

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.	5-RC-236980	Date Filed	3/2/19
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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 Paragon Systems Inc		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 13655 Dulles Technology Drive, Suite 100 VA Herndon 20171-	
3a. Employer Representative - Name and Title Laura M Hagan		3b. Address (If same as 2b - state same) 13655 Dulles Technology Drive, Suite 100 VA Herndon 20171-	
3c. Tel. No. (571) 321-0927	3d. Cell No. (865) 266-0383	3e. Fax No. (703) 579-1576	3f. E-Mail Address lhagan@parasys.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Security Systems & Services		4b. Principal product or service Security	5a. City and State where unit is located: Vienna, VA
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: 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). The United Government Security Officers of America (UGSOA)		8b. Address 2879 Cranberry Hwy MA East Wareham 02538-	
8c. Tel No. (800) 572-6103	8d. Cell No.	8e. Fax No.	8f. E-Mail Address DSullivan@ugsoa.com
8g. Affiliation, if any		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 07/31/2018	

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): 3/18/2019		11c. Election Time(s): 5:30 to 6:30 and 1:30 to 2:30		11d. Election Location(s): FBI (Liberty Park) 801 Tollyn Lane Vienna, Va	
12a. Full Name of Petitioner (including local name and number) Steve Maritas Law Enforcement Officers Security Unions LEOSU-DC, LEOS-PBA				12b. Address (street and number, city, state, and ZIP code) 1155 F STREET NW #1050 DC Washington DC 20004-	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) Law Enforcement Officers Security & Police Benevolent Association LEOS-PBA					
12d. Tel No. (202) 595-3510	12e. Cell No. (202) 486-8558	12f. Fax No. (202) 595-3510		12g. E-Mail Address LEOSUDC@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) Steve Maritas	Signature Steve Maritas	Title Organizing Director	Date 03/2/2019 10:53:48
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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 regular full-time and regular part-time armed Protective Service Officers performing guard duties as defined in Section 9(b)(3) of the National Labor Relations Act, employed by the employer at the site described in paragraph 11d. of the petition.

Employees Excluded

All office clerical employees, professional employees, security officers and 2(11) supervisors as defined by the Act

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

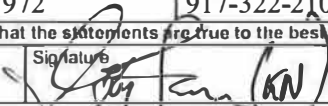
5-RC-237049

Date Filed

3/4/19

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: People's Accident Information Service, Inc. d/b/a Secur -It and Coastal International Security, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 25-18 Francis Lewis Blvd, Flushing, NY 11358 - Secure-It 6101 Fallard Dr, Upper Marlboro, MD 20772 - Coastal	
3a. Employer Representative - Name and Title: Joshua Martinez, Project Manager Siri Chand Khalsa, Corporate Counsel		3b. Address (if same as 2b - state same): 1100 N. Glebe Road, Suite 1010, Washington DC 20008 SAME	
3c. Tel. No. 703-648-7512	3d. Cell No. 703-593-3139	3e. Fax No.	3f. E-Mail Address sirichandk@akalglobal.com jmartinez@secur-it.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Federal Office Building		4b. Principal Product or Service Security	5a. City and State where unit is located: Reston, VA
5b. Description of Unit Involved: Included: See attached Excluded: See attached			6a. Number of Employees in Unit: 30 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) _____ 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) Governed United Security Professionals Union		8b. Address: 5602 Baltimore National Pike, Suite 607, Baltimore, MD 21228	
8c. Tel. No. 443-304-2018	8d. Cell No.	8e. Fax No. 443-304-2855	8f. E-Mail Address KEMERY@guspu.com
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 03/01/2019
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No <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)			
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: Petitioner is amendable to either a manual or mail ballot election.			11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): ASAP		11c. Election Time(s): ASAP	11d. Election Location(s):
12a. Full Name of Petitioner (including local name and number): Federal Contract Guards of America		12b. Address (street and number, city, State and ZIP code): 445 Park Ave, New York, NY 10022	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): None			
12d. Tel. No. 212-541-3753	12e. Cell No.	12f. Fax No. 917-322-2105	12g. E-Mail Address memberservices@fcgoa.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Guy James, President		13b. Address (street and number, city, State and ZIP code): 445 Park Ave, New York, NY 10022	
13c. Tel. No. 212-541-3753	13d. Cell No. 631-983-7972	13e. Fax No. 917-322-2105	13f. E-Mail Address gfjames@fcgoa.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) GUY JAMES	Signature 		Title PRESIDENT Date 3/4/19

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.

RC Petition – People's Accident Information Service, Inc. d/b/a Secur -It and Coastal International Security, Inc.

5b.

Included:

All full-time and regular part-time Security Guards performing guard duties, as defined by Section 9(b)(3) of the National Labor Relations Act, as amended, working for the Employers on its contract with the Federal Government located at the U.S. Geological Survey Headquarters – 12201 Sunrise Valley Drive, Reston, VA 20192.

