

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.  
29-RC-252706

Date Filed  
12/2/2019

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlrb.gov/](http://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.

<b>2a. Name of Employer:</b> Planned Building Services, Inc.		<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> 220 36th Street, Brooklyn, NY 11232	
<b>3a. Employer Representative - Name and Title:</b> Robert Francis, President & CEO		<b>3b. Address (if same as 2b - state same):</b> 150 Smith Road, Parsippany, NJ 07050	

<b>3c. Tel. No.</b> 973-739-0080	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> info@plannedcompanies.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> commercial buildings		<b>4b. Principal Product or Service</b> commercial cleaning	<b>5a. City and State where unit is located:</b> Brooklyn, NY
<b>5b. Description of Unit Involved:</b> <b>Included:</b> All janitorial service employees at the Industry City complex in Brooklyn, NY <b>Excluded:</b> Office clerical, administrative, executive, and supervisors as defined by the Act.			<b>6a. Number of Employees in Unit:</b> 40 <b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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.

<b>8a. Name of Recognized or Certified Bargaining Agent (if none, so state)</b> Building Maintenance Employees Union, Local 486, NOITU-IUJAT	<b>8b. Address:</b> 148-06 Hillside Ave., Jamaica, NY 11435
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<b>8c. Tel. No.</b> 718-291-3434	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any:</b> NOITU-IUJAT		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b> 2/28/2020

**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

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**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

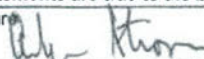
<b>11b. Election Date(s):</b> December 20, 2020	<b>11c. Election Time(s):</b> 3:00 pm to 7:30 pm	<b>11d. Election Location(s):</b> Bldg 1, ground floor
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<b>12a. Full Name of Petitioner (including local name and number):</b> Service Employees International Union, Local 32BJ	<b>12b. Address (street and number, city, State and ZIP code):</b> 25 West 18th Street, New York, NY 10011
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<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):</b> Service Employees International Union			
<b>12d. Tel. No.</b> 212-388-3025	<b>12e. Cell No.</b>	<b>12f. Fax No.</b>	<b>12g. E-Mail Address</b>

<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title:</b> Andrew Strom, Assoc. General Counsel		<b>13b. Address (street and number, city, State and ZIP code):</b> 25 West 18th Street, New York, NY 10011	
<b>13c. Tel. No.</b> 212-388-3025	<b>13d. Cell No.</b>	<b>13e. Fax No.</b>	<b>13f. E-Mail Address</b> astrom@seiu32bj.org

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

<b>Name (Print)</b> Andrew Strom	<b>Signature</b> 	<b>Title</b> Associate General Counsel	<b>Date</b> 12/2/2019
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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. **29-RC-252777**

Date Filed **12/4/2019**

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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.**

<b>2a. Name of Employer</b> Eastern Effects		<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 99 9th Street NY Brooklyn 11215-	
<b>3a. Employer Representative - Name and Title</b> Ian Defibaugh		<b>3b. Address (if same as 2b - state same)</b> 99 9th Street NY Brooklyn 11215-	
<b>3c. Tel. No.</b> (718) 246-6841	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> ian@eastereffects.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Audio & Video Equipment		<b>4b. Principal product or service</b> provide lighting	
<b>5b. Description of Unit Involved</b> <b>Included:</b> See Attached Page 2 for additional details <b>Excluded:</b> See Attached Page 2 for additional details		<b>5a. City and State where unit is located:</b> Brooklyn, NY	
		<b>6a. No. of Employees in Unit:</b> 22	
		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> 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.

