FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE Date Filed,

- RC	PETIT	ION			U0-KC-23	1309	1	11-/-19		, 1	•
INSTRUCTIONS: Unless e-Fil	ed using the	Agency's	s website, w	vw.nlrb.	gov, submit a	n original of this	Petition to	an NLRB o	ffice in th	e Regioi	n
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											
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 no						12 1012). 1110 01	noming or		o, z	ag. 100	2
1. PURPOSE OF THIS PETITION:	RC-CERTIFIC	ATION OF R	EPRESENTAT	VE - A su	bstantial number	of employees wish to	o be represer	ted for purpose	s of collect	ive	200
 bargaining by Petitioner and Petit 	ioněr desires to	be certified	as representati	ve of the e	mployees. The I	Petitioner alleges th	nat the follow	ving circumsta	nces exist		
requests that the National Labo	r Relations Bo	pard procee									<u> </u>
2a. Name of Employer Persad Center						(s) involved (Street a 00, Pittsburgh, F	-	city, State, ZIP	coae)		
3a. Employer Representative - Na	me and Title		10001			2b – state same)	A 13201				. *
Carlos Torres, Interim Execu		nr.		Same	uress (II sairie as	20 - State Same)					
- 3c. Tel. No.		ell No.	· · · · · ·	3e. Fax	No	·	3f. E-Mail A	Address		-	
(412) 441-9786 ext. 212	50.0	Cii 110.		00.10	. 110.			persadcente	er ora		
4a. Type of Establishment (Factory,	mine. wholesa	ler etc.)	4b. Principal pro	duct or se	rvice		_	ity and State wi	•	located: r	10 TO TO
office/non-profit organization	24					unity programmi		burgh, PA	1010 0//// 10	,0001.01.	<u>-</u>
5b. Description of Unit Involved	-					7 3	·· ·		Employees	in Unit.	
Included: All full-time and regu	lar bart-time	professiona	al and non-pro	fessiona	l employees en	noloved at the Em	plover's	Approxima		21. (2014	il
facilities located at 5									ubstantial n		
Excluded:	111 al a ⁸ t. a. a. a. t.		al = 61 a. = al 1 a.	41 A	-4				f the employ be represe		
All guards, and	a şapervis	sors as	aennea in	tne A	CI			1	· ·	No l	
Check One: / 7a. Reque	st for recognition	n as Bargair	ning Representa	tive was r	nade on (Date) h	v petition an	d Employer o				
	eply		no reply receive			' 	• ,	J		, et	
7b. Petition	ner is currently	recognized a	as Bargaining R	epresenta	tive and desires o	certification under the	e Act.				
8a. Name of Recognized or Certific None	ed Bargaining	Agent (If no	one, so state).		8b. Address						٠,
8c. Tel No.	ii 8d Ce	ell No.		8e. Fax	No.		8f. E-Mail A	Address			F.
			· · · · · · · · · · · · · · · · · · ·	<u> </u>							à
8g. Affiliation, if any				8h. Date	of Recognition or	Certification		on Date of Curre		Recent	
	Ç.						Contract, ii	any (Month, Da	y, rear)		
9. Is there now a strike or picketing a	at the Employer	's establishn	ment(s) involved	? No	If so approx	imately how many er	nolovees are	participating?			
	4.					-	p.eyeee are	paraorpamig.			
(Name of labor organization)						Month, Day, Year)				212.1	=
 10. Organizations or individuals othe known to have a representative inter 							resentatives	and other orgai		individua Troff (35	
none	h.	,		05	above. (ii none,	55 51010)			, '	in Desi-(30	
10a. Name	61	10b. Addre	ess			10c. Tel. No.		10d. Cell	No.	112 12	43
••										= [23]	**
F. (5					10e. Fax No.		10f. E-Ma	ail Address		
. 11. Election Details: If the NLRB o	ार onducts an ele	ction in this r	matter state voi	r position	with respect to				7	}+f*	
any such election.	i.		matter, state you	n position	with respect to	11a. Election Type	::Manua	alMail _[_	міхеа м	anual/Mail	:
.11b. Election Date(s):	ŧ		tion Time(s):			11d. Election Loca	ition(s):				
12/4/19		1	0 a.m. and 3:0	0-5:00 p.r	m.	break room					-:-
12a. Full Name of Petitioner (inclu United Steel, Paper and Forestry, Rubber, Manu	<i>aing iocai nar</i> facturing, Energy, <i>i</i>	ne ana num Allied & Industria	i <i>lber)</i> al Service Workers Ir	ternational U	Inion AFL-CIO CLC	12b. Address (stre	et and numbe	e <i>r, city, state, al</i> eway Center Roc	<i>10 ZIP CODE</i> Im 913Pittsh	9 <i>)</i> uroh PA 15	:222
12c. Full name of national or internal								eway Center 1100		uigii, i A io	
United Steel, Paper and Forestry, F							n, AFL-CIO,	CLC			
12d, Tel No.		Cell No.		12f. Fa	x No.		12g. E-Mail	l Address		7877	==
(412) 562-2529		418-4333			32-2555		bmanzolillo	@usw.org		• • • • • • • • • • • • • • • • • • • •	
13. Representative of the Petition	***			or purpos	es of the repres	entation proceedin	g.			والمالات	TZ.
13a. Name and Title Brad Manz	olili̇̀o, USW	Organizir	ng Counsel			d number, city, state, ive Gateway Center Roo			₹.	्राज्या प्रतिस्तित्व सार्वेद्वारी	وا الم
. 13c. Tel No.		Cell No.		13e. Fa		,	13f. E-Mail			7.7	j. Grafe-
(412) 562-2529		418-4333			52-2555		bmanzolillo	@usw.org		1977	3
declare that I have read the abov	- 10		atements are tr	ue to the I	best of my know	riedge and belief.					187,34
Name (Print)	Signature	171	1.11	Title			Date			وني.	
Brad Manzolillo	Draa	YILAN	nzolilli		ring Counsel	MADDIO ON THE STATE OF	11/6/19		011 122 ::	· · · · · · · · · · · · · · · · · ·	
WILLFUL FALSE STA	HIEWENIS O	N IHIS PEII	()			IMPKISONMENT (U	.S. CODE, T	IILE 18, SECT	UN 1001)		
i i			- PRI	VAUY AC	T STATEMENT						

