

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-245871

Date Filed

August 1, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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.

2a. Name of Employer:

White Aluminum Fabrication, Inc.

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):

3195 SE Lionel Terr.
Stuart, FL 34997

3a. Employer Representative - Name and Title:

Ronald E. White

3b. Address (if same as 2b - state same):

1615 Alcovy River Drive
Dacula, GA 30019

3c. Tel. No.

770-919-5532

3d. Cell No.

3e. Fax No.

3f. E-Mail Address

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

Fabrication/installation

4b. Principal Product or Service

Aluminum rail installation

5a. City and State where unit is located:

Atlanta, Georgia

5b. Description of Unit Involved:

Included:

Glazers and rail installers in the Metro Atlanta area.

Excluded:

Fabricators, all supervisors as defined by the Act, managerial and clerical employees.

6a. Number of Employees in Unit:

8

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? ☒ Yes ☐ No

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).☐ 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

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)

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 any such election:

11a. Election Type:

☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):

8/26/2019

11c. Election Time(s):

Lunch break

11d. Election Location(s):

3372 Peachtree Rd. Atlanta, GA 30326

12a. Full Name of Petitioner (including local name and number):

International Union of Painters and Allied Trades, District Council 77

12b. Address (street and number, city, State and ZIP code):

5403 Dividend Drive, Decatur, GA 30035

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):

International Union of Painters and Allied Trades (IUPAT)

12d. Tel. No.

678-705-5668

12e. Cell No.

12f. Fax No.

678-705-9081

12g. E-Mail Address

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title:

Nicolas M. Stanojevich

13b. Address (street and number, city, State and ZIP code):

Quinn, Connor, Weaver, Davies & Rouco LLP
3516 Covington Highway, Decatur, GA 30032

13c. Tel. No.

404-299-1211, ext. 121

13d. Cell No.

13e. Fax No.

404-299-1288

13f. E-Mail Address

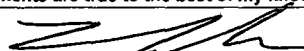
nstanojevich@qcwdr.com

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)

Nicolas M. Stanojevich

Signature



Title

Attorney

Date

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 may cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-245953

Date Filed

08/05/2019

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 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:
NCI Information Systems

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
Building 7872 South Group Patrol Rd., Fort Campbell KY 42223

3a. Employer Representative - Name and Title:
Paul A. Dillahay, President and CEO

3b. Address (if same as 2b - state same):
11730 Plaza America Dr., Reston VA 20190

3c. Tel. No.
520-452-4042

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
djackson@nciinc.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Telecommunications

4b. Principal Product or Service
Telecommunications Services

5a. City and State where unit is located:
Fort Campbell, KY

5b. Description of Unit Involved:
Included:
All full-time & regular part-time LAN. technicians

6a. Number of Employees in Unit:
3

Excluded:
Professional employees, managerial employees, guards and supervisors defined in Act.

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? ☒ Yes ☐ No

Check One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ by petition (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 any such election: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
8/27/19

11c. Election Time(s):
10:00 a.m. - 10:30 a.m.

11d. Election Location(s):
Eagles Conference Room on Indiana Ave.

12a. Full Name of Petitioner (including local name and number):
American Federation of Government Employees, Local 2022

12b. Address (street and number, city, State and ZIP code):
P.O. Box 2761, Clarksville TN 37042

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
American Federation of Government Employees

12d. Tel. No.
270-798-2343

12e. Cell No.
931-477-5766

12f. Fax No.
931-444-2068

12g. E-Mail Address
judy.hansford@comcast.net

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title:
Judy Hansford, Local 2022 President

13b. Address (street and number, city, State and ZIP code):
same as 12b

13c. Tel. No.
same as 12d

13d. Cell No.
same as 12e

13e. Fax No.
same as 12f

13f. E-Mail Address
same as 12g

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

Judy Hansford

Judy Hansford

President

8/2/19

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 may cause the NLRB to decline to invoke its processes.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-245973

