

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 09-RC-242525	Date Filed JUNE 3, 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 United Rentals		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 101 Steel Ave. WV St. Albans 25177-	
3a. Employer Representative - Name and Title Jeff Phillips		3b. Address (If same as 2b - state same)	
3c. Tel. No. (304) 727-4863	3d. Cell No.	3e. Fax No. (304) 727-4865	3f. E-Mail Address
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Others		4b. Principal product or service Fluid Solutions: Pumps, Tanks, Filtration	5a. City and State where unit is located: Saint Albans, WV
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: 13 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).		8b. Address	
8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

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

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

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
--

11b. Election Date(s): to be determined	11c. Election Time(s): to be determined	11d. Election Location(s): 101 Steel Avenue, St. Albans, WV 25177
--	--	---

12a. Full Name of Petitioner (including local name and number) Robert Merritt International Union of Operating Engineers, Local Union No. 132	12b. Address (street and number, city, state, and ZIP code) 606 Tennessee Avenue WV Charleston 25302-
--	--

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 (AFL-CIO)			
--	--	--	--

12d. Tel No. (304) 343-7731	12e. Cell No. (304) 533-4895	12f. Fax No. (304) 342-8286	12g. E-Mail Address rmerritt@iuoe132.org
---------------------------------------	--	---------------------------------------	--

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

13a. Name and Title Lawrence B. Lowry Legal Counsel IUOE Local 132 Legal Counsel Office	13b. Address (street and number, city, state, and ZIP code) 636 4th Avenue PO Box 402 WV Huntington 25708-
--	---

13c. Tel No. (304) 529-2434	13d. Cell No. (304) 544-9138	13e. Fax No. (304) 529-6179	13f. E-Mail Address lblowry@iuoe132.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) Lawrence B. Lowry	Signature Lawrence B. Lowry	Title Legal Counsel	Date 05/30/2019 14:12:39
--	---------------------------------------	-------------------------------	------------------------------------

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.

DO NOT WRITE IN THIS SPACE

Case

Date Filed

Attachment

Employees Included

All fulltime and regular parttime drivers, service techs, and equipment associates

Employees Excluded

All office clerical employees, all professional employees, guards and supervisors as defined in the Act

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
09-RC-242945

Date Filed
June 10, 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 Paragon Systems Inc		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 13900 Lincoln Park Drive Suite 300 VA Herndon, 20171-	
3a. Employer Representative - Name and Title Laura M Hagan		3b. Address (If same as 2b - state same) 13900 Lincoln Park Drive Suite 300 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: Louisville, KY	
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: 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) _____ 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 Protection & Response Officers of America, Inc. (PROA) and its Local Jacqueline Tay		8b. Address 1870 The Exchange Suite 100 GA Atlanta 30339-	
8c. Tel No. (888) 889-7762	8d. Cell No. (770) 951-7077	8e. Fax No.	8f. E-Mail Address admin@proaunion.org
8g. Affiliation, if any		8h. Date of Recognition or Certification 09/02/2016	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 11/15/2019

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): July 1, 2019 **11c. Election Time(s):** Mail Ballot Election **11d. Election Location(s):** All Locations in Louisville KY

12a. Full Name of Petitioner (including local name and number)
Steve Maritas
Law Enforcement Officers Security Unions LEOSU, 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 LEOSUNIONS@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 06/10/2019 02:40:44
--------------------------------------	-----------------------------------	-------------------------------------	------------------------------------

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 09-RC-242945	Date Filed June 10, 2019

Employees Included

All armed and unarmed security officers employed by Paragon Systems, Inc., performing guard duties as defined by Section 9(b)(3) of the National Labor Relations Act, assigned to Federal facilities in Louisville

Employees Excluded

All other Paragon / Patronus Systems armed and unarmed security officers employed by Paragon Systems, Inc., / Patronus Systems Inc as of July 1, 2019, performing guard duties as defined by Section 9(b)(3) of the National Labor Relations Act, assigned to Federal facilities throughout Kentucky and Office clerical employees, managerial personnel, supervisors as defined by the National Labor Relations Act

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

FIRST
AMENDED

DO NOT WRITE IN THIS SPACE	
Case No. 09-RC-243304	Date Filed JUNE 20, 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 Paragon Systems Inc / Patronus Systems Inc		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 13900 Lincoln Park Drive Suite 300 Patronus Systems Inc Mabel O'Quinn President 3610 Harlock Rd N VA Herdon 20171-	
3a. Employer Representative - Name and Title Sylvia J. Martinez		3b. Address (If same as 2b - state same) 13900 Lincoln Park Drive Suite 300 3610 Harlock Rd Melbourne Florida 32934 VA Herdon 20171-	
3c. Tel. No. (571) 321-0908	3d. Cell No. (202) 515-1355	3e. Fax No. (703) 880-7754	3f. E-Mail Address smartinez@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: Louisville, KY		6a. No. of Employees in Unit: 83	
5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
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). The Protection & Response Officers of America, Inc. (PROA) and its Local 725 Jacqueline		8b. Address Taylor 1870 The Exchange Ste 100 GA Atlanta 30339-	
8c. Tel No. (770) 951-7077	8d. Cell No.	8e. Fax No.	8f. E-Mail Address admin@proaunion.org
8g. Affiliation, if any		8h. Date of Recognition or Certification 09/02/2016	
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) _____		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 11/11/2019	
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) International Union Security Police and Fire Professionals of America SPFPA			
10a. Name Rick O'Quinn Region 2 Vice President	10b. Address 3610 Harlock Rd FL Melbourne 32934-	10c. Tel. No. (321) 622-4729	10d. Cell No. (321) 543-3310
		10e. Fax No.	10f. E-Mail Address rickoquinn@spfpa.org
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): June 27, 2019	11c. Election Time(s): Mail Ballot	11d. Election Location(s): Mail Ballot throughout the Commonwealth of Kentucky	
12a. Full Name of Petitioner (Including local name and number) Steve Maritas Law Enforcement Officers Security Unions LEOSU, 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) 565-3500	12e. Cell No. (202) 486-8558	12f. Fax No. (202) 565-3500	12g. E-Mail Address LEOSUNIONS@GMAIL.COM
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Grant Lally Counsel Lally & Misir, LLP		13b. Address (street and number, city, state, and ZIP code) 220 Old Country Road Suite 2 NY Mineola 11501-	
13c. Tel No. (516) 741-2666	13d. Cell No. (917) 686-8440	13e. Fax No. (516) 742-8533	13f. E-Mail Address glally@lallymisir.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) Steve Maritas	Signature Steve Maritas	Title LEOSU Organizing Director	Date 06/20/2019 13:01:22

