| UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE | | | | | | | | | | |
|--|---|-----------------------|---------------------------------------|--|---------------------------------|------------------------------------|--|--|--|--|
| UNITED STATES | | | | DO NOT \ | | | | | | |
| NATIONAL LABOR RELATIONS BOARD Case No. | | | | | Date | | | | | |
| RC PETITION 14-RC-238828 April 1, 2019 | | | | | | | | | | |
| 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 | s named in the petition | on of: (1) the petiti | on; (2) State | ement of Position form | | | | |
| (Form NLRB-505); and (3) Descript | ion of Repres | entation Case P | Procedures (Form NLI | RB 4812). The sho | owing of int | erest should only be filed | | | | |
| with the NLRB and should not be s | | | | , | | | | | | |
| 1. PURPOSE OF THIS PETITION: RC-CE | RTIFICATION OF | REPRESENTATI | VE - A substantial number | of employees wish to | be represented | for purposes of collective | | | | |
| bargaining by Petitioner and Petitioner de | esires to be certif | ied as representa iv | e of the employees. The | Petitioner alleges tha | t the following | g circumstances exist and | | | | |
| 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) | | | | | | | | | | |
| Criterion Corporation 1635 Engman Lake Road MI Skandia 49885- | | | | | | | | | | |
| 3a. Employer Representative – Name and | I Title | | 3b. Address (If same as | | | | | | | |
| Paul Ross | | | 600 6th st Bldg 14 MO Whiteman Air | 0 Force Base 65305- | | | | | | |
| 3c. Tel. No. | 3d. Cell No. | | 3e. Fax No. | | 3f. E-Mail Add | ress | | | | |
| | (660) 287-8282 | 2 | | | paul ross 9 ctr@ | us.af mil | | | | |
| 4a. Type of Establishment (Factory, mine, w | vholesaler, etc) | 4b. Principal proc | duct or service | - | 5a. City | and State where unit is located: | | | | |
| Services | | | Facility Services | | | Knob Noster, MO | | | | |
| 5b. Description of Unit Involved | | | - | | | 6a. No. of Employees in Unit: | | | | |
| Included: See Attached Page 2 for addition | nal details | | | | | 7 | | | | |
| See Allacheu Fage 2 for addition | | | | | | 6b. Do a substantial number (30% | | | | |
| | | | | | | or more) of the employees in he | | | | |
| Excluded: See Attached Page 2 for addition | nal details | | | | | unit wish to be represented by the | | | | |
| | | | | | | Petitioner? Yes [🗹 No [🗌] | | | | |
| Check One: 7a. Request for re | | | | and | Employer dec | lined recognition on or about | | | | |
| | | (If no reply received | | | | | | | | |
| 7b. Petitioner is c | urren ly recognize | ed as Bargaining Re | epresentative and desires (| certification under the / | Act. | | | | | |
| 8a. Name of Recognized or Certified Bar | gaining Agent (I | f none, so state). | 8b. Address | | | | | | | |
| 8c. Tel No. | 8d Cell No. | | 8e. Fax No. | | 8f. E-Mail Add | ress | | | | |
| | | | | | | | | | | |
| 8g. Affiliation, if any | • | | 8h. Date of Recognition or | | | Date of Current or Most Recent | | | | |
| | | | | | Contract, if any | y (Month, Day, Year) | | | | |
| | | | | | | | | | | |
| 9. Is there now a strike or picketing at the E | mployer's establis | shment(s) involved | ? No If so, approx | imately how many emp | oloyees are pa | rticipating? | | | | |
| (Name of labor organization) | | , has pick | eted the Employer since (I | Month, Day, Year) | | | | | | |
| 10. Organizations or individuals other than I | | | | | | | | | | |
| known to have a representative interest in a | | | | | | | | | | |
| | | | | | | | | | | |
| 10a. Name | 10b. Ad | dress | | 10c. Tel. No. | | 10d. Cell No. | | | | |
| | | | | | | | | | | |
| | | | | 10e. Fax No. | | 10f. E-Mail Address | | | | |
| | | | | | | | | | | |
| Election Details: If the NLRB conducts any such election. | s an election in th | is matter, state you | r position with respect to | 11a. Election Type: | 📃 Manual 💽 | 🔼 Mail 📃 Mixed Manual/Mail | | | | |
| 11b. Election Date(s): | 11c. E | lection Time(s): | | 11d. Election Loca id | on(s): | | | | | |
| April 30 | 2pm | | | NRLB | | | | | | |
| 12a. Full Name of Petitioner (including lo Kevin Rusnak Kevin Rusnak | cal name and n | umber) | | 12b. Address (street 6601 Winchester suite MO Kansas City 6413 | and number, o 280 | city, state, and ZIP code) | | | | |
| 12c. Full name of national or international la MO | bor organization | of which Petitioner | is an affiliate or constituen | | | | | | | |
| 12d. Tel No. | 12e. Cell No. | | 12f. Fax No. | | 12g. E-Mail Ad kr@iuoelocal1 | Idress | | | | |
| (816) 737-8600 | (816) 591-2466 | | (816) 737-8700 | | kr@iuoelocal1 | D1.org | | | | |
| 13. Representative of the Petitioner who | will accept serv | ice of all papers fo | or purposes of the repres | entation proceeding. | | | | | | |
| 13a. Name and Title | | | 13b. Address (street and | d number, city, state, a | nd ZIP code) | | | | | |
| | | | | | | - | | | | |
| 13c. Tel No. | 13d. Cell No. | | 13e. Fax No. | | 13f. E-Mail Ad | dress | | | | |
| I declare that I have read the above petiti | on and that the | statements are tru | l le to the best of my know | ledge and belief. | | | | | | |
| Name (Print) Sig | anature | | Title | | Date | | | | | |
| | evin Rusnak | | Business Representative | ; | 04/1/2019 | 09.00.27 | | | | |
| WILLFUL FALSE STATEME | NTS ON THIS PE | ETITION CAN BE P | | | | | | | | |

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.

DO NOT WRITE IN THIS SPACE

Date Filed

Attachment

Case

Employees Included

All maintenance, boiler operators, labors employees including leads.