Date Filed

08/05/2019

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 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: GC&E Systems Group, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): Building 7872 South Group Patrol Rd., Fort Campbell KY 42223	
3a. Employer Representative - Name and Title: Craig White, Director of Federal Services		3b. Address (if same as 2b - state same): 5835 Peachtree Corners East, Suite A Peachtree Corners, GA 30092	
3c. Tel. No. 770-448-3908	3d. Cell No.	3e. Fax No.	3f. E-Mail Address cwhite@gcesg.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Telecommunications		4b. Principal Product or Service Telecommunications Services	
5a. City and State where unit is located: Fort Campbell, KY		5b. Description of Unit Involved: Included: All full-time & regular part-time hourly paid telecommunication mechanics I, II, Leads Excluded: Professional employees, managerial employees, guards and supervisors defined in Act.	
6a. Number of Employees in Unit: 13		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ by petition (If no reply received, so state). <input type="checkbox"/> 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 <input type="checkbox"/> 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 any such election:		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): 8/27/19	11c. Election Time(s): 7:30 a.m. - 8:30 a.m.	11d. Election Location(s): Eagles Conference Room on Indiana Ave.	
12a. Full Name of Petitioner (including local name and number): American Federation of Government Employees, Local 2022		12b. Address (street and number, city, State and ZIP code): P.O. Box 2761, Clarksville TN 37042	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): American Federation of Government Employees			
12d. Tel. No. 270-798-2343	12e. Cell No. (b) (6), (b) (7)(C)	12f. Fax No. 931-444-2068	12g. E-Mail Address (b) (6), (b) (7)(C)
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: (b) (6), (b) (7)(C) Local 2022		13b. Address (street and number, city, State and ZIP code): same as 12b	
13c. Tel. No. same as 12d	13d. Cell No. same as 12e	13e. Fax No. same as 12f	13f. E-Mail Address same as 12g

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

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

Date

8-2-19

WILLFUL FALSE STATEMENTS OR

IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

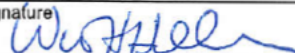
10-RC-246046

Date Filed

Aug. 6, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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.

2a. Name of Employer: Haeco Americas		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 8010 Piedmont Triad Parkway, Greensboro, NC 27409 AND 5568 Gumtree Road, Winston Salem NC 27107	
3a. Employer Representative - Name and Title: Kris Hudson, Director of Human Resources		3b. Address (if same as 2b - state same): 8010 Piedmont Triad Parkway Greensboro, NC 27409	
3c. Tel. No. (336) 668-4410 EXT 241	3d. Cell No.	3e. Fax No.	3f. E-Mail Address Kris.Hudson@haeco.aero
4a. Type of Establishment (Factory, mine, wholesaler, etc.) factory		4b. Principal Product or Service aircraft interior components	
5b. Description of Unit Involved: Included: See Addenda Excluded: See Addenda		5a. City and State where unit is located: Greensboro & Winston Salem, NC	
		6a. Number of Employees in Unit: 170	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) <u>pet serves as req.</u> and Employer declined recognition on or about (Date) <u>pet serves as req.</u> (If no reply received, so state). <input type="checkbox"/> 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		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? <u>No</u> <input checked="" type="checkbox"/> 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) 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 any such election: Note: Overwhelming majority of unit members work at the Greensboro location			
11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): September 13, 2019		11c. Election Time(s): 5-7am and 2-4pm	
		11d. Election Location(s): Break Rooms at each location	
12a. Full Name of Petitioner (including local name and number): International Association of Machinists and Aerospace Workers		12b. Address (street and number, city, State and ZIP code): 9000 Machinists Place, Upper Marlboro, MD 20772	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Association of Machinists and Aerospace Workers			
12d. Tel. No. 301-967-4510	12e. Cell No.	12f. Fax No.	12g. E-Mail Address whaller@iamaw.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: William H. Haller, Associate General Counsel		13b. Address (street and number, city, State and ZIP code): 9000 Machinists Place, Upper Marlboro, MD 20772	
13c. Tel. No. 301-967-4510	13d. Cell No.	13e. Fax No.	13f. E-Mail Address whaller@iamaw.org
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) William H. Haller		Signature 	Title Associate General Counsel
			Date 8/6/2019

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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Haeco Americas RC Petition ADDENDA

Petition Section 5b. Description of Unit Involved:

Included:

All individuals employed by the Employer at the Employer's facilities in Greensboro and Winston Salem, North Carolina (addresses in petition), in the following classifications.

Mfg Mechanic SM
Assembler - Level 1
Assembler OL – Apprentice
Assembler OL - Level I
CNC Setup Operator
Engineering Technician
Facilities Mechanic
Inspector-TAS
Inv Control Analyst – Aero
Lead Inspector – Aero
Material Coordinator
Matl & Inv Control Analyst
Mfg - Mech – CT
Mfg - Mechanic Placard Decal
Mfg Mechanic EF
Mfg Mechanic IF

Mfg Mechanic MG
Mfg Mechanic Painter
Mfg Mechanic SM
ODA Inspection Unit Member
Pattern Maker
Plastics Shop Technician
Production Coordinator-ENG.
Production Team Leader
Quality Control Analyst
Shipping - Receiving Clerk
Stockroom Clerk
Stockroom Lead
Test Lab Eng Technician
Tooling & Equipment Technician
Welder - Aero

Excluded:

All other employees, including managers, supervisors, professional employees, office clericals, and guards.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-246175

Date Filed

August 7, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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.

