ILLINOIS LABOR RELATIONS BOARD

☐ **LOCAL PANEL:** e.g., County of Cook, City of Chicago, Chicago Transit Authority, Forest Preserve District of Cook County

☐ **STATE PANEL:** e.g., State of Illinois, county governments, municipal governments, Regional Transportation Authority

DO NOT WRITE IN THIS SPACE
CASE NUMBER
DATE FILED

EMPLOYER'S PETITION FOR EXPEDITED ELECTION

INSTRUCTIONS: In accordance with the Illinois Public Labor Relations Act, 5 ILCS 315, *as amended,* and the Rules and Regulations of the Illinois Labor Relations Board, 80 Ill. Adm. Code §1210.190, the following information is required. Submit an original and one (1) copy of this petition to the Illinois Labor Relations Board. If more space is required for any item, attach additional sheet(s), numbering items accordingly. This petition may be filed in either of the Board's offices or at **ILRB.Filing@illinois.gov**

Illinois Labor Relations Board 801 South 7th Street, Suite 1200A Springfield, Illinois 62703 (217) 785-3155	Illinois Labor Relations Board 160 North LaSalle Street, Suite S-400 Chicago, Illinois 60603-3103 (312) 793-6400

This agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 5 ILCS 315, *as amended*. Disclosure of this information is REQUIRED. Failure to provide any information will result in this form not being processed.

THE PETITIONING EMPLOYER ALLEGES THAT PICKETING COVERED BY 10(b)(7)(C) HAS BEEN OR IS BEING CONDUCTED BY THE LABOR ORGANIZATION AND THE PETITIONER SEEKS AN EXPEDITED ELECTION PURSUANT TO THAT SECTION.

1.	**NAME OF PETITIONING EMPLOYER**	**TELEPHONE NUMBER**
	ADDRESS	**E-MAIL**
2.	**EMPLOYER'S REPRESENTATIVE**	**TELEPHONE NUMBER**
	ADDRESS	**E-MAIL**
3.	**NAME OF PICKETING LABOR ORGANIZATION**	**TELEPHONE NUMBER**
	ADDRESS	**E-MAIL**
4.	**LABOR ORGANIZATION REPRESENTATIVE**	**TELEPHONE NUMBER**
	ADDRESS	**E-MAIL**
5.	**Is there a *CURRENT* exclusive bargaining agent for any of the employees in the proposed unit?** if YES, Current Bargaining Agent: _____	YES ☐ NO ☐
6.	**Is there an *EXISTING* collective bargaining agreement?** (if yes, please attach agreement) if YES, date of expiration: _____	YES ☐ NO ☐

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| 7. | **ELECTION AND/OR RECOGNITION HISTORY PRIOR TO JULY 1, 1984 TO EXTENT KNOWN** |

| 8. | **EMPLOYEES COVERED BY *EXISTING* COLLECTIVE BARGAINING AGREEMENT** (if applicable) |

| 9. | **APPROXIMATE NUMBER OF EMPLOYEES IN UNIT CLAIMED TO BE APPROPRIATE** |

| 10. | **To the extent known, describe the unit claimed by the labor organization to be appropriate for the purpose of collective bargaining** |

Does the proposed unit combine professional/non-professional employees? YES ☐ NO ☐

Which job titles are professional? _____

Does the proposed unit combine craft/non-craft employees? YES ☐ NO ☐

Which job titles are craft? _____

| 11. | **Does the employer agree that the above described unit is appropriate?** YES ☐ NO ☐ |

If NO, indicate what unit, if any, the Employer claims to be appropriate:

Does the employer's proposed unit combine professional/non-professional employees? YES ☐ NO ☐

Which job titles are professional? _____

Does the employer's proposed unit combine craft/non-craft employees? YES ☐ NO ☐

Which job titles are craft? _____

| 12. | **DATE PICKETING BEGAN** |

| 13. | **DESCRIBE, IN DETAIL, the nature and extent of picketing.** Attach evidence, including relevant documents and affidavits supporting the employer's allegation of activities as set forth in 10(b)(7) of the Act. |

I have read the above petition and all attachments. The statements contained therein are true to the best of my knowledge and belief.

BY: _____ **TITLE:** _____

    Signature of person filing petition

                                                DATE: _____