Excluded:

All other employees, including administrative, clerical, supervisors, and non-guards, as defined by the National Labor Relations Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

5-RC-237620

Date Filed

3/13/19

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 Asplundh Tree Expert		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 100 Carlson Way, Suite 14, Dover, DE 19901	
3a. Employer Representative - Name and Title Steve Miller, Region 35 Vice President		3b. Address (If same as 2b - state same) same	
3c. Tel. No. (302) 492-1991	3d. Cell No. (302) 492-1991	3e. Fax No.	3f. E-Mail Address miller@asplundh.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Utility Line Clearance		4b. Principal product or service	
5b. Description of Unit Involved Included: All full-time and regular part-time Groundmen, Tree Trimmers, Journeymen, Foreman, Sprayers, and Lead Foreman working at the Delaware Electric Coop. Excluded: General Foreman, Supervisors, and office staff.		5a. City and State where unit is located: Dover, Delaware	
		6a. No. of Employees in Unit: 35	
		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) none 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: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): Wednesdays		11c. Election Time(s): 5:30 a.m. to 6:30 a.m.		11d. Election Location(s): IBEW Local Union 126, 14402 Sussex Highway, Bridgeville, DE			
12a. Full Name of Petitioner (including local name and number) International Brotherhood of Electrical Workers Local Union 126				12b. Address (street and number, city, state, and ZIP code) 14402 Sussex Highway, Bridgeville, Delaware 19933			
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Electrical Workers, AFL-CIO							
12d. Tel No. (302) 495-7013		12e. Cell No. (302) 542-8925		12f. Fax No. (302) 495-7019		12g. E-Mail Address bcollins@ibew126.com	
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.							
13a. Name and Title Bruce Collins, Membership Development Representative				13b. Address (street and number, city, state, and ZIP code) 144021 Sussex Highway, Bridgeville, Delaware 19933.			
13c. Tel No. (302) 495-7013		13d. Cell No. (302) 542-8925		13e. Fax No. (302) 495-7019		13f. E-Mail Address bcollins@ibew126.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) Bruce Collins	Signature 	Title Membership Development Representative	Date 3/13/2019
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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

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FORM NLRB-502 (RC)
(2-18)UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

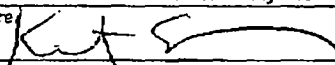
5-RC-238267

Date Filed

3/25/19

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: OMNIPLEX		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 7121 Fairway Drive suite 201 Palm beach FL 33418	
3a. Employer Representative - Name and Title: Mike Goodwin Director Labor Relations		3b. Address (if same as 2b - state same):	
3c. Tel. No. (561) 406-7971	3d. Cell No. (757) 560-8773	3e. Fax No.	3f. E-Mail Address mike.goodwinconstellis.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Government Building		4b. Principal Product or Service Security	5a. City and State where unit is located: Washington, DC
5b. Description of Unit Involved: Included: All armed and unarmed officers and Sergeants Excluded: All office personal, managers, Captains, Project Managers			5a. Number of Employees in Unit: 40
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) _____ 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) spfpa		8b. Address: 25510 Kelly rd, Roseville Michigan 48066	
8c. Tel. No. (586) 772-7250	8d. Cell No.	8e. Fax No. (586) 772-9644	8f. E-Mail Address www.spfpa.org
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? <input type="checkbox"/> No <input type="checkbox"/> Yes 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 type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): 4-11-2019	11c. Election Time(s): ALL DAY		11d. Election Location(s): NLRB Region 5
12a. Full Name of Petitioner (including local name and number): Governed United Security Professionals		12b. Address (street and number, city, State and ZIP code): 5602 Baltimore National Pike Suite 607	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Governed United Security Professionals			
12d. Tel. No. (443) 304-2018	12e. Cell No. (443) 562-3230	12f. Fax No. (443) 304-2855	12g. E-Mail Address klleme@yahoo.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Kent Emery/ President		13b. Address (street and number, city, State and ZIP code): 5602 Baltimore National Pike Suite 607	
13c. Tel. No. 443304201	13d. Cell No. (443) 562-3230	13e. Fax No. (443) 304-2855	13f. E-Mail Address klleme@yahoo.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) Kent Emery	Signature 	Title President	Date 03/25/19

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. 05-RC-238403	Date Filed 03-26-2019

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 Bradley Technology, Inc. (BTI)		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1700 Rockville Pike, Suite 200, Rockville, MD 20852	
3a. Employer Representative - Name and Title Angela Bradley		3b. Address (If same as 2b - state same) SAME	
3c. Tel. No. 301.562.9201	3d. Cell No.	3e. Fax No. 301.562.9202	3f. E-Mail Address Angelabradley@btisecurity.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Security		4b. Principal product or service Security Services	
5a. City and State where unit is located: Washington, DC			

6b. Description of Unit Involved
Included: All regular full-time and part-time armed and unarmed security officers performing guard duties as defined in Section 9(b)(3) of the Act, employed by BTI at 400 C Street, SW, Washington, DC
Excluded: All office clerical employees, managerial employees, and supervisors as defined by the Act.