Employees Excluded

Supervisors, clerical and security employees

| | | | DO N | OT WRITE IN THIS SPACE |
|--|---|---|--|--|
| ORM NLRB-502 (RD) (2-18) | UNITED STATES OF AMERIC NATIONAL LABOR RELATIONS B RD PETITION | | Case No. 14-RD-238749 | Date Filed 4/1/2019 |
| employer concerned is loca the employer and all other p | iled using the Agency's website, www ted. The petition must be accompanie parties named in the petition of:(1) the p RB 4812). The showing of interest shou | d by both a showing of in letition; (2) Statement of I | terest (see 7 below) and a cer Position form (Form NLRB-50 | lificate of service showing service on 5); and (3) Description of Representation |
| recognized bargaining repres | ON: RD-DECERTIFICATION (REMOVAl sentative is no longer their representative. ceed under its proper authority pursual | The Petitioner alleges the | at the following circumstance | oyees assert that the certified or currently s exist and requests that the National |
| Name of Employer | 2 (BTC) 51 | A W. HENSLE | ent(s) involved (Street and number Street and number) | er, city, state, ZIP code) |
| ERRI JOS | SLEN | Address (If same as 2b - st | | |
| Type of Establishment (Factor | 718 | 3-331-8011 | 3f. E-Mail Address TSOSLEN & 4b. Principal product or serv | EXCHANGE. SLB.COM |
| Description of Unit Involved | RUILES COMPANY | TECH. CENTER | ALTIFICIAL I | |
| 1 1 | s engaged in the productiv r Bartlesville Technology (| 4. S. C. | | is located: |
| luded: All office, pro | ofessional, and confidentia | l employees and | | 0K 74003 |
| defined in Sec o. of Employees in Unit | ction 2 of the Act as amend 7. Do a substantial number (30% recognized bargaining represe | or more) of the employee: | | represented by the certified or currently |
| Name of Recognized or Certi | ified Bargaining Agent | 6 ENGINEERS | AFL-CTO 8b. Affiliation, if a | iny |
| Address(b)(6)(| b) (7)(C) | (b) (6), (| 5) (7)(C) ^{8e. Cell No.} | |
| b) (6), | , (b) (<i>1</i>)((| 8f. Fax No. | Most Recent Contract, II any (| 6), (b) (7)(C) |
| | | | M | AL 31ST 20M |
| . Is there now a strike or picke | eting at the Employer's establishment(s) in | ivolved? Yes Yo | 11b. If so, approximately how | many employees are participating? |
| The Employer has been pick | eting at the Employer's establishment(s) in ceted by or on behalf of <i>(Insert Name)</i> | ivolved? Yes Yo | | a labor organization, o |
| . The Employer has been pick (Insert Address) | | | s | a labor organization, or ince (Month, Day, Year) |
| . The Employer has been pick <i>(Insert Address)</i> Organizations or individuals o | xeted by or on behalf of <i>(Insert Name)</i> | ch have claimed recognition | s as representatives and other o | a labor organization, of ince (Month, Day, Year) irganizations |
| . The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have | ceted by or on behalf of <i>(Insert Name)</i> other those named in items 8 and 11c, whi e a representative interest in any employe | ch have claimed recognition | s n as representatives and other o em 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. | a labor organization, of ince (Month, Day, Year) irganizations |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name | teted by or on behalf of <i>(Insert Name)</i> other those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address 3 conducts an election in this | ch have claimed recognition | s n as representatives and other o em 5 above. <i>(If none, so state)</i> 12c. Tel. No. | a labor organization, or ince <i>(Month, Day, Year)</i> irganizations 12d. Fax No. 12f. E-Mail Address |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with | xeted by or on behalf of <i>(Insert Name)</i> other those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address | ch have claimed recognition | s as representatives and other o em 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. | a labor organization, of ince <i>(Month, Day, Year)</i> organizations 12d. Fax No. 12f. E-Mail Address |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE | teted by or on behalf of <i>(Insert Name)</i> other those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address 3 conducts an election in this n respect to any such election. | ch have claimed recognition | s n as representatives and other o tem 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. | a labor organization, of ince <i>(Month, Day, Year)</i> organizations 12d. Fax No. 12f. E-Mail Address |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with Election Date(s) Full Name of Petitione | teted by or on behalf of <i>(Insert Name)</i> other those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address 3 conducts an election in this n respect to any such election. | ch have claimed recognition | s n as representatives and other o tem 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. | a labor organization, of ince <i>(Month, Day, Year)</i> organizations 12d. Fax No. 12f. E-Mail Address |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with Election Date(s) Full Name of Petitione Address (Street and number, | teted by or on behalf of <i>(Insert Name)</i> other those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address 3 conducts an election in this n respect to any such election. | ch have claimed recognition | s n as representatives and other o em 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. 13a. Election Type: Manu 13d. Election Location(s) | a labor organization, of ince <i>(Month, Day, Year)</i> irganizations 12d. Fax No. 12f. E-Mail Address uat Mail Mixed Manual/Mail |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with Election Date(s) Full Name of Petitions Address (Street and number, (b)) (Address (Street and number, Contemportation, in any Representative of the Petitio | teted by or on behalf of <i>(Insert Name)</i> other those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address 3 conducts an election in this n respect to any such election. | ch have claimed recognition es in the unit described in i (7)(C) (C) | s n as representatives and other of tem 5 above. <i>(If none, so state)</i> 12c. Tel. No. 13a. Election Type: Manu 13d. Election Location(s) 14b. Tel. No. (b) (6), (b) (7)(C) resentation proceeding. | a labor organization, of ince (Month, Day, Year) irganizations 12d. Fax No. 12f. E-Mail Address Jual Mail Mixed Manual/Mail 14c. Fax No. |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with Election Date(s) Full Name of Petitione Address (Street and number, (b)) (Annuation, ir any Representative of the Petitio | ther those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address B conducts an election in this n respect to any such election. 13c. Election Time(s) (b) (6), (b) (b) (city, state, Ell Code) | ch have claimed recognition es in the unit described in i (7)(C) (C) | s n as representatives and other over 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. 13a. Election Type: Manual 13d. Election Location(s) 14b. Tel. No. (b) (6), (b) (7)(C) | a labor organization, of ince (Month, Day, Year) irganizations 12d. Fax No. 12f. E-Mail Address Jual Mail Mixed Manual/Mail 14c. Fax No. |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with Election Date(s) Full Name of Petitione Address (Street and namper, (b)) (Ammauon, Ir any | ther those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address B conducts an election in this n respect to any such election. 13c. Election Time(s) (b) (6), (b) (b) (city, state, Ell Code) | ch have claimed recognition es in the unit described in i (7)(C) (C) | s n as representatives and other of tem 5 above. <i>(If none, so state)</i> 12c. Tel. No. 13a. Election Type: Manu 13d. Election Location(s) 14b. Tel. No. (b) (6), (b) (7)(C) resentation proceeding. | a labor organization, of ince (Month, Day, Year) irganizations 12d. Fax No. 12f. E-Mail Address Jual Mail Mixed Manual/Mail 14c. Fax No. |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with Election Date(s) Full Name of Petitione Address (Street and number, (b)) (Amiliation, if any Representative of the Petition Name | ther those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address 3 conducts an election in this n respect to any such election. 13c. Election Time(s) (b) (6), (b) (b) (chy, state, 2h code) (b) (code) (b) (code) (b) (code) | ch have claimed recognition es in the unit described in i (7)(C) (C) | s n as representatives and other over 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. 13a. Election Type: Annual 13d. Election Location(s) 14b. Tel. No. (b) (6), (b) (7)(C) resentation proceeding. 15b. Title | a labor organization, of ince (Month, Day, Year) irganizations 12d. Fax No. 12f. E-Mail Address Jal Mail Mixed Manual/Mail 14c. Fax No. (b) (6), (b) (7)(C) |
| The Employer has been pick (Insert Address) Organizations or individuals o and individuals known to have Name Election Details: If the NLRE natter, state your position with Election Date(s) Full Name of Petitione Address (Street and nameer, (b)) (Annauon, it any Representative of the Petitio Name | ther those named in items 8 and 11c, whi e a representative interest in any employe 12b. Address 3 conducts an election in this n respect to any such election. 13c. Election Time(s) (b) (6), (b) (b) (chy, state, 2h code) (b) (code) (b) (code) (b) (code) | ch have claimed recognition es in the unit described in i (7)(C) (C) rs for purposes of the rep | s as representatives and other over tem 5 above. <i>(If none, so state)</i> 12c. Tel. No. 12e. Cell No. 13a. Election Type: Manu 13d. Election Location(s) 14b. Tel. No. (b) (6), (b) (7)(C) resentation proceeding. 15b. Title 15d. Tel. No. | a labor organization, of ince (Month, Day, Year) irganizations 12d. Fax No. 12f. E-Mail Address Iat Mail Mixed Manual/Mail 14c. Fax No. (b) (6), (b) (7)(C) |