2a. Name of Employer

Parsec Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)

6000 Dr. Luke Glenn Garrett, Jr. Memorial Highway, Austell, GA 30106

3a. Employer Representative Name and Title

Michael Kozlowski Sr., Terminal Manager

3b. Address (If same as 2b state same)

Same

3c. Tel. No.

770-405-3507

3d. Cell No.

815-641-4480

3e. Fax No.

3f. E-Mail Address

mkozlowski@parsecinc.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)

Railway terminal

4b. Principal product or service

Intermodal rail transportation

5a. City and State where unit is located:

Austell, GA

5b. Description of Unit Involved

Included: All full-time and regular part-time truck drivers, lift equipment operators, hostler drivers, groundmen, truck mechanics, crane mechanics, trailer repair, and yard inventory personnel employed by Parsec and who are assigned to perform services at the Norfolk Southern facility, located at 6000 Dr. Luke Glenn Garrett, Jr. Memorial Highway, Austell, GA 30106

Excluded: All other employees.

6a. No. of Employees in Unit:

163

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One:



7a. Request for recognition as Bargaining Representative was made on (Date) 8/7/19 and Employer declined recognition on or about No reply (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).

None

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)

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 any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):

August 16, 2019

11c. Election Time(s):

6-8 am; 12-2 pm; 5-7pm

11d. Election Location(s):

Employee breakroom

12a. Full Name of Petitioner (including local name and number)

Teamsters Local 728

12b. Address (street and number, city, state, and ZIP code)

2540 Lakewood Ave. SW, Atlanta, GA 30315

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

International Brotherhood of Teamsters

12d. Tel. No.

12e. Cell No.

12f. Fax No.

12g. E-Mail Address

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title

Ben Speight, Organizing Director

13b. Address (street and number, city, state, and ZIP code)

2540 Lakewood Ave. SW, Atlanta, GA 30315

13c. Tel. No.

13d. Cell No.

404-604-6762

13e. Fax No.

13f. E-Mail Address

bensp8@gmail.com

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)

Ben Speight

Signature

s/ Ben Speight

Title

Organizing Director

Date

August 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 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.

10-RC-246475

Date Filed

August 13, 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 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 Kumho Tires		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 3051 Kumho Parkway GA Macon 31216-	
3a. Employer Representative - Name and Title Keith Lolley		3b. Address (If same as 2b - state same) 3051 Kumho Parkway GA Macon 31216-	
3c. Tel. No. (478) 812-9666	3d. Cell No. (478) 508-4254	3e. Fax No.	3f. E-Mail Address krolley@kumhotire.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Tires		4b. Principal product or service manufacture tires	
		5a. City and State where unit is located: Macon, GA	

5b. Description of Unit Involved		6a. No. of Employees in Unit: 325
Included: See Attached Page 2 for additional details		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Excluded: See Attached Page 2 for additional details		

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).
☐ 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 any such election.

11b. Election Date(s): August 29 and 30	11c. Election Time(s): 6:30-8:30am and 6:30-8:30pm both days	11d. Election Location(s): employee break room
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12a. Full Name of Petitioner (including local name and number) Brad Manzolillo United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industrial and Service Workers International Union	12b. Address (street and number, city, state, and ZIP code) 60 Blvd of the Allies PA Pittsburgh 15222-
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*12c: Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industrial and Service Workers International Union AFL-CIO, CLC

12d. Tel No. (412) 562-2529	12e. Cell No. (412) 418-4333	12f. Fax No. (412) 562-2555	12g. E-Mail Address bmanzolillo@usw.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Brad Manzolillo Organizing Counsel United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industrial and Service Workers International Union AFL-CIO, CLC		13b. Address (street and number, city, state, and ZIP code) 60 Blvd of the Allies PA Pittsburgh 15222-	
13c. Tel No. (412) 562-2529	13d. Cell No. (412) 418-4333	13e. Fax No. (412) 562-2555	13f. E-Mail Address bmanzolillo@usw.org

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) Brad Manzolillo	Signature Brad Manzolillo	Title Organizing Counsel	Date 08/12/2019 16:13:39
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All full-time and regular part-time production and maintenance employees employed at the Employer's Macon, GA facility.