<b>8a. Name of Recognized or Certified Bargaining Agent (if none, so state).</b>		<b>8b. Address</b>	
<b>8c. Tel No.</b>	<b>8d Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>

**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)**

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11b. Election Date(s):</b> 12/16/19	<b>11c. Election Time(s):</b> 8 A.M. to 10.30 A.M.	<b>11d. Election Location(s):</b> Employee Break room at 99 9th Street facility.
<b>12a. Full Name of Petitioner (including local name and number)</b> Tim Dubnau Communications Workers of America, AFL-CIO		<b>12b. Address (street and number, city, state, and ZIP code)</b> 80 Pine Street 37th Floor NY New York 10005-

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

<b>12d. Tel No.</b> (212) 344-2515	<b>12e. Cell No.</b>	<b>12f. Fax No.</b> (212) 425-2947	<b>12g. E-Mail Address</b> tdubnau@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.**

<b>13a. Name and Title</b> Atul Talwar Attorney Communications Workers of America District 1 Legal Department		<b>13b. Address (street and number, city, state, and ZIP code)</b> 80 Pine Street 37th Floor NY New York 10005-	
<b>13c. Tel No.</b> (212) 344-2515	<b>13d. Cell No.</b> (917) 657-1199	<b>13e. Fax No.</b> (212) 425-4729	<b>13f. E-Mail Address</b> atalwar@cwa-union.org

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

<b>Name (Print)</b> Atul Talwar	<b>Signature</b> Atul Talwar	<b>Title</b> Attorney	<b>Date</b> 12/2/2019 16:41:05
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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 29-RC-252777	Date Filed 12/4/2019

#### Employees Included

All full time and regular part time employees of the employer working out of facilities in Brooklyn, New York including 99 9th street, 270 Nevins Street, 210 Douglas Street and 302 Sheffield Avenue.

#### Employees Excluded

All confidential employees, guards and supervisors as defined by the act.

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

29-RC-252881

Date Filed

12/6/2019

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov/](http://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:**  
Planned Building Services

**2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):**  
220 36th Street  
Brooklyn, NY 11232

**3a. Employer Representative - Name and Title:**  
Robert Francis, President & CEO

**3b. Address (if same as 2b - state same):**  
150 Smith Road  
Parsippany, NJ 07050

**3c. Tel. No.**  
973-739-0080

**3d. Cell No.**

**3e. Fax No.**

**3f. E-Mail Address**  
info@plannedcompanies.com

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

**4b. Principal Product or Service**  
commercial cleaning

**5a. City and State where unit is located:**  
Brooklyn, NY

**5b. Description of Unit Involved:**

**Included:**

All janitorial service employees at the Industry City complex in Brooklyn, NY

**Excluded:**

Office clerical, administrative, executive, and supervisors as defined by the Act

**6a. 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?** ☒ 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)**  
Building Maintenance Employees Union, Local 486  
NOITU-IUJAT

**8b. Address:**  
148-06 Hillside Ave.  
Jamaica, NY 11435

**8c. Tel. No.**  
718-291-3434

**8d. Cell No.**

**8e. Fax No.**

**8f. E-Mail Address**

**8g. Affiliation, if any:**  
NOITU-IUJAT

**8h. Date of Recognition or Certification**

**8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)** 2/28/2020

**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):**  
December 20, 2019

**11c. Election Time(s):**  
3:00 pm - 7:30 pm

**11d. Election Location(s):**  
Building 1, ground floor

**12a. Full Name of Petitioner (including local name and number):**  
SEIU 32BJ

**12b. Address (street and number, city, State and ZIP code):**  
25 W. 18th Street  
New York, NY 10011

**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

**12d. Tel. No.**  
212-388-3025

**12e. Cell No.**

**12f. Fax No.**  
862-236-3605

**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:**  
Andrew Strom  
Associate General Counsel

**13b. Address (street and number, city, State and ZIP code):**  
25 W. 18th Street  
New York, NY 10011

**13c. Tel. No.**  
212-388-3025

**13d. Cell No.**

**13e. Fax No.**  
212-388-2062

**13f. E-Mail Address**  
astrom@seiu32bj.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)**  
Andrew Strom

**Signature**



**Title**  
Associate General Counsel

**Date**  
12/05/19

**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.

29-RC-252929

Date Filed

12-6-19

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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  
Veolia North America

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)  
One Idlewild Drive JFK International Airport, New York 11430

3a. Employer Representative - Name and Title  
Brian Reardon - Plant Manager

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

3c. Tel. No.  
347-682-7825

3d. Cell No.  
347-682-7825

3e. Fax No.