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| UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE | | | | | | | | | |
|---|---------------------------------|------------------------|--|---|----------------|--|--|--|--|
| NATIONAL LABOR RELATIONS BOARD Case No. Date Filed | | | | | | | | | |
| RC PETITION 14-RC-239185 April 8, 2019 | | | | | | | | | |
| 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 t | he employer and | all other parties | named in the petitio | on of: (1) the peti | tion; (2) St | atement of Position form | | | |
| (Form NLRB-505); and (3) Desc | ription of Repres | entation Case Pi | rocedures (Form NLI | RB 4812). The sl | howing of | interest should only be filed | | | |
| with the NLRB and should not l | | | | , | - | - | | | |
| 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) | | | | | | | | | |
| 97 Libbey Industrial Parkway 4th Floor | | | | | | | | | |
| BHI Energy MA Weymouth 02189- 3a. Employer Representative – Name and Title 3b. Address (If same as 2b – state same) | | | | | | | | | |
| Rebecca Reed | | | | al Parkway 4th Floor 189- | | | | | |
| 3c. Tel. No. | 3d. Cell No. | | 3e. Fax No. | 189- | 3f. E-Mail A | Address | | | |
| (508) 591-1140 | ou. com ro. | | (508) 747-4279 | | | ed@bhienergy.com | | | |
| 4a. Type of Establishment (Factory, mir | ne, wholesaler, etc.) | 4b. Principal prod | · · · | | | ity and State where unit is located: | | | |
| Energy | ,,, | | | | | Burlington, KS | | | |
| 5b. Description of Unit Involved | | | | | | 6a. No. of Employees in Unit: | | | |
| Included: See Attached Page 2 for ad | ditional datails | | | | | 8 | | | |
| See Allached Page 2 for au | | | | | | 6b. Do a substantial number (30% | | | |
| Evelude de | | | | | | or more) of the employees in he | | | |
| Excluded: See Attached Page 2 for ad | ditional details | | | | | unit wish to be represented by the Petitioner? Yes Ves | | | |
| Check One: 7a. Request for | or recognition on Dar | naining Depresentati | ve was made on (Deta) a | 4/04/0040 | | | | | |
| Ta. Request in | | | ve was made on (Date) <u>0.</u> , <i>so state)</i> . No reply recei | | iu Employer (| declined recognition on or about | | | |
| The Retitioner | | | presentative and desires | | Act | | | | |
| 8a. Name of Recognized or Certified | | | 8b. Address | | CAU. | | | | |
| IBEW Local Union 304 John Garretson | | , | 3906 NW 1 KS TOPEK | 16TH ST. | | | | | |
| 8c. Tel No. | 8d Cell No. | | 8e. Fax No. | | 8f. E-Mail A | Address | | | |
| (785) 235-2301 | | | | | johng@ibew304. | org | | | |
| 8g. Affiliation, if any | | 8 | 3h. Date of Recognition or | r Certification | | on Date of Current or Most Recent | | | |
| International Brotherhood of Electrical W | orkers | | | | Contract, II | any (Month, Day, Year) 09/21/2021 | | | |
| 9. Is there now a strike or picketing at the | o Employada actabli | chmont(c) involved? | NO If co approv | imately how many er | nnlovooc aro | | | | |
| | ie Employer s establi | | | | npioyees are | parucipaung? | | | |
| (Name of labor organization) | | | ted the Employer since (I | | | · | | | |
| 10. Organizations or individuals other th | | | | | resentatives | 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. Ad | dress | | 10c. Tel. No. | | 10d. Cell No. | | | |
| | | | | | | | | | |
| | | | | 10e. Fax No. | | 10f. E-Mail Address | | | |
| | | | | | | | | | |
| 11. Election Details: If the NLRB cond | lucts an election in th | is matter, state your | position with respect to | pect to 11a. Election Type: 📝 Manual 🦳 Mail 🦳 Mixed Manual/Mail | | | | | |
| any such election. 11b. Election Date(s): | 11c F | lection Time(s): | | 11d. Election Loca | ion(s): | | | | |
| ASAP | ASAP | lection mile(3). | | Worksite | 1011(3). | | | | |
| 12a. Full Name of Petitioner (includin John Garretson IBEW Local Union 304 | | | | 3906 NW 16th St. KS Topeka 66618- | et and numbe | er, city, state, and ZIP code) | | | |
| 12c. Full name of national or internation International Brotherhood of Electrical W | al labor organization orkers | of which Petitioner is | s an affiliate or constituen | t (if none, so state) | | | | | |
| 12d. Tel No. | 12e. Cell No. | | 12f. Fax No. | | 12g. E-Mai | Address | | | |
| (785) 235-2301 | | | (785) 235-3342 | | johng@ibev | พอบ4.019 | | | |
| 13. Representative of the Petitioner v 13a. Name and Title | vho will accept serv | ice of all papers for | 13b. Address (street and | | - | e) | | | |
| 13c. Tel No. | 13d. Cell No. | | 13e. Fax No. | | 13f. E-Mail | Address | | | |
| I declare that I have read the above p | etition and that the | statements are true | e to the best of my know | ledge and belief. | | | | | |
| Name (Print) | Signature | I | Title | - | Date | | | | |
| John Garretson | John Garretson | | Business Manager / Fina | ancial Secretary | | 19 16:22:15 | | | |
| WILLFUL FALSE STATE | MENTS ON THIS P | TITION CAN BE PL | INISHED BY FINE AND | IMPRISONMENT (II | | | | | |

