

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No 10-RC-230484	Date Filed 11/05/2018

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: 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 RUAG SPACE USA		2b. Address(es) of Establishment(s) Involved (street and number, city, state, zip code) 100 ATLAS AVENUE, TRINITY, AL 35673	
3a. Employer Representative - Name and Title DAVID ROWE - GENERAL MANAGER		3b. Address (If same as 2b - state same) 1101 MCMURTRIE DRIVE NW, STE D2, HUNTSVILLE, AL 35806	
3c. Tel. No. 256-947-2504	3d. Cell No.	3e. Fax No.	3d. E-Mail Address DAVID.ROWE@RUAG.COM
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SIMULATORS		4b. Principal product or service C130J FLIGHT SIMULATION	
5a. City and State where unit is located: TRINITY, AL		5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE: PRODUCTION TECH, PRDUCTION LEAD, QUALITY TECHS, MATERIAL HANDLER, AND ADMINISTRATIVE SUPPORT SPECIALIST. Excluded: OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.	
6a. No. of Employees in Unit: 23		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: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on <u>Petition will serve as request for recognition</u> and Employer declined recognition on or about _____ (date) (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 N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any N/A		8h. Date of Recognition or Certification N/A	
		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A	
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>N/A</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) NONE			
10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A
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): NOVEMBER 29, 2018	11c. Election Time(s): 11:30 PM - 12:30 PM		11d. Election Location(s): PAINT BOOTH
12a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIO		12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011	
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. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	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 JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@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) JAMES R. LITTLE	Signature 	Title GRAND LODGE REPRESENTATIVE	DATE 11/05/2018

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.

FORM NLRB-502 (RC)
(4-15)UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITIONDO NOT WRITE IN THIS SPACE
Case No. **10-RC-230519** Date Filed **November 6, 2018**

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
Centerra /Ahtna

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
7 Frankford Ave Anniston AL 36201

3a. Employer Representative - Name and Title
Pinkey Morris /NA

3b. Address (if same as 2b - state same)
7121 Fairway Drive Suite 301 Palm Beach Gardens FL 33419 / 110 West 26th Ave Suite 100 Anchorage Alaska 99503

3c. Tel. No.
561-472-0800 /907-868-8250

3d. Cell No.
NA /NA

3e. Fax No.
561-472-3679 /907-868-8285

3f. E-Mail Address
gerard.neville@triplecanopy.com /NA

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Fort McClellan Army Depot

4b. Principal product or service
Security

5a. City and State where unit is located:
Anniston AL

5b. Description of Unit Involved

Included: all full time and part time armed and unarmed alarm monitors, alarm monitor leads, and security guard leads

Excluded: clerical, managerial, salaried, and supervisory personnel as defined by the act

6a. No. of Employees in Unit:

10

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) **NA** and Employer declined recognition on or about **NA** (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).

NA

8b. Address

NA

8c. Tel. No.

NA

8d. Cell No.

NA

8e. Fax No.

NA

8f. E-Mail Address

NA

8g. Affiliation, if any

NA

8h. Date of Recognition or Certification

NA

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

NA

9. Is there now a strike or picketing at the Employer's establishment(s) involved? **NA** If so, approximately how many employees are participating? **NA**

(Name of labor organization) **NA**has picketed the Employer since (Month, Day, Year) **NA**

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)

NA

10a. Name

NA

10b. Address

NA

10c. Tel. No.

NA

10d. Cell No.

NA

10e. Fax No.

NA

10f. E-Mail Address

NA

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): first available

11c. Election Time(s):
0500-0700, 1300-150011d. Election Location(s):
Worksite

12a. Full Name of Petitioner (including local name and number)
United Government Security Officers of America and its Local 299

12b. Address (street and number, city, state, and ZIP code)
2879 Cranberry Highway East Wareham, MA 02538

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Government Security Officers of America International Union

12d. Tel. No.

617-620-7225

12e. Cell No.

617-620-7225

12f. Fax No.

NA

12g. E-Mail Address

Mieblanc@ugsoa.com

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

13a. Name and Title **Mike LeBlanc DHS Vice President UGSOA International Union**

13b. Address (street and number, city, state, and ZIP code)
2879 Cranberry Highway East Wareham, MA 02538

13c. Tel. No.