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 ☒ No ☐

Check One: ☒ **7a. Request for recognition as Bargaining Representative was made on (Date) 03/2019 and Employer declined recognition on or about 03/2019 (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). Stanley Hutchins		8b. Address 1629 K Street, NW, Suite 300, Washington, DC 20006	
8c. Tel No. 202.466.0972	8d. Cell No. 202.306.0060	8e. Fax No. 202.331.3759	8f. E-Mail Address Stanhutch1228@yahoo.com
8g. Affiliation, if any		8h. Date of Recognition or Certification May 21, 2018	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) November 2021			

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: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	11b. Election Date(s): April 22, 2019	11c. Election Time(s):	11d. Election Location(s):
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12a. Full Name of Petitioner (including local name and number)
National Association of Special Police and Security Officers

12b. Address (street and number, city, state, and ZIP code)
10 G Street, NE, Suite 600, Washington, DC 20002

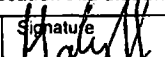
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
National Association of Special Police and Security Officers

12d. Tel No. 202.487.3438	12e. Cell No. 202.487.3438	12f. Fax No. 202.758.3262	12g. E-Mail Address Frasergaby1@aol.com
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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 Gaby L. Fraser		13b. Address (street and number, city, state, and ZIP code) 10 G Street, NE, Suite 600, Washington, DC 20002	
13c. Tel No. 202.487.3438	13d. Cell No. 202.487.3438	13e. Fax No. 202.758.3262	13f. E-Mail Address Frasergaby1@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) Gaby L. Fraser	Signature 	Title Director Labor Relations	Date March 25, 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.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RD PETITION

DO NOT WRITE IN THIS SPACE

Case No.

5-RD-238284

Date Filed

3/24/19

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 7 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 RD-DECERTIFICATION (REMOVAL OF REPRESENTATIVE) - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. 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 Badger Daylighting Inc		2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) 11145 Industrial Rd Manassas, Va 20109	
3a. Employer Representative - Name and Title Eric Labarge - Area Manager		3b. Address (If same as 2b - state same) same	
3c. Tel. No.	3d. Fax No.	3e. Cell No. 571-328-6016	3f. E-Mail Address elabarge@badgerinc.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) office		4b. Principal product or service Hydro Vac Excavation	
5a. Description of Unit Involved Included: Operators Excluded:			5b. City and State where unit is located: Manassas, VA
6. No. of Employees in Unit 6	7. Do a substantial number (30% or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8a. Name of Recognized or Certified Bargaining Agent International Union of Operating Engineers, AFL-CIO Local 77		8b. Affiliation, if any	
8c. Address 4546 Britannia Way Suitland, Md 20746		8d. Tel. No. 301-899-6900	8e. Cell No. 540-287-2057
		8f. Fax No. 301-630-8129	8g. E-Mail Address greg@iuoelocal77.com
9. Date of Recognition or Certification 03/20/2018		10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 03/20/2019	
11a. Is there now a strike or picketing at the Employer's establishment(s) involved? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		11b. If so, approximately how many employees are participating?	
11c. The Employer has been picketed by or on behalf of (Insert Name) N/A (Insert Address) N/A		a labor organization, of since (Month, Day, Year) N/A	
12. Organizations or individuals other those named in items 8 and 11c, 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 5 above. (If none, so state) N/A			
12a. Name N/A	12b. Address N/A	12c. Tel. No.	12d. Fax No.
		12e. Cell No.	12f. E-Mail Address
13. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. election is welcomed		13a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
13b. Election Date(s) April 4, 2019	13c. Election Time(s) 5:00 pm	13d. Election Location(s) 11145 Industrial Rd Manassas, Va 20109	
14. Full Name of Petitioner (b) (6), (b) (7)(C)			
14a. Address (Street and number, city, state, ZIP code) (b) (6), (b) (7)(C)		14b. Tel. No.	14c. Fax No.
		14d. Cell No. (b) (6), (b) (7)(C)	14e. E-Mail Address (b) (6), (b) (7)(C)
14f. Affiliation, if any Operator			
15. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
15a. Name		15b. Title	
15c. Address (Street and number, city, state, ZIP code) (b) (6), (b) (7)(C)		15d. Tel. No.	15e. Fax No.
		15f. Cell No.	15g. E-Mail Address
I declare that I have read the above petition and the best of my knowledge and belief.			
Name (Print) (b) (6), (b) (7)(C)		Title (b) (6), (b) (7)(C)	Date Filed 03/24/2019

WILLFUL FALSE STATEMENT

PUNISHABLE BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PERjury STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Board (NLRB) in processing representation and related proceedings. The information is to be used for no other purpose. 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.

9 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board in processing representation and related proceedings. 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.