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.

DO NOT WRITE IN THIS SPACE

Case

Attachment

Date Filed

Employees Included Radiation Protection at Wolf Creek Nuclear Power Plant

Employees Excluded

All non Radiation Protection employees of BHI

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

UNITED STATES OF AMERICA ыл

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| RC PETITION 1/4 - RC - 239.80.8 4 - 1/0 - 19 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 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. |
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| 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 |
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| requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. |
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| 2a. Name of Employer: 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): |
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| American Water 1060 Fox Chase Industrial Dr, Arnold Mo 63010 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): |
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| Bub Clemens Libir Relitions 727 Craig Road, Creve Coever Mo 63141 3c. Tel. No. J14-986-2395 31.4-281-4348 31.4.981-2715 Bub Clemens O anwater, Com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service 5a. City and State where unit is located: |
| 519-996-2595 SIY-281-4548 SIY. 751-2113 Bub Clemens Q an Water, Com |
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| 4a. Type of Establishment (Factory, mine, wholesaler, etc.) Utility 5b. Description of Unit Involved: Included: All full Time and resultan part time Fure person, chief uperstur operate 6a. Number of Employees in Unit: plant uperstur, uperstions specialist and utility person. 01. Description of Unit Involved: 10. City and State Where Unit is located: Armsl d Mo 6a. Number of Employees in Unit: 10. City and State Where Unit is located: 10. City and State Where Unit is located: 11. City and State Where Unit is located: 11. City and State Where Unit is located: 12. City and State Where Unit is located: 13. City and State Where Unit is located: 14. City and State Where Unit is located: 14. City and State Where Unit is located: 15. City and State Where Unit is located: 16. City and State Where Unit is located: 16. City and State Where Unit is located: 16. City and State Where Unit is located: 17. Cit |
| 5b. Description of Unit Involved: 1 , the second Exclose of the second o |
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| plent operator, operations fear and a star perations specialist and a viring person |
| Excluded: |
| <u>SII MRAGETS CAL SUPERVISORS & SACTINCE by the Act</u> of the employees in the unit wish to be represented by the Petitioner? <u>Yes</u> <u>I</u> Check One: <u>7a.</u> Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition |
| Check One: 7a. Request for recognition as Bardaining Representative was made on (Date) 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. |
| Ba. Name of Recognized or Certified Bargaining Agent (If none, so state) 8b. Address: |
| Ba. Name of Recognized or Certified Bargaining Agent (It none, so state) Bb. Address: |
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| 8g. Affiliation if any: |
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| 8g. Affiliation, if any: 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) |
| 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? If so, approximately how many employees are participating? |
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| Bg. Affiliation, if any: Bh. Date of Recognition or Certification Bi. Expiration Date of Current or Most, Market Manual Ma |

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) turther explain these uses upon request. Disclosure of this information to the NLKB is voluntary, however, Salure to Supply the information may cause the NLKB to decline to invoke its processes.

