Name (Print)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

| DO NOT WRITE IN THIS SPACE | | | | | | | |
|----------------------------|----------------|--|--|--|--|--|--|
| Case No. | Date Filed | | | | | | |
| 15-RC-246141 | August 7, 2019 | | | | | | |

Date

8/6/19

RC PETITION 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 <u>not</u> 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 representative 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) Loomis Armored 8800 Ely Rd., Pensacola, FL 32514 3a. Employer Representative - Name and Title 3b. Address (if same as 2b - state same) Sandra Strong, VP HR & LR 2500 City West Blvd., Ste 900, Houston, TX 77042 3d, Cell No. 3f. E-Mail Address 713-435-6945 sandra.strong@us.loomis.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service SECURITY AGENCY Pensacola, FL SECURITY 6b. Description of Unit Involved 6a. No. of Employees in Unit: 41 Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED ARMORED SERVICE TECHNICIANS 6b. Do a substantial number (30% PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, or more) of the employees in the EMPLOYED BY SECTEK, INC @ 1700 G. ST. NW., WASHINGTON, DC 20552 unit wish to be represented by the Petitioner? Yes / No Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT. Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). no 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). none 8c. Tel No. 8d Cell No. 8a. Fax No. 8f. E-Mail Address 8i. Expiration Date of Current or Most Recent 8g. Affiliation, if any 8h. Date of Recognition or Certification Contract, if any (Month, Day, Year) 8. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ 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 Petitioner and those named in items 8 and 9, 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 item 5b above. (If none, so state) none 10a Name 10b. Address 10c. Tel. No. 10d. Cell No. 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 11a. Election Type: Manual Mixed Manual/Mail any such election 11c. Election Time(s): 11d. Election Location(s): 11b Election Date(s): 6:00 - 9:00 Am & 4:00 - 8:00 pm Training Room 9/4/19 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Union, Security, Police and Fire Professionals of America (SPFPA) 25510 Kelly Road, Roseville, MI 48066 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union, Security, Police and Fire Professionals of America (SPFPA) 12e. Cell No. 12g. E-Mail Address 586-772-7250 X111 586-872-5634 organize@spfpa.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Gordon Gregory, General Counsel 13b. Address (street and number, city, state, and ZIP code) 65 Cadillac Square, Suite 3727, Detroit, MI 48228 13f. E-Mall Address 13d. Cell No. 13e. Fax No. 13c Tel No. Gordon@UnionLaw.net 313-964-5600 313-964-2125 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

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

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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.

Ronald W. Flowers

WILLFUL FALSE STATEME

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

| DO NOT WRITE IN THIS SPACE | | | | | | |
|----------------------------|----------------|--|--|--|--|--|
| Case No. | Date Filed | | | | | |
| 15-RM-246203 | August 8, 2019 | | | | | |

RM PETITION 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 a certificate of service showing service on all parties named in the petition of the following: (1) the petition; (2) Statement of Position form; and (3) Description of Procedures in Certification and Decertification Cases (Form NLRB 4812). The petition must also be accompanied by evidence supporting the statement that a labor organization has made a demand for recognition on the employer or that the employer has good faith uncertainty about majority support for an existing representative. However, if the evidence reveals the names and/or number of employees who no longer wish to be represented, the evidence shall not be served on any party.

1. PURPOSE OF THIS PETITION: RM-CERTIFICATION OF REPRESENTATIVE – One or more individuals or labor organizations have presented a claim to the Employer/Petitioner to be recognized as the representative of employees of the Employer/Petitioner or the Employer/Petitioner has a good faith uncertainty about majority support for an existing representative. If a charge under Section 8(b)(7) of the Act has been filed involving the Employer/Petitioner named in this petition, this statement shall not be deemed made. 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) 2a. Name of Employer/Petitioner AM/NS Calvert, LLC 1 Steel Dr., Calvert, AL 36513 3a. Employer/Petitioner Representative - Name and Title 3b. Address (If same as 2b - state same) Same Joel Stadtlander, Human Resources Manager 3d. Cell No. 3f. E-Mail Address 3c. Tel. No. 3e. Fax No. joel.stadtlander@arcelormittal.com 251-289-3128 251-654-8060 N/A 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service Steel finishing line Steel Mill 5a. Description of Unit Involved 5b. City and State where unit is located: Included: All full-time and regular part-time production and maintenance employees employed by the Company at its Calvert Alabama facility; 6. No. of Employees in Unit: Excluded: excluded: excluded office clerical and technical employees, temporary employees, guards, professional and confidential employees, and supervisors as defined by the National Lebor Rolations Act. Unless a charge alleging a violation of Section 8(b)(7) is pending, check EITHER Item 7a or 7b, whichever is applicable 7a. A labor organization made a demand for recognition on the Employer/Petitioner on (Date) July 28, 2019 The Employer/Petitioner has a good faith uncertainty about majority support for an existing representative 8b. Affiliation, if any 8a. Recognized or Certified Bargaining Agent - Name The United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industrial and Service Workers International Union 8e. Cell No 216-287-1664 Warrensville Hts., OH 44128 8g. E-Mail Address 25111 Miles Road - Suite H 8f. Fax No. 216-292-5720 pgallagher@usw.org 10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Date of Recognition or Certification N/A 11. 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) 12. Organizations or individuals other than those named in item 8, which have a contract with the Employer/Petitioner or represent employees of the Employer/Petitioner or demanded recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5 above. (If none, so state) 12d, Cell No. 12a. Name and affiliation if any 12b. Address 12c. Tel. No. 12e. Fax No. 12f. E-Mail Address N/A 13. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 13a, Election Type: V Manual Mixed Manual/Mail any such election. 13d. Election Location(s): 13b. Election Date(s) 13c. Election Time(s). TBD 21-28 days from today's date TBD 14. Representative of the Employer/Petitioner who will accept service of all papers for purposes of the representation proceeding. 14b. Address (street and number, city, state, and ZIP code) 1 Steel Dr., Calvert, AL 36513 Myriam Aerts, Chief Administration Officer 14e. Fax No. 14f. E-Mail Address 14c. Tel No. 14d, Cell No. myriam.aerts@arcelormittal.com 251-767-9656 251-289-3301 N/A 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) Attorney at Law 8/7/2019