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by 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.

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE							
Case No.	Date Filed						
06-RC-251380	11-7-19						

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							
of condes showing service on the	ia is located.	i ne petition mus	t be accompanied by . So named in the petiti	oom a snowing or on of: (4) the petitic	miterest (see	nent of Position form	
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.							
PURPOSE OF THIS PETITION: RC- bargaining by Petitioner and Petitione	CERTIFICATION	OF REPRESENTAT	TVE - A substantial number	of employees wish to the Petitioner alleges that	e represented t the following	for purposes of collective circumstances exist and	
requests that the National Labor R		roceed under its pro	oper authority pursuant to	Section 9 of the Nati	onal Labor Re	ations Act.	
2a. Name of Employer Linde Gas North America LL	^		ddress(es) of Establishmen North Drive, Sewick		d number, city,	State, ZIP code)	
		1303					
3b. Address (If same as 2b – state same) Mike Benscoter, Manager 3b. Address (If same as 2b – state same) 503 North Drive, Sewickley, PA 15143							
3c. Tel. No. 412-741-6613	3d. Cell No.		3e. Fax No.	[3f. E-Mail Addre	'	
4a. Type of Establishment (Factory, min Manufacture	e, wholesaler, etc.		oduct or service Nitrogen Gas	•	5a. City a Sewick	nd State where unit is located; ev. PA	
5b. Description of Unit Involved	-	1		÷		6a. No. of Employees in Unit;	
Included: All full-time drive	ers				- F	6b. Do a substantial number (30%	
Excluded:					1	or more) of the employees in the	
Office clerical, su	<u> </u>		<u> </u>			unit wish to be represented by the Petitioner? Yes 🗸 No	
Check One: 7a. Request fo		argaining Represent) (If no reply receive		ov petition and	Employer declir	ned recognition on or about	
7b. Petitioner i	s currently recogn	ized as Bargaining R	tepresentative and desires	certification under the A	\ct.		
8a. Name of Recognized or Certified E None Known	Bargaining Agent	(If none, so state).	8b, Address				
8c. Tel No.	8d Cell No.		8e. Fax No.		9f. E-Mail Addre		
8g. Affiliation, if any			6h. Date of Recognition o			ate of Current or Most Recent (Month, Day, Year)	
9. Is there now a strike or picketing at the	e Employer's esta				loyees are part	iclpating?	
(Name of labor organization)	B-1111		keted the Employer since (the second individuals	
10. Organizations or individuals other the known to have a representative interest	in any employees	nose named in nems in the unit described	in item 5b above. (If none,	ed recognition as repre , so state)	sentarives and	other organizations and individuals	
10a. Name	10b.	Address		10c. Tel. No.		10d. Cell No.	
				10ė. Fax No.		10f. E-Mail Address	
 Election Details: If the NLRB condi- any such election. 	ucts an election in	this matter, state you	ur position with respect to	11a. Election Type:	✓ Manual	MaiiMixed Manual/Mali	
11b, Election Date(s): TBD	TBD			11d. Election Location Facility			
12a. Full Name of Petitioner (including General Teamsters, Chauffeurs and	d Helpers Loca	Union 249 a/w IE		4701 Butler Street,		ly, state, and ZIP code) A	
12c. Full name of national or international International Brotherhood of Teams		on of which Petitioner	r is an affiliate or constituen	t (if none, so state)	•		
12d. Tel No. 412-682-3700	12e. Cell No	•	12f. Fax No. 412-682-3732		2g. E-Mail Add @teamsters		
13. Representative of the Petitioner w	ho will accept se	rvice of all papers f	or purposes of the repres	entation proceeding.			
13a. Name and Title Steven E. V	Vinslow, Un	ion Attorney	13b. Address (street and Jubelirer, Pass & Intrieri, I			PA 15222	
13c. Tel No. 412-281-3850	13d, Cell No		13e. Fax No. 412-281-1985		13f. E-Mail Addı w@jpilaw.cor		
I declare that I have read the above pe	tition and that th	e statements are tr	ue to the best of my know	viedge and belief.			
Name (Print)	Signature		Title		Date		
Steven E. Winslow	Signature &	11/~	Union Attorney		11/7/2019		