| FORM NU BR 502 (BC) | | D STATES OF A | MERICA | | | | | DO NOT W | RITE IN THIS S | PACE | |
|---|---|---|-----------------------------------|--|--|--|---|--|--|---|---------------------------|
| FORM NLRB-502 (RC) (2-18) | | RC PETITIO | IONS BC | | | Case | | .C-2397 | 07 | Date Filed April 1 | 6, 2019 |
| INSTRUCTIONS: Unless e-Filed us employer concerned is located. To the employer and all other parties Case Procedures (Form NLRB 48 | he petition named in t 12). The sho | must be accomp the petition of: (towing of interest | banied b 1) the pe t should | y both a si tition; (2) only be fil | howing of interest (s Statement of Positio led with the NLRB a | see 6b on form ind sho | below) and n (Form NLF ould not be s | a certificat RB-505); an served on t | e of service sho d (3) Descriptio he employer or | owing servio n of Represe any other p | e on entation arty. |
| 1. PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Labo | ioner desires | s to be certified a | s represe | entative of t | he employees. The F | Petition | ner alleges t | hat the foll | owing circumst | ances exist | and |
| 2a. Name of Employer: ITS Con Global Integratin Int | termodel | | | | Establishment(s) inv mball Drive, Kan | | | - | |): | |
| 3a. Employer Representative - Nan Kelsey Berger, Field HR Lea | | · · · · · · | 3b. Add Same | • | ne as 2b - state same | e): | | | | | |
| 3c. Tel. No. | 3d. Cell No | 1 | | 3e. Fax N | 0. | | 3f. E-Mail A | ddress | | | |
| | 817.526. | | | | - | I | kberger@ | | bal | | |
| 4a. Type of Establishment (Factory, 1 | nine, wholes | saler, etc.) | | | pal Product or Service | | | | d State where u | nit is located: | |
| Logistics Facility | | | | Loading | and Unloading C | Cargo (| Container | | City, Missouri | | |
| 5b. Description of Unit Involved: Included: See attached Exhibit A | | | | | | | | 6a. Numbe | er of Employees i | n Unit: | |
| Excluded: | | | | | | | | | ubstantial numbe | | |
| See attached Exhibit A | | | | | | | | of the e represe | employees in the ented by the Peti | unit wish to l | es ∏ No |
| Check One: 7a. Request for rec | ognition as l | | | | | | and | | eclined recognit | ion 🚬 ⊾ | Z |
| on or about (Date) 7b. Petitioner is cur | mently recog | | | eceived, so esentative | | tion und | ler the Act. | | 2 | 2019 | R |
| 8a. Name of Recognized or Certifie | | | | | ddress: | | | | E E | APR | B |
| NONE | | | | | | | | | OVERLAND | 816 | RECE |
| 8c. Tel. No. | 8d. Cell No | h. | | 8e. Fax N | | | 8f. E-Mail A | | PA | M | GIO |
| 8g. Affiliation, if any: | | | | | Recognition or Certific | | Recent Con | tract, if any | (Month, Day Ye | | N 17 |
| 9. Is there now a strike or picketing a | t the Employ | er's establishme | nt(s) invo | lved? No | lf so, appro | | | | s are particip | | 7 |
| (Name of Labor Organization) | | | | | | | • | | er since (Month, | · · · - | |
| 10. Organizations or individuals other individuals known to have a repre | r than Petitic esentative in | oner and those na terest in any emp | loyees in a | tems 8 and the unit de | 9, which have claime escribed in item 5b at | ed reco bove. (/ | gnition as re If none, so si | tate) NO | | anizations an | a |
| 10a. Name | 1 | 10b. Address | | | | | 10c. Tel. No | | 10d. Cell No. | | |
| | | | | | | - | 10e. Fax No |). | 10f. E-Mail Add | ress | |
| | | | | | | | | | | | |
| 11. Election Details: If the NLRB co | nducts and e | election in this ma | atter, sta | e your pos | ition with respect to a | any suc | h election: | 11a. Election | |] Mixed Mar | ual/Mail |
| 11b. Election Date(s): | | 11c. Election Tin | ne(s) | _ | | | 11d. Election | | | | lual/iviali |
| Tuesday, May 14th, 2019 and | Wednesc | | | and 5:00 | PM to 7:30 PM be | | | | | n Kimball D | rive, Kans |
| 12a. Full Name of Petitioner (includ | | | | | 12b. Address (stree | | | | | | |
| International Brotherhood of | Electrical | Workers Loc | al 124 | | 301 East 103rd | d Terr | race, Kans | sas City, I | Missouri 641 | 14 | |
| 12c. Full name of national or internat | | | ich Petit | ioner is an | affiliate or constituent | it (if non | ne, so state): | | | | |
| International Brotherhood of E | lectrical W | orkers | | | | | | | | | |
| 12d. Tel. No. | . <u> </u> | | | | 10 | | 12g E-Mail | Address | | | |
| | 12e. Cell N | 0. | | 12f. Fax M | | | • | | | | |
| 13. Representative of the Petitione | 12e. Cell N | 0. | f all pap | ers for pur | poses of the repres | entatio | on proceedi | ng. | | | |
| 13. Representative of the Petitione 13a. Name and Title: Rudy Chavez | 12e. Cell N | 0. | f all pap | ers for pur 13b. Addr | | entatio | on proceeding, State and 2 | ng. ZIP code): | 64114 | | |
| 13a. Name and Title: | 12e. Cell N | o. Iccept service of | f all pap | ers for pur 13b. Addr | poses of the repres ess (street and numb st 103rd Terrace | entatio ber, city e, Kan | on proceeding, State and 2 | ng. ZIP code): Missouri (| 64114 | | |
| 13a. Name and Title: Rudy Chavez 13c. Tel. No. 816.285.8340 | 12e. Cell N r who will a 13d. Cell N 816.806. | o. Iccept service of Io. 1840 | <i>N</i> | 13b. Addr 301 Ea 13e. Fax 816.942 | poses of the repres ess (street and numb st 103rd Terrace No. 2.8805 | entatio ber, city e, Kan | on proceedii , State and 2 sas City, 13f. E-Mail / rchavez@ | ng. ZIP code): Missouri (Address | | | |
| 13a. Name and Title: Rudy Chavez 13c. Tel. No. 816.285.8340 I declare that I have read the above | 12e. Cell N r who will a 13d. Cell N 816.806. | o. Inccept service of Io. 1840 Ind that the state | ments a | 13b. Addr 301 Ea 13e. Fax 816.942 | poses of the repres ess (street and numb st 103rd Terrace No. 2.8805 | sentatio ber, city e, Kan | n proceedii , State and S sas City, 13f. E-Mail / rchavez@ and belief. | ng. ZIP code): Missouri (Address | | | 8 |
| 13a. Name and Title: Rudy Chavez 13c. Tel. No. 816.285.8340 I declare that I have read the above Name (Print) | 12e. Cell N r who will a 13d. Cell N 816.806. | o. Iccept service of Io. 1840 | ments a | 13b. Addr 301 Ea 13e. Fax 816.942 | poses of the repres ess (street and numb st 103rd Terrace No. 2.8805 | sentatio ber, city e, Kan vledge | n proceedii , State and 2 sas City, 13f. E-Mail / rchavez@ and belief. | ng. ZIP code): Missouri I Address Jibewlocal | 124.org | Dat 9- 4- | |
| 13a. Name and Title: Rudy Chavez 13c. Tel. No. 816.285.8340 I declare that I have read the above | 12e. Cell N r who will a 13d. Cell N 816.806. e petition ar | o. 1840 nd that the state | monts a | 13b. Addr 301 Ea 13e. Fax 816.942 re true to | poses of the repres ess (street and numb st 103rd Terrace No. 2.8805 he gest of my know | sentatio ber, city e, Kan vledge Titte | n proceedii , State and J sas City, 13f. E-Mail / rchavez@ and belief. | ng. ZIP code): Missouri Address Dibewlocal | 124.org esentatu | e 4- | ° 15-19 |

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 may cause the NLRB to decline to invoke its processes.