617-620-7225

13d. Cell No.

617-620-7225

13e. Fax No.

NA

13f. E-Mail Address

Mieblanc@ugsoa.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)

Mike LeBlanc

Signature



Title

DHS Vice President UGSOA International Union

Date

11/06/18

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-230716	Date Filed November 8, 2018

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 First Transit, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 463 Commerce Park Drive, SE, Marietta, Georgia 30060	
3a. Employer Representative - Name and Title Joey McKelvey - General Manager		3b. Address (If same as 2b - state same) same	
3c. Tel. No. 770-429-7303	3d. Cell No.	3e. Fax No.	3f. E-Mail Address joey.mckelvey@firstgroup.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Contractor		4b. Principal product or service Transit	
5b. Description of Unit Involved Included: All full-time and part-time maintenance and fueler employees Excluded: Office clerical employees, professional employees, guards and supervisors as defined in the Act			5a. City and State where unit is located: Marietta, GA
			6a. No. of Employees in Unit: 20
			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).
☐ 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? _____ 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. 404-223-5122	10d. Cell No. 678-612-8011
		10e. Fax No.	10f. E-Mail Address bdunams@atu732.org

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) NOV 14, 2018	11c. Election Time(s): 7am - 7pm	11d. Election Location(s): 463 COMMERCE PARK CONFERENCE RM
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12a. Full Name of Petitioner (including local name and number)
Amalgamated Transit Union Local 732

12b. Address (street and number, city, state, and ZIP code)
501 Pulliam Street, Suite 406, Atlanta, GA 30312

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

12d. Tel No. 404-223-5122	12e. Cell No. 678-612-8011	12f. Fax No.	12g. E-Mail Address bdunams@atu732.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Britt Dunams, Vice President		13b. Address (street and number, city, state, and ZIP code) 501 Pulliam Street, Suite 406, Atlanta, GA 30312	
13c. Tel No. 404-223-5122	13d. Cell No. 678-612-8011	13e. Fax No.	13f. E-Mail Address bdunams@atu732.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) Britt Dunams	Signature <i>Britt Dunams</i>	Title Vice President	Date OCT 29, 2018
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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.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-231032

Date Filed

11/14/2018

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 CINTAS		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1209 Airport Industrial Dr AL Gadsden 35904-6204	
3a. Employer Representative - Name and Title Travis Brisco		3b. Address (If same as 2b - state same) 1209 Airport Industrial Dr AL Gadsden 35904-6204	
3c. Tel. No. (256) 456-5958	3d. Cell No.	3e. Fax No. (256) 494-0555	3f. E-Mail Address BriscoT@cintas.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Rental & Leasing		4b. Principal product or service Sanitation Supplies, Smock, Towels, Uniforms	
5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details		5a. City and State where unit is located: Gadsden, AL	
		6a. No. of Employees in Unit: 22	
		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) 11/12/2018 and Employer declined recognition on or about (Date) (If no reply received, so state). No reply received
☐ 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.				11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): At the earliest time available		11c. Election Time(s): 6 a.m. - 8 a.m.		11d. Election Location(s): Route Room			
12a. Full Name of Petitioner (including local name and number) Chris E Branum Chris Branum UFCW Local 1995				12b. Address (street and number, city, state, and ZIP code) 4207 Lebanon Rd, Suite 100 TN Hermitage 37076			
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Food and Commercial Workers							
12d. Tel No. (615) 885-9060		12e. Cell No. (865) 257-1908		12f. Fax No. (615) 885-9966		12g. E-Mail Address cbranum@ufcw1995.org	

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title		13b. Address (street and number, city, state, and ZIP code)	
13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address

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

Name (Print) Chris E Branum	Signature Chris E Branum	Title Organizing Director	Date 11/14/2018 13:23:35
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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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Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
10-RC-231032	11/14/2018

Employees Included

Sales Service Representatives, Assistant Sales Service Representatives and Skippers

Employees Excluded

Office Clerical, Guards and Supervisors as defined by the ACT

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-231478

Date Filed

11/21/2018

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
Republic Services
2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
2530 Business Dr
GA Cumming 30028-4393

3a. Employer Representative - Name and Title
Bobby Lynch
3b. Address (If same as 2b - state same)
2530 Business Dr
GA Cumming 30028-4393