Employees Excluded

All temporary employees, office clerical and professional employees, supervisors, and guards as defined by the Act.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-246497

Date Filed

Aug. 13, 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 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: DynCorp		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 13500 North Freeway Fort Worth, Tx 76177	
3a. Employer Representative - Name and Title: George Taylor Sr. HR. Director		3b. Address (if same as 2b - state same): same	
3c. Tel. No. 817-224-8189	3d. Cell No. 682 444 6809	3e. Fax No.	3f. E-Mail Address georgetaylor2@dyn-intl.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Coast Guard Contractor		4b. Principal Product or Service Government Services	
5a. City and State where unit is located: Elizabeth City, N.C.		5b. Description of Unit Involved: Included: All C-130 Aircraft maintenance/Logistic Support personnel Excluded: All other employees, Guards and Supervisors as defined by the Act	
6a. Number of Employees in Unit: 90		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 8/8/2019 on or about (Date) no reply (If no reply received, so state). and Employer declined recognition <input type="checkbox"/> 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		8b. Address: N/A	
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? <u>No</u> 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 Eric Benjamin		10b. Address 5510 Yarra Valley Ave Las Vegas, NV 89139	
10c. Tel. No. 775-232-2843	10d. Cell No. 775-232-2843	10e. Fax No. 702-776-6075	10f. E-Mail Address ebenjamin@cwa-union.org

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: 11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s): 8/22/2019	11c. Election Time(s): 10Am thru 1PM	11d. Election Location(s): Employee Break Room
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12a. Full Name of Petitioner (including local name and number):
Eric Benjamin

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):

International Union of Electronic, Electrical, Salaried Machine and Furniture Workers-CWA AFL-CIO


12d. Tel. No. 775 232 2843	12e. Cell No. 775 232 2843	12f. Fax No. 702 776 6075	12g. E-Mail Address ebenjamin@cwa-union.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title: Eric Benjamin, International Representative	13b. Address (street and number, city, State and ZIP code): (b) (6), (b) (7)(C)
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13c. Tel. No. 775 232 2843	13d. Cell No. (b) (6), (b) (7)(C)	13e. Fax No. 702 776 6075	13f. E-Mail Address ebenjamin@cwa-union.org
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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) Eric Benjamin	Signature 	Title Int'l Rep	Date 8/19/2019
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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 may 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.

10-RC-246582

Date Filed

August 14, 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 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 AmeriGuard Security, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 3504 Louis Stephens Drive, Durham, NC 27709	
3a. Employer Representative - Name and Title Human Resources/ Labor Relations		3b. Address (if same as 2b - state same) 5470 W. Spruce #102, Fresno, CA 93722	
3c. Tel. No. 559-271-5984	3d. Cell No.	3e. Fax No.	3f. E-Mail Address operations@ameriguardssecurity.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SECURITY AGENCY		4b. Principal product or service SECURITY	
5b. Description of Unit Involved Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED SECURITY OFFICERS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, EMPLOYED BY AMERIGUARD SECURITY, INC @ 3504 LOUIS STEPHENS DR., DURHAM, NC 27709 Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT.		5a. City and State where unit is located: Durham, NC	
		6a. No. of Employees in Unit: 60	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

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). ITPEU		8b. Address 14 Chatham Center South, Unit B, Savannah, GA 31405	
8c. Tel No. 912-349-1154	8d. Cell No.	8e. Fax No. 912-777-5912	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) unknown	

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)
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 any such election.

11b. Election Date(s): 9/5/19	11c. Election Time(s): 5:00 - 7:00 am & 1:00 - 3:00 pm	11d. Election Location(s):
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12a. Full Name of Petitioner (including local name and number)
International Union, Security, Police and Fire Professionals of America (SPFPA)

12b. Address (street and number, city, state, and ZIP code)
25510 Kelly Road, Roseville, MI 48066

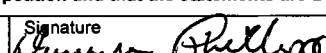
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Union, Security, Police and Fire Professionals of America (SPFPA)

12d. Tel No. 586-772-7250 X111	12e. Cell No. 586-872-5634	12f. Fax No. 586-772-9644	12g. E-Mail Address organize@spfpa.org
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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 48226	
13c. Tel No. 313-964-5600	13d. Cell No.	13e. Fax No. 313-964-2125	13f. E-Mail Address Gordon@UnionLaw.net

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) Dwayne Phillips	Signature 	Title Organizing Director	Date 8/13/19
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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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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. **10-RC-247024** Date Filed **August 22, 2019**

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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.

2a. Name of Employer
General Mills Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
15200 Industrial Park Blvd NE, Covington, GA 30014

3a. Employer Representative - Name and Title
Krys Duffus - Human Resources Director

3b. Address (If same as 2b - state same)
Same

3c. Tel. No.
770-784-2500

3d. Cell No.