EXHIBIT A

5. Unit Involved (In UC petition, describe present bargaining unit and attach description of proposed clarification.)

Included; All full-time and regular part-time Terminal Operators, Terminal Operator Leads and Gate Clerks employed by the employer at the facility located at 4800 N. Kimball Drive, Kansas City, Missouri 64161

Excluded; All other employees including Operations Managers, maintenance employees, managerial employees, office employees and guards, professional employees and supervisors defined by the act.

NLRB, REGIVED 17 2019 APR 16 AM 9: 59 OVERLAND PARK, KS

| | | | | | | DO NOT | WRITE IN | THIS SPA | CE | · · · · |
|---|---|---|------------------------------------|-------------------------------------|------------------------------|---|------------------------------|---------------------------|--------------------------|----------------------|
| FORM NLRB-502 (RD) (2-18) | NATIONAL L | STATES OF AMER ABOR RELATIONS | | | Case N 14- | | | 1 | ate Filed | 17/19 |
| INSTRUCTIONS: Unless e-F employer concerned is loca the employer and all other p Case Procedures (Form NL) | ted. The petition . arties named in th | must be accompan he petition of:(1) th | nied by both a le petition; (2) | showing of inter Statement of Po | rest (see 7 l sition form | elow) and a certifi (Form NLRB-505); | cate of seri and (3) De | rice show scription | ing serv of Repre | ice on sentation |
| 1. PURPOSE OF THIS PETITIC recognized bargaining repre- Labor Relations Board pro- | sentative is no long | er their representati | ve, The Petitic | oner alleges that | the followir | ig circumstances e | es assert ti stist and re | at the cer quests th | tified or c at the N: | currently ztional |
| 2a. Name of Employer | | | | | | (Street and number | ; city, state, | ZIP code) | | |
| East Side Lumb | exuard Su | naly CO, | 726 | James 5 | •• | · | | | | - 62202 |
| 3a. Employer Representative | Name and Title S SR. | | | same as 2b - stat Pernod | e same) | | | 0313 | | |
| 3c. Tel. No. | 3d. Fax No. | | e, Cell No. | | 3f. E-Mail | Address | | - | | |
| 4a. Type of Establishment (Fact | Lory, mine, wholesa | | 314) 440 | 2-2501 | | ゴシェレビビシム al product or service | | AHW | <u>. Co</u> | <u>n</u> |
| Wholesater_ | | | | | Bui | Iding Ma | | | | |
| Sa. Description of Unit Involved | and Detur | | | | | | | City and S is located: | | re unit |
| | UNCA DELOG | ., . | | | | | | 5T. L | | |
| Excluded: | | | | | | | - | 51. L2 | | |
| 5. No. of Employees in Unit | - 7. Do a s | ubstantial number (| 30% or more) | of the employees i | n the unit no | longer wish to be n | | | | |
| 84. Name of Recognized or Cen | recogi | nized bargaining rep | | | | 8b. Affiliation, If an | | | | |
| Pat Nichols | ana na Sauni A V | June | | | | Binner | 1 | t | | |
| 8c. Address | | | | 8d, Tel. No. | | Se. Cell No. | <u>it den</u> | | · | |
| 1609 N. ILLIX | · · · • | - | | | 3.0313 | | | | | |
| Suransea, PL | 62226 | , | | 8f. Fax No. | | 8g. E-Mail Address Pat.nichol | | . | <i></i> CO | |
| 9, Date of Recognition or Certific | ation | 1 | | | | t Contract, if any (M | onth, Day, Y | lear) (ear) | 5 3 0 | |
| | | | No | Current. | 1 | | | | | |
| 11a. Is there now a strike or pick | | | | | 11b, f co, | approximately how r | many emplo | | • | |
| 11c, The Employer has been pic (Insert Address) | Keted by or on ben | an or (insertiverne) | , | | | ein | ce (Month, I | | - | anization, of |
| 12, Organizations or individuals | other those named | In items 8 and 11c, | which have cla | aimed recognition | as représén | tatives and other org | anizations | | | |
| and individuals known to have 12a. Name | 12b. Addre | | ioyees in <u>itte u</u> | THE DESCRIDED IN RE | 12c. Tel. N | | 12d, Fax | 10, | | |
| | | | | | | | | S | ~ | |
| | | | | | 12a, Çell N | lo. | 12f. E-Mai | Address | · · · · · | 12 |
| 13. Election Details: If the NLR | | | . | | 13a. Electi | on Type: Manua |) I 🗌 Mai | Г (Т м | xed Man | |
| matter, state your position wit 13b. Election Date(s) | th respect to any so | 13c. Election Time | (8) | | 13d. Electio | on Location(s) | | - 2 | | |
| | | | ., | | | | | 5 | 1 | -22 |
| ¹ (b) (6), (b) | (7)(C) | | | | | | | j. | | 38 |
| | 、 () | | | | (b) (6 |), (b) (7)(C) | 14c. Fax N | 4 (3 | ••• | |
| (b) (6), (| N) (1 | (\mathbf{C}) | | | (b) (6) | , (b) (7)(C | | I Address | | |
| - | | · · · · · | | | (8) (8) | , (2) (1)(3) | ′(D) | (6), | (b) |)(/)((|
| 14. Affiliation, if any 15. Representative of the Petiti | ioner who will acc | ent service of all o | apers for pur | poses of the repr | esentation | procesting. | | | | |
| 159 Nemp | | spe service of on p | apera tor pur | poses of all repl | 15b,Title | | | | - | |
| (b) (6), (b) (| /)(C) | | | | | | | | | |
| (b) (6), (b) | (7)(C) | ođej | | | (b) (6), | (b) (7)(C) | 15e. Fax h | 10. | | |
| | $(')(\mathbf{C})$ | | | | (b) (6) | (b) (7)(C) | | Ô | (la) | |
| 1 | | 16 = 4 16 = | | ha baad of our too | | | (a) | 0), | (a) | (T)(C) |
| I declare that I have read the at Name (Print) | 10: | | | ne Dest of My KA | Title | a deper, | | | Date File | d . |
| (b) (6), (b) (7)(C) | | o) (6), (b) | (7)(C) | | | house | | | | |
| | STATEMENTS | | PRIVACY | HED BY FINE AN ACT STATEMENT | D IMPRISO | MENT (U.S. CODE | , TITLE 18 | SECTION | 1001) | |
| Solicitation of the information on this | form is authorized by t | na National Labor Relat | | | | al use of the informatio | n is to assist i | he National | Labor Rela | tions 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 may 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 | I THIS SPACE |
|-----|-----------------------|--------------|
| 14- | Case No. RC-240508 | Date |
| | | |