3f. E-Mail Address  
brian.reardon@veolia.com

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

4b. Principal product or service  
Energy

5a. City and State where unit is located:  
Queens, New York

5b. Description of Unit Involved  
Included: All full time and regular part time power plant engineers

Excluded: All clerical employees, professional employees, guards and supervisors under the Act

6a. No. of Employees in Unit:  
5

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) 12/2/19 and Employer declined recognition on or about 12/2/19 (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):  
January 2 2020

11c. Election Time(s):  
8:00am to 9:00am

11d. Election Location(s):  
employee breakroom at the facility

12a. Full Name of Petitioner (including local name and number)  
International Union of Operating Engineers Local 30

12b. Address (street and number, city, state, and ZIP code)  
16-16 Whitestone Expressway, Whitestone, New York 11357

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

12d. Tel No.  
917-680-7978

12e. Cell No.  
917-680-7978

12f. Fax No.  
718-805-2172

12g. E-Mail Address  
andrespuerta@iuoelocal30.org

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

13a. Name and Title  
Andres Puerta - Director of Special Projects

13b. Address (street and number, city, state, and ZIP code)  
16-16 Whitestone Expressway, Whitestone, New York 11357

13c. Tel No.  
917-680-7978

13d. Cell No.  
917-680-7978

13e. Fax No.  
718-805-2172

13f. E-Mail Address  
andrespuerta@iuoelocal30.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)  
ANDRES PUERTA

Signature  
/s/ Andres Puerta

Title  
Director of Special Projects

Date  
December 5 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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UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE

Case No.

29-RC-253187

Date Filed

12-11-19

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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.

<b>2a. Name of Employer</b> Ground Services International, dba Dnata		<b>2b. Address(es) of Establishment(s) involved</b> (Street and number, city, State, ZIP code) Terminal 1 JFK International Airport NY Jamaica 11430-	
<b>3a. Employer Representative - Name and Title</b> John David Barker		<b>3b. Address</b> (If same as 2b - state same) 12124 High Tech Ave FL Orlando 32817-	
<b>3c. Tel. No.</b> (407) 988-1453	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> david.barker@dnata.us
<b>4a. Type of Establishment</b> (Factory, mine, wholesaler, etc.) Transportation		<b>4b. Principal product or service</b> Ground Service	
		<b>5a. City and State where unit is located:</b> Jamaica, NY	

<b>5b. Description of Unit Involved</b>		<b>6a. No. of Employees in Unit:</b> 400
<b>Included:</b> See Attached Page 2 for additional details		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
<b>Excluded:</b> 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.

<b>8a. Name of Recognized or Certified Bargaining Agent</b> (If none, so state).		<b>8b. Address</b>	
<b>8c. Tel No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any</b> (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)

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11b. Election Date(s):</b> 12/27/2019	<b>11c. Election Time(s):</b> 0600-1800	<b>11d. Election Location(s):</b> JFK Terminal 1 dnata Breakroom
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**12a. Full Name of Petitioner (including local name and number)**  
Anthony Borruso  
Amalgamated Local 81

**12b. Address** (street and number, city, state, and ZIP code)  
260 Butler St  
NY Brooklyn 11217-

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

<b>12d. Tel No.</b> (347) 735-2258	<b>12e. Cell No.</b>	<b>12f. Fax No.</b> (718) 875-0036	<b>12g. E-Mail Address</b> amallocal81@gmail.com
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> Michael Scaraggi Esq. Lawyer Oransky, Scaraggi, and Borg, P.C.		<b>13b. Address</b> (street and number, city, state, and ZIP code) 175 Fairfield Ave NJ West Caldwell 07006-	
<b>13c. Tel No.</b> (973) 364-1200	<b>13d. Cell No.</b>	<b>13e. Fax No.</b> (973) 364-0211	<b>13f. E-Mail Address</b> michaelscaraggi@netscape.net

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

<b>Name (Print)</b> Anthony Borruso	<b>Signature</b> Anthony Borruso	<b>Title</b> President	<b>Date</b> 12/9/2019 13:04:13
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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**

Ground Service Agents, Jet Bridge Operators, Cargo drivers

**Employees Excluded**

All office personnel, managers, supervisors, executives, and security guards as defined by the act.