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 ef 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.



WILLFUL FALSE STATEMENTS ON

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

| | DO NOT WRITE IN THIS SPACE | |
|--------------|------------------------------|--|
| 15-RC 246141 | Date Filed August 9, 2019 | |

RC PETITION 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 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 Politioner and Politioner desires to be certified as representative 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) Loomis Armored 8800 Ely Rd., Pensacola, FL 32514 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Sandra Strong, VP HR & LR 2500 City West Blvd., Ste 900, Houston, TX 77042 3d. Cell No. 3e. Fax No. 713-435-6945 sandra.strong@us.loomis.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: SECURITY AGENCY SECURITY Pensacola, FL 5b. Description of Unit Involved 6s. No. of Employees in Unit: Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED ARMORED SERVICE TECHNICIANS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT. 6b. Do a substantial number (30% EMPLOYED BY LOOMIS @ 8800 ELY RD., PENSACOLA, FL 32514 or more) of the employees in the unit wish to be represented by the Excludad: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT. Petitioner? Yes V No Chack One: 7e. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). no 7b. Politioner is currently recognized as Bergaining Representative and desires certification under the Act. 8s. Name of Recognized or Certified Berguining Agent (If none, so state). 8b Address none Sc. Tel No. 8d Çell No. 8f. E-Mall Address Bg, Affiliation, If any 8h. Date of Recognition or Certification 8l. 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? If so, approximately how many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year) 10. Organizations or individuels other than Petitioner and those named in Items 8 and 9, which have cisimed recognition as representatives and other organizations and individuels known to have a representative interest in any employees in the unit described in item 5b above, (If none, so state) none 10a. Name 10b. Address 10c, Tel. No. 10d, Cell No. 10a Fax No. 10f. E-Mall 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); 6:00 - 9:00 Am & 4:00 - 8:00 pm Training Room 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Union, Security, Police and Fire Professionals of America (SPFPA) 25510 Kelly Road, Roseville, MI 48066 12a. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so afate) International Union, Security, Police and Fire Professionals of America (SPFPA) 12d. Tei No 12e. Cell No. 12f. Fax No 12g. E-Mail Address 586-772-7250 X111 586-872-5834 586-772-9844 organize@sprpa.org 13. Representative of the Petitionar who will accept service of all papers for purposes of the representation proceeding 138. Name and Title Gordon Gregory, General Counsel 13b. Address (street and number, city, state, and ZIP code) 65 Cadillac Square, Sulte 3727, Detroit, MI 48228 13c. Tel No 13d. Cell No. 13e. Fex No. 13f. E-Mail Address 313-964-5600 313-984-2125 Gordon@UnionLaw,net I declare that I have mad the above petition a d that the statements are true to the best of my knowledge and belief. Name (Print) Title Date David Hickey International President 8/9/19

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 those 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.

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

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

| DO NOT WRITE IN THIS SPACE | | | | | | |
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| Case No. | Date Filed | | | | | |
| 15-RC-247262 | August 29, 2019 | | | | | |