| Date File | 0/19 |
|--------------------|-------|
| the Region in whic | h the |

.

| INSTRUCTIONS: Unless e-Filed u employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48 | he petition mus s named in the p | t be accomposition of: (1) | anied by l) the petit | both a sh ion; (2) S | owing of interest (see tatement of Position f | e 6b below) an form (Form NL | d a certifica .RB-505); ar | te of service showing nd (3) Description of I | y service on Representation | |
|---|-------------------------------------|----------------------------|---------------------------|--|--|---------------------------------|--|--|---------------------------------------|--|
| 1. PURPOSE OF THIS PETITION: I bargaining by Petitioner and Petit requests that the National Labo | tioner desires to I | be certified as | represent | ative of th | e employees. The Peti | itioner alleges | that the fol | lowing circumstance | | |
| 2a. Name of Employer: Schilli Corporation d/b/a Keig | ghtley Bros. | | | | Establishment(s) involv Drive Fenton, Mo | | number, City | ı, State, ZIP code): | | |
| 3a. Employer Representative - Nar Dennis Frey Vice President | | | 3b. Addres Same | ss (if sam | e as 2b - state same): | | | | | |
| c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 336-717-2600 dfrey@schillicorp.com | | | | | | | | | | |
| 4a. Type of Establishment (Factory, a | mine, wholesaler | ;, etc.) | 4 | b. Princip | al Product or Service | | | nd State where unit is I | ocated: | |
| Construction-Raw Materials | | | Γ | ranspor | tation of Bulk Produ | ucts | Fenton, | Missouri | | |
| 5b. Description of Unit Involved: | | | | | · · · · · · · · · · · · · · · · · · · | | 6a. Numbe | er of Employees in Uni | t: | |
| Included: See Attachment | | | | | | | 15 | | | |
| Excluded: | | | | | | | 6b. Do a s | ubstantial number (30 | % or more) | |
| | | | | | | | | employees in the unit v ented by the Petitioner | | |
| Check One: 7a. Request for rec | cognition as Barg | aining Repres | sentative w | as made | on (Date) | ar | d Employer | declined recognition | | |
| on or about (Date) | | | reply rece | | state). nd desires certification | under the Act | PETITI | IN CONSTITU | 123 | |
| 8a, Name of Recognized or Certific | | | | | | | | EXVICE | | |
| | | • | | | | | | | | |
| 8c. Tel. No. | 8d. Cell No. | | 8 | e. Fax No | | 8f. E-Mail | Address | | <u> </u> | |
| 8g. Affiliation, if any: | <u> </u> | | 8h. [| 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 a | t the Employer's | establishmen | t(s) involve | ed? No | lf so, approxi | mately how ma | ny employee | es are participating? | | |
| (Name of Labor Organization) | | | | | | , has pickete | d the Employ | ver since (Month, Day, | Year) | |
| 10. Organizations or individuals othe individuals known to have a repre None | | | | | | | | es and other organizat | ions and | |
| 10a. Name | | . Address | | | | 10c. Tel. N | | 10d. Cell No. | _ | |
| Teamsters Local 600 | | 1 VVeldon H 043 | Jarkway | Maryla | nd Heights, Mo | 314-388 | | 10f. E-Mail Address | | |
| | 03 | 043 | | | | 10e. Fax N 314-388- | | jkelting@teamste | rs600.org | |
| 11. Election Details: If the NLRB co | nducts and elect | ion in this mat | tter, state | our posit | on with respect to any | | | | | |
| | | | | | | | | at 🔄 Mail 🛄 Mix | ed Manual/Mail | |
| 11b. Election Date(s): | | Election Time | e(s): | | | | on Location(| | en egel s filter | |
| May 13, 2019 | | m-8am | | | | - | | | | |
| 12a. Full Name of Petitioner (includ John Kelting Teamsters Loc | - | nd number): | | | 12b. Address (street a 161 Weldon Park | ind number, cit way Maryla | y, State and and Height | ZIP code) | BREDE | |
| 12c. Full name of national or internat | | ization of which | ch Petition | er is an a | ffiliate or constituent (if | none, so state, |): | | a keya | |
| International Brotherhood of T | | | <u>.</u> | | | | | <u>– </u> | n Richar Jackson Jackson (1993) | |
| 12d. Tel. No. 314-388-4400 | 12e. Cell No. | | | 2f. Fax No 14-388- | | 12g. E-Mai ikelting@ | il Address)teamsters | .600.org | . > | |
| 13. Representative of the Petitione | r who will acce | pt service of | - | | | | | | | |
| 13a, Name and Title: John Kelting Recording Sect | | | 1: | 3b. Addre | ss (street and number, don Parkway Mar | city, State and | I ZIP code): | ü | | |
| 13c. Tel. No. | 13d, Cell No. | | | 3e. Fax N | | 13f. E-Mail | | | | |
| 314-388-4400 | <u> </u> | | | 14-388- | | | teamsters | 600.org | | |
| I declare that I have read the above Name (Print) | e petition and th | Signature | nents are | true to th | | Ige and belief. Title | - | | Date | |
| John Kelting | | |]]] | / | | Recording S | ecretary | | 4/30/19 | |
| | · <u> </u> | _ Ge | ~ pl | 0 | > ,-⊥ | | | | | |

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE FUNISHED 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 may cause the NLRB to decline to invoke its processes.