NLRB-REGION 29  
RECEIVED  
2019 DEC 11 PM 1:57  
BROOKLYN, NY



UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.


29-RC-253248

Date Filed

12-12-19

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov/](http://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.

<b>2a. Name of Employer:</b> Luxury Cars of Bayside, Inc.		<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> 247-21 Northern Boulevard, Douglaston, New York 11363	
<b>3a. Employer Representative - Name and Title:</b> John Burns, President		<b>3b. Address (if same as 2b - state same):</b>	
<b>3c. Tel. No.</b> 855-310-7377	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b>
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Auto Dealership		<b>4b. Principal Product or Service</b> Auto Sales and Service	
<b>5a. City and State where unit is located:</b> Douglaston, New York		<b>5b. Description of Unit Involved:</b> <b>Included:</b> All sales department clerical employees, including BMW Genius', customer receptionists and title clerks. <b>Excluded:</b> All other employees, including but not limited to salespersons, service technicians, and supervisors as defined in the Act.	
<b>6a. Number of Employees in Unit:</b> 11		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Check One:</b> <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.			
<b>8a. Name of Recognized or Certified Bargaining Agent (If none, so state)</b>		<b>8b. Address:</b>	
<b>8c. Tel. No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any:</b>		<b>8h. Date of Recognition or Certification</b>	
<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>			
<b>9. Is there now a strike or picketing at the Employer's establishment(s) involved?</b> <input checked="" type="checkbox"/> If so, approximately how many employees are participating? _____ (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____			
<b>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)</b>			
<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>
<b>11. Election Details:</b> If the NLRB conducts an election in this matter, state your position with respect to any such election:		<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
<b>11b. Election Date(s):</b> December 27, 2019	<b>11c. Election Time(s):</b> 10:30 am - 1:30 pm	<b>11d. Election Location(s):</b> Upstairs break room - Employers facility	
<b>12a. Full Name of Petitioner (including local name and number):</b> United Service Workers Union Local 355, IUJAT		<b>12b. Address (street and number, city, State and ZIP code):</b> 138-50 Queens Boulevard, Briarwood, New York 11435	
<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):</b> International Union of Journeymen and Allied Trades			
<b>12d. Tel. No.</b> 718-658-4848	<b>12e. Cell No.</b>	<b>12f. Fax No.</b> 718-523-4732	<b>12g. E-Mail Address</b>
<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title:</b> Gary Rothman, Esq.		<b>13b. Address (street and number, city, State and ZIP code):</b> Rothman Rocco LaRuffa, LLP, 3 West Main St., Ste 200, Elmsford, NY 10523	
<b>13c. Tel. No.</b> 914-478-2801	<b>13d. Cell No.</b>	<b>13e. Fax No.</b> 914-478-2913	<b>13f. E-Mail Address</b> grothman@rothmanrocco.com
<b>I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.</b>			
<b>Name (Print)</b> Gary Rothman, Esq.	<b>Signature</b> 	<b>Title</b> Attorney for Local 355	<b>Date</b> 12/11/2019

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 may 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.

29-RD-253495

Date Filed

12/18/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlrb.gov](http://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 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 <b>SCHAEFER Landing south CONDO</b>	2b. Address(es) of Establishment(s) Involved (Street and number, city, state, ZIP code) <b>446 Kent Ave Brooklyn N.Y. 11249</b>
3a. Employer Representative - Name and Title <b>LIZETTE Velez</b>	3b. Address (If same as 2b - state same) <b>770 Lexington AVE</b>
3c. Tel. No. <b>646-485-6166</b>	3d. Fax No. <b>646-472-7615</b>
3e. Cell No.	3f. E-Mail Address <b>IVELEZ@HALSTEND.COM</b>
4a. Type of Establishment (Factory, mine, wholesaler, etc.) <b>Residential Building</b>	4b. Principal product or service <b>Building services</b>
5a. Description of Unit Involved Included: <b>All Building service worker</b> Excluded: <b>GUARDS, supervisor</b>	5b. City and State where unit is located: <b>Brooklyn N.Y.</b>