| KC PE | | | 15-RC-24/262 August 29, 2019 | | | | | |
|--|--|---|---|--|---|----------------------------------|--------------|---|
| INSTRUCTIONS: Unless e-Filed using the Agency's website, <u>www.nlrb.gov</u> , 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 | | | | | | | | |
| in which the employer concerned i | s located. The | e petition musi | be acc | impanied by b | oth a showing o | f Interest (se | e 6b belo | w) and a certificate |
| of service showing service on the | employer and | all other partie | s name | in the petitio | n of: (1) the peti | tion; (2) State | ment of | Position form |
| (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filled with the NLRB and should not be served on the employer or any other party. | | | | | | | | |
| 1. PURPOSE OF THIS PETITION: RC-CE | RTIFICATION OF | REPRESENTAT | VE - A BU | ostantiel number | of employees wish in | be represented | for purpos | es of collective |
| bergaining by Petitioner and Petitioner de requests that the National Labor Relat | asires to be certific | ed as representati | ve of the c | mployees. The F | atitioner alleges th | at the following | n cheumai | Socos eviet and |
| 2a. Name of Employer | Don't proc | 2b. Ac | idress(es) | of Establishment | (s) invalved (Street a | und number, city | , State, Zif | cc (code) |
| North Louisiana Chips, Inc. | | 1905 | | | Monrae, LA 71; | 292 | | ,, |
| 3a. Employer Representative - Name and Guy Owens Mill Manager / John | | v | 3b. Ad same | dress (if same as | 2b – state same) | | | |
| 3c. Tel. No. | 3d. Cell No. | <u> </u> | 3e. Fa) | No. | · | 3f. E-Mail Add | 1628 | |
| | (501)212-13 | | | | | guyo@thep | | |
| 42. Type of Establishment (Factory, mine, * Mill | rholossier, etc.) | 4b. Principal pro Wood chips | iduct or se | rviçe | | | - | where unit is located: .ouisiana |
| 5b. Description of Unit Involved | | | | | <u> </u> | | | Employees in Unit: |
| Included: All full-time and part-time I | | | mployee: | s, employed by | North Louisiana C | thips, Inc. at | 17 | |
| its 1905 Jonesboro RD, We | est Monroe, Lou | lisiana. | | | | | | substantial number (30% of the employees in the |
| Excluded: Office clericals and pro | fessional emp | oloyees, Supe | rvisors | and all other | s as defined by | / the Act. | unit wish | to be represented by the |
| Check One: 7a. Request for re | | | | | y petition = | d Employer dec | lined recog | nition on or about |
| 7h Pethioner is co | | 'if no reply receive d as Bargaloins B | | | erutcation under the | Act | | |
| 8a. Name of Recognized or Cartified Barr | | | | 8b. Address | 71212 | | | |
| 8c. Tel No. | 8d Cell No. | | Se. Fax No. | | | 8f. E-Mail Address | | |
| 8g. Affiliation, if any | | | 8h. Date | of Recognition or | Certification 8l. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) | | | |
| none | | | | | | Contract, if an | y (MOHUI, L | vay, 1984) |
| 9. Is there now a strike or picketing at the E | • | | | | | | | |
| (Name of labor organization) | | | | | | | | |
| 10. Organizations or individuals other than known to have a representative interest in a | Petitioner and tho my employees in | se named in items the unit described | 6 and 9, in item 5b | which have claime above. (If none, | ed recognition as rep so state) | resentatives an | d other org: | anizations and individuals |
| 10s. Name | 10b. Ad | Ob. Address | | | 10c. Tel. No. | | 10d. Ce | ii No. |
| | | | | | 10e. Fax No. | 10e. Fax No. 10f. E-Mail Address | | |
| 11. Election Details: If the NLRB conducts | àn election in thi | s matter, state yo | ur position | with respect to | 11s. Election Type: Manual Mail Mixed Manual/Mail | | | |
| any such election. 11b. Election Date(s): September 10, 2019 | | | | 11d. Election Location(s): break room | | | | |
| 12b. Address (street and number, city, state, and ZiP code) United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Aliced industry and Service Workers international Union AftCiO 60 Boulebard of the Allieds, Pittsburgh, PA 15222 | | | | | | | | |
| 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if name, so state) United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industry and Service Workers International Union AFL- CIO | | | | | | | | |
| 12d. Tel No. | 12e. Cell No. | | 12f. Fa | | | 12g. E-Mail A | idress | |
| | will accent con- | ira of all sense (| or pursua | see of the sensee | entation proceeding | <u> </u> | | |
| 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. | | | | | | | | |
| | 13st. Name and Title John D Broussard, USW Rep. 13b. Address (street and number, city, state, and ZIP code) 1300 RIBINGBROOK Dr. Baytown, TX 77521 | | | | | ··· | | |
| 13¢. Tel No. | 13d. Cell No. (615)585-0976 | | 13e. Fax No. 13f. E-Mail Address jbroussard@usw.org | | | | | |
| I declare that I have read the above petition and that the statements are true to the best of my knowledge and bellef. | | | | | | | | |
| Name (Print) A STORM D. RYOLLAS CONT. D. STORM | gratege / | mul | THE Staff NEW 8-27-2019 | | | | | |
| WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) | | | | | | | | |
| <i>\begin{align*} \text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex</i> | | PR | VACY AC | T STATEMENT | | | | |

PRIVACY ACT STATEMENT

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NLR8 to decline to invoke its processes.