5b. Description of Unit Involved: Included

All full-time, and regular part-time drivers employed by the Employer, dispatched out of its Fenton Missouri terminal only

Excluded:

All clerical and shop employees, salesmen, guards and supervisors as defined by the act

COLEA OM SIUOJ IMIAE

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

| UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE | | | | | | | | | | |
|--|---|-----------------------|--|------------------------------------|-----------------------------|--|--|--|--|--|
| RC PETI | | 14-RC- | 240546 | | 4/30/19 | | | | | |
| INSTRUCTIONS: Unless e-Filed using | g the Agency | y's website, <u>w</u> | vw.nlrb.gov, submit | an original of thi | s Petition to a | 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-CERTI | IFICATION OF | REPRESENTATI | VE - A substantial number | er of employees wish | to be represente | d for purposes of collective | | | | |
| bargaining by Petitioner and Petitioner desir requests that the National Labor Relation | res to be certific | ed as representativ | e of the employees. The | e Petitioner alleges (| that the followin | ng circumstances exist and | | | | |
| 2a. Name of Employer | ns board proc | | dress(es) of Establishme | | | | | | | |
| LMI Aerospace | | 6325 | Avantha Drive, V | |) 63090 Fra | anklin County | | | | |
| 3a. Employer Representative - Name and Ti Tad Dewalt, Operations Manage | | | 3b. Address (If same SAME | as 2b – slate same) | | | | | | |
| | 3d. Cell No. | | 3e, Fax No. | | 3f. E-Mail Add | dress | | | | |
| 636-231-4200 | | | 636-231-4201 | | | @Imiaerospace.com | | | | |
| 4a. Type of Establishment (Factory, mine, who | olesaler, etc.) | 4b. Principal proc | | | | and State where unit is located: | | | | |
| 5b. Description of Unit Involved | | Aircraft Com | iponents | ····· | Wash | ington, MO 6a. No. of Employees in Unit: | | | | |
| included: All full time and regular pa | art time Pro | duction and M | aintonanio Employ | 000 | | 125 | | | | |
| All full time and regular pa | artume Fio | | antenance Employ | 663. | | 6b. Do a substantial number (30% | | | | |
| Excluded: All other employees include | iding office c | lerical employ | ees, professional e | mployees, mana | gerial | or more) of the employees in the unit wish to be represented by the | | | | |
| employees, guards and s | | | | | | Petitioner? Yes 🗸 No | | | | |
| Check One: 7a. Request for reco | | • | tive was made on (Date) d, so state). Petition t | | • • | clined recognition on or about | | | | |
| 7b. Petitioner is curre | | | epresentative and desire | • | | | | | | |
| 8a. Name of Recognized or Certified Bargain None | | | 8b. Address | | · | <u></u> | | | | |
| | 8d Cell No. | | 8e. Fax No. | | 8f. E-Mall Add | iress | | | | |
| 8g. Affiliation, if any | | | 8h. Date of Recognition | or Cartification | 8i Expiration | Date of Current or Most Recent | | | | |
| og. Amilation, it any | | | on bate of recognition | or deraication | | ny (Month, Day, Year) | | | | |
| 9. Is there now a strike or picketing at the Emp | oloyer's establis | hment(s) involved | ? NO If so, appro | oximately how many e | imployees are pa | articipating? | | | | |
| (Name of labor organization) | | , has pick | eted the Employer since | (Month, Day, Year) | | <u>> 2</u> | | | | |
| 10. Organizations or individuals other than Peti | | | | | presentatives ar | id other organizations and individuals | | | | |
| known to have a representative interest in any | employees in t | ne unit described i | in item so above. (ii non | ie, so siaie) | | | | | | |
| 10a. Name | 10b. Add | Iress | | 10c. Tel. No. | | 10d Cell No. | | | | |
| | | | | 10e, Fax No. | | 10f=E-Mail Address | | | | |
| | | | | · | | <u> </u> | | | | |
| 11. Election Details: If the NLRB conducts an any such election. | | | r position with respect to | 11a. Election Typ | e: 🔽 Manual [| Mail Mixed Manual/Mail | | | | |
| 11b. Election Date(s): May 23 & 24, 2019 | | ection Time(s): | 1 5:30 pm - 6:30 pm | 11d. Election Loc Conference Ro | | | | | | |
| 12a. Full Name of Petitioner (including local | I name and nu | mber) | ,, | 12b. Address (str | eet and number, | cily, slale, and ZIP code) | | | | |
| District Lodge 9, International Associati | ion of Machir | nists & Aerospa | ce Workers AFL-CIC | D 113 Republic A | venue, Ste. 10 | 00, Joliet, IL 60435 | | | | |
| 12c. Full name of national or international labor International Association of Machinists & | | | 00 | ent (if none, so state) | | | | | | |
| | 12e. Cell No. 30-430-6455 | _ | 12f. Fax No. 815-280-6345 | | 12g. E-Mail A rmickschl@ | | | | | |
| 13. Representative of the Petitioner who will | | | | esentation proceedi | | | | | | |
| 13a. Name and Title Rick Mickschl, Gran | nd Lodge Re | presentative | 13b. Address (street a 113 Republic Ave | | | | | | | |
| 13c. Tel No. 1 | 13d. Cell No. | | 13e. Fax No. | | 13f. E-Mail A | | | | | |
| 815-280-6400 63 | 30-430-6455 | | 815-280-6345 | | rmickschl@ | iamaw.org | | | | |
| I declare that I have read the above petition | | tatements are tru | | owiedge and belief. | 1 Data | | | | | |
| Name (Print) Sinfa Rick Mickschl | an This | hall | Grand Lodge Repre | esentative | Date April 30, | | | | | |
| WILLFUL FALSE STATEMENT | S ON THIS PE | TITION CAN BE F | UNISHED BY FINE AN | D IMPRISONMENT (| | | | | | |

PRIVACY ACT STATEMENT Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 *el 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.