3c. Tel. No.
(470) 302-0510
3d. Cell No.
3e. Fax No.
3f. E-Mail Address
BLYNCH@REPUBLICSERVICES.COM

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Waste Management Services
4b. Principal product or service
Waste Hauling
5a. City and State where unit is located:
Cumming, GA

5b. Description of Unit Involved
Included: See Attached Page 2 for additional details
Excluded: See Attached Page 2 for additional details
6a. No. of Employees in Unit:
37
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).
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: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

11b. Election Date(s):
12/21/18
11c. Election Time(s):
12am, 2am, 6am
11d. Election Location(s):
Employee break room

12a. Full Name of Petitioner (including local name and number)
Ben R Speight
Teamsters Local 728
12b. Address (street and number, city, state, and ZIP code)
2540 Lakewood Ave SW
GA Atlanta 30315-6328

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.
(404) 622-0521
12e. Cell No.
(404) 604-6762
12f. Fax No.
(404) 627-2045
12g. E-Mail Address
benrsp8@gmail.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.
13a. Name and Title
13b. Address (street and number, city, state, and ZIP code)

13c. Tel No.
13d. Cell No.
13e. Fax No.
13f. E-Mail Address

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

Name (Print)
Ben R Speight
Signature
Ben Speight
Title
Organizing Director
Date
11/20/2018 19:22:20

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
10-RC-231478	11/21/2018

Employees Included

All full-time and regular part time drivers and helpers who report to the Cumming, GA facility

Employees Excluded

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

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

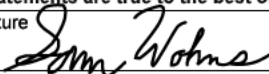
10-RC-231745

Date Filed

11/29/18

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: Elon University		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 100 Campus Drive, Elon, NC 27244	
3a. Employer Representative - Name and Title: Connie Ledoux Book, President		3b. Address (if same as 2b - state same): Office of the President, Elon University, 2185 Campus Box, Elon NC 27244	
3c. Tel. No. (336) 278-7900	3d. Cell No. N/A	3e. Fax No. (336) 278-2851	3f. E-Mail Address presidentsoffice@elon.edu
4a. Type of Establishment (Factory, mine, wholesaler, etc.) University		4b. Principal Product or Service Higher Education	5a. City and State where unit is located: Elon, NC
5b. Description of Unit Involved: Included: See attached. Excluded: See attached.			6a. Number 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) N/A and Employer declined recognition on or about (Date) N/A (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) N/A		8b. Address: N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any: N/A		8h. Date of Recognition or Certification N/A	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A
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 N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A
11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: See attached.			11a. Election Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): See attached.		11c. Election Time(s): See attached.	
		11d. Election Location(s): See attached.	
12a. Full Name of Petitioner (including local name and number): SEIU Workers United Southern Region		12b. Address (street and number, city, State and ZIP code): 4405 Mall Boulevard, Suite 600, Union City, GA 30291	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Service Employees International Union, CTW, CLC			
12d. Tel. No. (770) 306-8856	12e. Cell No. N/A	12f. Fax No. (770) 306-8939	12g. E-Mail Address N/A
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Narendra Ghosh, Paul Smith		13b. Address (street and number, city, State and ZIP code): 100 Europa Dr. Suite 420, Chapel Hill, NC 27517	
13c. Tel. No. (919) 942-5200	13d. Cell No. (919) 308-7460	13e. Fax No. (886) 397-8671	13f. E-Mail Address nghosh@pathlaw.com; psmith@pathlaw.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) Sam Wohms		Signature 	Title Organizing Coordinator
			Date 11/29/18

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5b. Including: All part-time and full-time non-tenure-track employees of Elon University teaching at least one credit-bearing undergraduate course in the College of Arts and Science, School of Communications, School of Education, or Martha & Spencer Love School of Business (including but not limited to continuing-track faculty, lecturer-track faculty, visiting faculty, limited term faculty, adjunct faculty, instructors, and staff with non-tenure-track teaching assignments).

5b. Excluding: All other employees, all employees teaching online courses only, all administrators (including those with teaching assignments), managers, and supervisors as defined by the Act.

11b. The Petitioner is requesting a 9-business-day mail ballot election in which ballots would be mailed on December 11, 2018 and counted on December 21, 2018.