VINISION 11/7/2019

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 libigation. 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.

FORM NLRB-502 (RC) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD • RC PETITION

DO NOT WRITE IN THIS SPACE						
	Date Filed					
06-RC-251822	11-15-19					

									1	
INSTRUCTIONS: Unless e-Filed us employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48:	he petition n named in ti	nust be accom he petition of:	panied b (1) the pe	y both a sh tition; (2) S	owing of interest (se tatement of Position	e 6b below) ar form (Form N	d a certificat .RB-505); an	e of service si d (3) Descripti	nowing s on of Re	ervice on presentation
PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petit requests that the National Labo	ioner desires	to be certified	as represe	entative of th	ne employees. The Pe	titioner allege:	that the foli	owing circums	stances e	
2a. Name of Employer:					Establishment(s) invol	ved (Street and	number, City	, State, ZIP cod	te):	
Poleset, Inc.				erity, PA	y Pike Rd 15329					
3a. Employer Representative - Nan	ne and Title:				e as 2b - state same):	:		<u></u>		
Bruce Livingood / Owner			Same		ŕ					
3c. Tel. No. 724-222-9414	·					3f. E-Mail	Address			
4a. Type of Establishment (Factory, I		aler, etc.)		1	al Product or Service		1	d State where	unit is loc	ated:
High Voltage Utility Contractor				Installation	on / Maintenance		Prosperi	<u>• · · · · · · · · · · · · · · · · · · ·</u>		
5b. Description of Unit Involved: Included:								r of Employees	in Unit:	
see attached							18			
Excluded: see attached							of the e	ubstantial numb imployees in the inted by the Pe	e unit wis	<u>h</u> to be
Check One: 🗶 7a. Request for rec						5/2019 a		leclined recogn		<u> </u>
on or about (Date) ☐ 7b. Petitioner is cui	11/15/	`		eceived, so : esentative a	•	n under the Act				
8a. Name of Recognized or Certifie						ir dilder ale Aei				
None										
8c. Tel. No.	8d. Cell No.			8e. Fax No).	8f. E-Mail	8f. E-Mail Address			
Bg. Affiliation, if any:				Bh. 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 a	t the Employ	er's establishm	ent(s) invo	olved? No	If so, approx	rimately how ma	iny employee	s are participati	ng?	
(Name of Labor Organization)						, has pickete	d the Employ	er since (Month	, Day, Ye	ear)
 Organizations or individuals othe individuals known to have a repre None 								es and other or	ganizatior	ns and
10a. Name		10b. Address				10c. Tel. 1	10c. Tel. No. 10d. Cell No.			
							10e. Fax No. 10f. E-F		fail Address	
·										
11. Election Details: If the NLRB co	nducts and e	lection in this m	atter, stat	te your posit	ion with respect to any	y such election:	l	n Type: d	□ Miyoo	l Manual/Mail
In person, secret ballot 11b. Election Date(s):		11c. Election Ti	me(s):			11d Flect	ion Location(s	<u> </u>		- I Waliuali Wali
12/9/2019		05:00-06:30	1110(3).			1		•	Washin	gton PA 15301
12a. Full Name of Petitioner (includ IBEW Local Union 126	ling local nan	ne and number)	l:		12b. Address (street 3455 Germanto Collegeville, PA	wn Pike	y, State and 2	ZIP code):		
12c. Full name of national or internat International Brotherhood of E		•				if none, so state):			
12d. Tel. No.	12e. Cell No	0.		12f. Fax N	O.	12g. E-Ma	il Address			
6104891185	48489588	376				msimmo	nds@ibewl	u126.com		
13. Representative of the Petitione	r who will a	ccept service (of all pape			-	_			
13a. Name and Title: Michael Simmonds				l .	ess (street and number ermantown Pike	i, uiy, siale ani	i zir code).			
Organizer					ville, PA 19426					
13c. Tel. No.	13d. Cell No	o.				13f. E-Mai	Address			
610-489-1185	484-895-8			<u> </u>			nds@ibewl	u126.com		
I declare that I have read the above	e petition an			re true to th	ne best of my knowle	7				
Name (Print)		Signatu	e//	11		Title				Date 11/15/2019
Michael Simmonds			" U		-	Organizer				1113/2013

