (b) (7)(C)					(7)(C)		
12c. Pull name or national or international la	bor organization	of which Petitiones	r is an affiliate or constituer	nt (if none, so state)		686	
12d. Tel No.	12e. Cell No.		12f. Fax No.		12g. E-Mail Add	from	
(b) (6), (b) (7)(C)	(b) (6), (b) (7)	(C)	121. 1 22. 140.		(b) (6), (b)	(7)(C)	
13. Kepresemenve of the Petitioner who			or purposes of the repres	sentation proceeding	g.		
[1] :			13b, Address (street an				
(b) (6), (b) (7)(C)			SAME AS ABOVE				
13c. Tel No.	13d. Cell No.		13e. Fax No.		13f. E-Mail Address		
SAME AS ABOVE	SAME AS A		SAME AS ABOVE	deden early to tree	SAME AS A	ROAE	
I declare that I have read the above petition	on and that the	autements are tr					
Name (Print) (b) (6), (b) (7)(C)	MARKET PARTY NAMED IN COLUMN TWO IS NOT THE PART		I Trilo		Date		
	(6), (b) (7)		(b) (6), (b) (7)(C			6-2020	
WILLFUL FALSE STATEMENT			(b) (6), (b) (7)(C	MPRISONMENT (U.S	2-1		

Solicitation of the information on this form is subhorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2008). The NLRB will further explain these user upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will pause the NLRB to decline to invoke its processes.

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