5. No. of Employees in Unit **3** 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? ☒ Yes ☐ No

8a. Name of Recognized or Certified Bargaining Agent <b>32 BT RAHAW WADE</b>	8b. Affiliation, if any
8c. Address <b>25 West 18th Street - New York N.Y. 10011-1991</b>	8d. Tel. No. <b>212-846-3800</b>
	8e. Cell No. <b>678-964-0213</b>
	8f. Fax No.
	8g. E-Mail Address <b>RWADE@SRV32BTORC</b>

9. Date of Recognition or Certification 10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)  
**N/A**

11a. Is there now a strike or picketing at the Employer's establishment(s) involved? ☐ Yes ☒ No 11b. If so, approximately how many employees are participating in the strike or picketing?  
11c. The Employer has been picketed by or on behalf of (Insert Name)  
(Insert Address) **N/A** since (Month, Day, Year) **2019 DEC 18 AM 10:05**

12. Organizations or individuals other than 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)

12a. Name <b>N/A</b>	12b. Address	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.

13a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	13b. Election Date(s) <b>3/30/17</b>	13c. Election Time(s) <b>2:45 - 3:15 PM</b>	13d. Election Location(s) <b>COMMAND AREA in BACK LOBBY</b>
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14. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)

14a. Address (Street and number, city, state, ZIP code) <b>(b) (6), (b) (7)(C)</b>	14b. Address (Street and number, city, state, ZIP code) <b>(b) (6), (b) (7)(C)</b>	14c. Fax No. <b>(b) (6), (b) (7)(C)</b>	14d. Cell No. <b>(b) (6), (b) (7)(C)</b>
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14f. Affiliation, if any

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

15a. Name <b>(b) (6), (b) (7)(C)</b>	15b. Title <b>(b) (6), (b) (7)(C)</b>
15c. Address (Street and number, city, state, ZIP code) <b>(b) (6), (b) (7)(C)</b>	15d. Tel. No. <b>(b) (6), (b) (7)(C)</b>
	15e. Fax No. <b>(b) (6), (b) (7)(C)</b>

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)	Title <b>(b) (6), (b) (7)(C)</b>	Date Filed
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SHED BY FINE AN  
PRIVACY ACT STATEMENT

ODE, TITLE 18, SECTION 1001)



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No.	29-RC-253629
Date Filed	12/20/2019

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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.