Supplemental information for RC Per	tition IBEW 126 / POLESET, Inc
	į.
11/15/2019	

Section 5b

Included:

All full time and regular part time Electric Linemen Foremen, Electric Linemen, Electric Linemen Apprentices, Electric Construction Powerline Equipment Operators, Electric Line Construction Groundhands employed on 11/15/19

Excluded:

Equipment Mechanics, Managerial employees, Shop employees, Confidential Employees, Clerical, Guards and Supervisors as defined by the Act

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
06-RC-252250	11-22-19				

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 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.

(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								
bargaining by Petitioner and Petitioner								
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)								
Linde LLC Sewickely 503 North Drive PA Sewickley, 15143-								
3a. Employer Representative - Name	and Title		3b. Address (If same as	2b – state same)		**		
Mike Benscoter			503 North Drive PA Sewickley, 151	43_				
3c. Tel. No.	3d. Cell No.		3e. Fax No.		. E-Mail Addre	ess		
(412) 741-6613	(000) 000-000) .	(000) 000-0000					
4a. Type of Establishment (Factory, mir.	e, wholesaler, etc.)	4b. Principal pro	duct or service	. 1	5a. City a	nd State where unit is located:		
Services		indus	trial supply Gas and Liquid	& Technology		Sewickley, PA		
5b. Description of Unit Involved	· · · · · · · · · · · · · · · · · · ·					6a. No. of Employees in Unit:		
Included: See Attached Page 2 for ad	ditional details				<u>L</u>	3		
<u> </u>					·	6b. Do a substantial number (30%		
Excluded: See Attached Page 2 for ad	ditional details					or more) of the employees in the unit wish to be represented by the		
3337 Maarit						Petitioner? Yes [☑] No [☐]		
Check One: 7a. Request for	or recognition as Ban	gaining Representa	tive was made on (Date)	and E		ned recognition on or about		
	(Date)	(If no reply received	d, so state).	_		·		
7b. Petitioner	is currently recognize	ed as Bargaining Re	epresentative and desires of	certification under the Ad	at.			
8a. Name of Recognized or Certified	Bargaining Agent <i>(I</i>	f none, so state).	8b. Address					
· · · · · · · · · · · · · · · · · · ·	- 1-2-2-11-2-							
8c. Tel No.	8d Cell No.		8e. Fax No.	81	. E-Mail Addre	ess		
8g. Affiliation, if any		•	8h. Date of Recognition or	Certification 8	Evoiration D	ate of Current or Most Recent		
og. Allination, il arry			on. Date of Newghillon of			(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 th						other organizations and individuals		
known to have a representative interest								
		 	·					
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.		
				10e. Fax No.		10f, E-Mail Address		
•				TOE. PAX NO.		TOI. E-IVIAII Address		
11. Election Details: If the NLRB cond	lucts an election in th	is matter, state you	r position with respect to	11a Flection Type: F	/ Manual C	Mail Mixed Manual/Mail		
any such election.			· · · · · · · · · · · · · · · · · · ·			J. Wall J.J. Wilder Walldall Wall		
11b. Election Date(s): ASAP	1	lection Time(s):		11d. Election Location	ı(s):			
12a. Full Name of Petitioner (Includin	AM Ho		· . ·	TBD	and number of	ty, state, and ZIP code)		
John Patrick Gaffney John Gaffney International Union of Operating	Speinsom Loos OF	umber)		300 Saline Street PA Pittsburgh 15207-	ına number, cı	ly, state, and ZIP code)		
12c. Full name of national or internation	al labor organization	of which Petitioner	is an affiliate or constituen	L.PA Pittsburgh 15207 t (if none. so state)		· · · · · · · · · · · · · · · · · · ·		
International Union of Operating Engineer								
12d. Tel No.	12e. Cell No.	•	12f. Fax No.		2g. E-Mail Add			
(412) 422-4702	(412) 980-9134		.:		affney@iuoelo	ocal95.org		
13. Representative of the Petitioner v	vho will accept serv	ice of all papers fo						
13a, Name and Title Rich Galardi Attorney			13b. Address (street and					
Rich Galardi Attorney Galardi Oliver & Lomupo Benedum Trees Building 10th Floor 223 Fourth Ave PA Pittsburgh 15222-								
13c. Tel No.	13d. Cell No.	•	13e. Fax No.		3f. E-Mail Add gilardi@lawgo			
(412) 391-9770	(412) 527-3050		(412) 391-9780		-Sucrain Grawa			
I declare that I have read the above p		statements are tru		rieuge and beliet.				
Name (Print)	Signature	21 /	Title	Dódr	Date			
John Patrick Gaffney Assistant Business Manager 11/15/2019 12:50:10								