3e. Fax No.
770-784-2563

3f. E-Mail Address
krysduffus@genmills.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Manufacturing Plant

4b. Principal product or service
Food Products

5a. City and State where unit is located:
Covington, GA

5b. Description of Unit Involved

Included: All regular full-time employees including Production Technicians, Material Handlers, MATU, Technician Team Leaders, Shift Maintenance, and Shipping and Receiving staff employed at the Covington, GA Facility.

Excluded: All Reliability, FSA, Janitors, Contract Labor, Temporary, Salaried, Office Clerical, Professional, and Supervisors defined by the Act.

6a. No. of Employees in Unit:
260

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

Check One: ☒ **7a.** Request for recognition as Bargaining Representative was made on (Date) 8/22/2019 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).
None

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 any such election.

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
Thurs, Sept 5 & Fri, Sept 6, 2019

11c. Election Time(s):
4 pm to 8 pm (both days)

11d. Election Location(s):
In East Wing Conference Room & In West #1 Conference Room at 15200 Industrial Park Blvd NE, Covington, GA 30014

12a. Full Name of Petitioner (including local name and number)
Retail, Wholesale & Department Store Union/UFCW Southeast Council

12b. Address (street and number, city, state, and ZIP code)
1838 Metropolitan Pkwy, SW, Suite 204, Atlanta, GA 30315

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Retail, Wholesale & Department Store Union/ United Food & Commercial Workers

12d. Tel. No.
404-758-0865

12e. Cell No.
(b) (6), (b) (7)(C)

12f. Fax No.
404-758-5628

12g. E-Mail Address
(b) (6), (b) (7)(C)

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title
James Shackelford, Union Representative

13b. Address (street and number, city, state, and ZIP code)
1838 Metropolitan Pkwy, SW, Suite 204, Atlanta, GA 30315

13c. Tel. No.
404-758-0865

13d. Cell No.
256-227-2785

13e. Fax No.
404-758-5628

13f. E-Mail Address
rwdusec@aol.com

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) James Shackelford Signature [Signature] Title Union Representative Date August 22, 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 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. 10-RC-247224	Date Filed August 27, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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.**

2a. Name of Employer MHN Government Services, Inc. (MHNGS)		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) SEE ATTACHMENT	
3a. Employer Representative - Name and Title Elena Honeycutt, Manager, Human Resources		3b. Address (If same as 2b - state same) 2370 Kerner BLVD San Rafael, CA 94901-5546	
3c. Tel. No. 916-935-0988	3d. Cell No.	3e. Fax No. 916-353-6287	3f. E-Mail Address elena.m.honeycutt@healthnet.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Military Contractor		4b. Principal product or service Military Support	
5b. Description of Unit Involved Included: All regular full time and part time MFLC counselors working for the MFLC program at Camp Lejeune and New River in North Carolina. Excluded: All supervisors, guards, office clerical, and all other employees.		5a. City and State where unit is located: Camp Lejeune and New River, NC	
		6a. No. of Employees in Unit. 19	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

Check One: ☒ **7a. Request for recognition as Bargaining Representative was made on (Date)** By Petition 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? _____ 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 any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): September 10, 2019	11c. Election Time(s): 11:00- 1:00PM and 3:30 - 5:00PM	11d. Election Location(s): Hilton Garden Inn: 1016 Jacksonville Pkwy, Jacksonville, NC 28546	
12a. Full Name of Petitioner (including local name and number) International Association of Machinists and Aerospace Workers, Local Lodge 47		12b. Address (street and number, city, state, and ZIP code) 5621 Bowen Ct., Commerce City, CO 80022	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Association of Machinists and Aerospace Workers, AFL-CIO			
12d. Tel No. (916) 985-8101	12e. Cell No. (b) (6), (b) (7)(C)	12f. Fax No. (916) 985-8121	12g. E-Mail Address (b) (6), (b) (7) @iamaw.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title David W. M. Fujimoto, Attorney		13b. Address (street and number, city, state, and ZIP code) Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501	
13c. Tel No. 510-337-1001	13d. Cell No.	13e. Fax No. 510-337-1023	13f. E-Mail Address nlrbnotices@unioncounsel.net dfujimoto@unioncounsel.net

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) David W. M. Fujimoto	Signature 	Title Attorney	Date August 27, 2019
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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.

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ATTACHMENT TO RC PETITION

2b. Address(es) of Establishment:

- Camp Lejeune, PSC Box 20005, Camp Lejeune, NC 28542, and
- New River Air Station: White St AS-201, Jacksonville, NC 28540

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