<b>1. PURPOSE OF THIS PETITION:</b> 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.			
<b>2a. Name of Employer</b> Jamaica Hospital Medical Center		<b>2b. Address(es) of Establishment(s) involved</b> (Street and number, city, state, ZIP code) 8900 Van Wyck Expressway   Richmond Hill, New York 11418	
<b>3a. Employer Representative - Name and Title</b> Edny Floriss - Director		<b>3b. Address</b> (If same as 2b - state same) same	
<b>3c. Tel. No.</b> 718-206-6290	<b>3d. Cell No.</b> 646-467-1056	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> efloriss@jhmc.org
<b>4a. Type of Establishment</b> (Factory, mine, wholesaler, etc.) Hospital		<b>4b. Principal product or service</b> Engineering	
<b>5b. Description of Unit Involved</b> Included: All full time, regular part time and per diem plant operators  Excluded: All clerical employees, professional employees, guards and supervisors under the Act		<b>5a. City and State where unit is located:</b> Richmond Hill, New York	
		<b>6a. No. of Employees in Unit:</b> 14	
		<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
<b>Check One:</b> <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) <u>12/18/2019</u> and Employer declined recognition on or about <u>no reply</u> (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
<b>8a. Name of Recognized or Certified Bargaining Agent</b> (If none, so state).		<b>8b. Address</b>	
<b>8c. Tel No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
<b>8g. Affiliation, if any</b>		<b>8h. Date of Recognition or Certification</b>	
		<b>8i. Expiration Date of Current or Most Recent Contract, if any</b> (Month, Day, Year)	
<b>9. Is there now a strike or picketing at the Employer's establishment(s) involved?</b> <u>No</u> If so, approximately how many employees are participating? _____ (Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.			
<b>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.</b> (If none, so state)			
<b>10a. Name</b>		<b>10b. Address</b>	
		<b>10c. Tel. No.</b>	
		<b>10d. Cell No.</b>	
		<b>10e. Fax No.</b>	
		<b>10f. E-Mail Address</b>	
<b>11. Election Details:</b> If the NLRB conducts an election in this matter, state your position with respect to any such election.		<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
<b>11b. Election Date(s):</b> January 6 2020		<b>11c. Election Time(s):</b> 12pm to 4pm	
<b>11d. Election Location(s):</b> Engineering room		<b>12b. Address</b> (street and number, city, state, and ZIP code) 16-16 Whitestone Expressway   Whitestone, New York 11357	
<b>12a. Full Name of Petitioner (including local name and number)</b> International Union of Operating Engineers Local 30			
<b>12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent</b> (if none, so state) International Union of Operating Engineers			
<b>12d. Tel No.</b> 917-680-7978	<b>12e. Cell No.</b> 917-680-7978	<b>12f. Fax No.</b> 718-805-2172	<b>12g. E-Mail Address</b> andrespuerta@iuoelocal30.org
<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title</b> Andres Puerta - Director of Special Projects		<b>13b. Address</b> (street and number, city, state, and ZIP code) 16-16 Whitestone Expressway   Whitestone, New York 11357	
<b>13c. Tel No.</b> 917-680-7978	<b>13d. Cell No.</b> 917-680-7978	<b>13e. Fax No.</b> 718-805-2172	<b>13f. E-Mail Address</b> andrespuerta@iuoelocal30.org
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
<b>Name (Print)</b> Andres Puerta	<b>Signature</b> 	<b>Title</b> Director of Special Projects	<b>Date</b> 12/19/2020

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.

29-RC-253692

Date Filed

12-23-19

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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**

AGI, Allied Ground International

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

Jfk International Airport, Building 23b, North Service rd  
NY Jamaica 11430-

**3a. Employer Representative - Name and Title**

Jake J.A. Kwon

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

Jfk International Airport, Building 23b, North Service rd  
NY Jamaica 11430-

**3c. Tel. No.**

(718) 553-2190

**3d. Cell No.**

(917) 731-1841

**3e. Fax No.**

**3f. E-Mail Address**

jakewon@allianceground.com

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

Others

**4b. Principal product or service**

Cargo Services

**5a. City and State where unit is located:**

Jamaica, NY

**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:**

250

**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) 09/09/2019 and Employer declined recognition on or about 10/07/2019 (Date) (If no reply received, so state). Yes**

☐ **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:** ☒ Manual ☐ Mail ☐ Mixed Manual/Mail

**11b. Election Date(s):**  
1/9/2020

**11c. Election Time(s):**  
0600-0900 1500-1800

**11d. Election Location(s):**  
Breakrooms of Buildings 21, 23, and 77 in JFK Airport

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

Joseph Giovinco  
Amalgamated Local 298

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

420 West Merrick Rd  
NY valley stream 11580-

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

IUANPW, AFL-CIO

**12d. Tel No.**

(516) 872-6690

**12e. Cell No.**

(646) 345-6519

**12f. Fax No.**

**12g. E-Mail Address**

coslubrano@hotmail.com

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

**13a. Name and Title**  
Bryan McCarthy Esq. Attorney  
BCM Associates

**13b. Address (street and number, city, state, and ZIP code)**  
1454 Route 22 Suite B101  
NY brewster 10509-

**13c. Tel No.**

(845) 363-1441

**13d. Cell No.**

(914) 588-4480

**13e. Fax No.**

(845) 582-0698

**13f. E-Mail Address**

bcm@bcmassociates.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)**

Joseph Giovinco

**Signature**

Cosmo Lubrano

**Title**

Secretary Treasurer

**Date**

12/19/2019 10:27:01

**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 Cargo agents employed by AGI in buildings 21, 23, and 77 in JFK airport.