affiney John Patrick Gattney Assistant Business Manager 11/15/2019 12:50:10
WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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Attachment

Employees Included
Gas Cylinder Filler Techs

Ĺ

Employees Excluded Managers, Drivers / Delivers

DO NOT WRITE IN THIS SPACE					
Case 06-RC-252250	Date Filed 11-22-19				

UNITED STATES GOVERNMENT	DO NOT WRITE	IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD	Case No.	Date Filed
RC PETITION	06-RC-252515	11-27-19
ISTRUCTIONS: Unless a Filed using the Agency's website, www.nlrb.	any submit an original of this Potitic	n to an MI DR office in the Pagion

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 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 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) 1537 Elizabeth Pike, Mineral Wells, WV 26150 WV Mineral Wells 26150-Area Wide Protective (AWP) 132-Parkersburg, WV 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 1537 Elizabeth Pike, Mineral Wells, WV 26150 WV Mineral Wells 26150-Natasha Cooper 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (304) 494-1761 (304) 494-1761 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Traffic/Work Zone Control Services Mineral Wells, WV 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit wish to be represented by the See Attached Page 2 for additional details Petitioner? Yes [] No [] 7a. Request for recognition as Bargaining Representative was made on (Date) _ Check One: and Employer declined recognition on or about (Date) (If no reply received, so state). 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). 8b. Address 8c. Tel No. 8d Cell No 8e. Fax No 8f. E-Mail Address 8g. 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 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) 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 Mail Mail Mixed Manual/Mail any such election 11b. Election Date(s): 12/22/2019 Ballots Mailed 11c. Election Time(s): 11d. Election Location(s): Mail Ballot Mail Ballot 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Dale McCray International Brotherhood of Electrical Workers Local Union 978 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Electrical Workers 12g. E-Mail Address dale_mccray@ibew.org 12d. Tel No. 12e. Cell No. 12f. Fax No. (304) 841-2140 (304) 841-2140 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) 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 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 Dale McCray International Lead Organizer Dale McCray 11/26/2019 19:13:39

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.

Employees Included

All Protectors and Sr Protectors (aka flaggers, safety control specialists), reporting to Area Wide Protective (AWP) 132-Parkersburg, WV

Employees Excluded

All other employees, confidential employees, guards, and supervisors as defined in the Act.