**Employees Excluded**

Managers, supervisors, Administrative personnel, security guards, and others as defined by the act.



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. <b>29-RC-253896</b>	Date Filed <b>12/30/19</b>

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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 Kickstarter, PBC		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 58 Kent Street NY Brooklyn 11222-	
3a. Employer Representative - Name and Title Aziz Hassan		3b. Address (If same as 2b - state same) 58 Kent Street NY Brooklyn 11222-	
3c. Tel. No.	3d. Cell No.	3e. Fax No.	3f. E-Mail Address aziz@kickstarter.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Technology	4b. Principal product or service	5a. City and State where unit is located: Brooklyn, NY
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5b. Description of Unit Involved <b>Included:</b> See Attached Page 2 for additional details  <b>Excluded:</b> See Attached Page 2 for additional details	6a. No. of Employees in Unit: 89  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"/>
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**Check One:** ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 10/02/2019 and Employer declined recognition on or about 10/02/2019 (Date) (If no reply received, so state). Yes  
☐ 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
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8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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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 type="checkbox"/> Manual <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Mixed Manual/Mail
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11b. Election Date(s): 01/15/2020	11c. Election Time(s): 10:00am - 1:00pm; 3:00pm - 6:00pm	11d. Election Location(s): The employer premises, Solarium
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12a. Full Name of Petitioner (including local name and number) Kate Stevens Office and Professional Employee International Union, Local 153	12b. Address (street and number, city, state, and ZIP code) 80 8th avenue 8th Floor NY New York 10011-
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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) Office and Professional Employee International Union AFL-CIO	
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12d. Tel. No. (845) 399-0135	12e. Cell No.	12f. Fax No.	12g. E-Mail Address kstevens@opeiu.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	13b. Address (street and number, city, state, and ZIP code)
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13c. Tel. No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address
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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) Kate Stevens	Signature Kate Stevens	Title Northeast Lead Organizer	Date 12/30/2019 08:10:37
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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
29-RC-253896	12/30/19

#### Employees Included

The bargaining unit shall consist of all full-time and regular part-time employees in the below classifications: Accountant · Arts Outreach Lead · Associate Art Director, Photo & Video · Associate Data Scientist · Associate Editorial Director · Associate Product Manager · Comics Outreach Lead · Community Support Specialist II · Content Director, Brand · Content Director, Creator Development · Creative Content Director · Creative Project Coordinator · Director of Documentary Film · Director of Games Outreach · Director of Integrity · Director of Music · Director of Narrative Film · Events & Workplace Coordinator · Experimentation Manager · Facilities Coordinator · Front End Engineer · Front-end Software Developer · Graphic Designer · IT/AV Specialist · Marketing Specialist, Email & Automation · Operations Engineer · Outreach Lead, Japan · Product Designer · Product Manager · Recruiter · Senior Accountant · Senior Android Engineer · Senior Business Analyst, Insights · Senior Data Engineer · Senior Data Scientist · Senior Editor · Senior Graphic Designer · Senior Manager, People Operations · Senior Marketing Manager · Senior Outreach Lead for Performing Arts · Senior Outreach Lead, Design & Technology · Senior Outreach Lead for Journalism · Senior Product Designer · Senior Product Manager · Senior Recruiter · Senior Research Analyst · Senior Software Engineer · Senior Support Specialist · Senior Support Specialists, Payments · Senior UX Writer · Social Media Specialist · Software Engineer · Trust & Safety Analyst I · Trust & Safety Analyst, Moderation · Trust & Safety Analyst, Risk · Trust & Safety, Legal & Compliance

#### Employees Excluded

All managers, confidential employees, temporary employees, guards and supervisors as defined by the Act, regardless of whether they have a title listed above.