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.

FIRST AMENDED

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
09-RC-243304	JUNE 20, 2019

Employees Included

This is an amended petition see Case 09-RC-243304 - All armed and unarmed security officers employed by Paragon Systems, Inc., / Patronus Systems, Inc performing guard duties as defined by Section 9(b)(3) of the National Labor Relations Act, assigned to Federal facilities in the Commonwealth of Kentucky

Employees Excluded

Office clerical employees, managerial personnel, supervisors 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.
09-RC-243304

Date Filed
June 14, 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 Paragon Systems Inc		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 13900 Lincoln Park Drive Suite 300 VA Herndon 20171	
3a. Employer Representative - Name and Title Sylvia J. Martinez		3b. Address (If same as 2b - state same) 13900 Lincoln Park Drive Suite 300 VA Herndon	
3c. Tel. No. (571) 321-0908	3d. Cell No. (202) 515-1355	3e. Fax No. (703) 880-7754	3f. E-Mail Address smartinez@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: Louisville, KY	
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: 83 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 Protection & Response Officers of America, Inc. (PROA) and its Local 725 Jacqueline		8b. Address 1870 The Exchange Ste 100 GA Atlanta 30339	
8c. Tel No. (770) 951-7077	8d. Cell No.	8e. Fax No.	8f. E-Mail Address admin@proaunion.org
8g. Affiliation, if any		8h. Date of Recognition or Certification 09/02/2016	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 11/15/2019

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): June 27, 2019	11c. Election Time(s): Mail Ballot	11d. Election Location(s): Mail Ballot throughout the Commonwealth of Kentucky
12a. Full Name of Petitioner (including local name and number) Steve Maritas Law Enforcement Officers Security Unions LEOSU, 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) 565-3500	12e. Cell No. (202) 486-8558	12f. Fax No. (202) 565-3500	12g. E-Mail Address LEOSUNIONS@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 LEOSU Organizing Director	Date 06/14/2019 10:49:23
--------------------------------------	-----------------------------------	---	------------------------------------

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
09-RC-243304	June 14, 2019

Employees Included

All armed and unarmed security officers employed by Paragon Systems, Inc., performing guard duties as defined by Section 9(b)(3) of the National Labor Relations Act, assigned to Federal facilities in the Commonwealth of Kentucky.

Employees Excluded

Office clerical employees, managerial personnel, supervisors as defined by the National Labor Relations Act

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

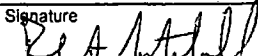
09-RC-243609

Date Filed

6-20-2019

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: CBRE/CyrusOne		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): Florence Data Center, 7190-7200 Industrial Drive, Florence, KY 41042	
3a. Employer Representative - Name and Title: Ms. Darcy Mackay, Chief HR Officer		3b. Address (if same as 2b - state same): CBRE, 45 Mission Street, Suite 4600, San Francisco, CA 94105	
3c. Tel. No. 415.772.0249	3d. Cell No.	3e. Fax No. 415.772.0459	3f. E-Mail Address darcy.mackay@cbre.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electronic Data Center		4b. Principal Product or Service Internet "Cloud" Services	
5a. City and State where unit is located: Florence, KY		5b. Description of Unit Involved: Included: Building Engineer; Lead Building Engineer Excluded: Statutorily Excluded Employees	
6a. Number 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? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 05.15.19 and Employer declined recognition on or about (Date) no reply (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)			
9. Is there now a strike or picketing at the Employer's establishment(s) involved? 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 None		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): ~ 07.09.19		11c. Election Time(s): 5:30 p.m. to 7:30 p.m.	
11d. Election Location(s): Florence Data Center			
12a. Full Name of Petitioner (including local name and number): International Union of Operating Engineers, AFL-CIO, CLC, Local 20		12b. Address (street and number, city, State and ZIP code): 1150 West 8th Street, Suite 205, Cincinnati, OH 45203	
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, AFL-CIO, CLC			
12d. Tel. No. 513.751.1671	12e. Cell No.	12f. Fax No. 513.751.2551	12g. E-Mail Address iuoe20@iuoe20.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Robert Mitchell, Esq.		13b. Address (street and number, city, State and ZIP code): Law Office of Robert Mitchell, 250 E. 5th St., 15th Fl., Cincinnati, OH 45202	
13c. Tel. No. 513.562.1553	13d. Cell No. 513.476.6330	13e. Fax No. 513.766.7426	13f. E-Mail Address robertmitchell@robertmitchell-law.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) Robert Mitchell		Signature 	Title Attorney
		Date 06.20.19	

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

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

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

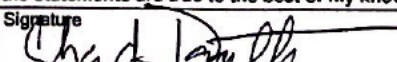
09-RC-244075

Date Filed

6-28-2019

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

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

2a. Name of Employer: NAES Cooperation		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 3439 Cincinnati Dayton Rd, Middletown, OH 45044	
3a. Employer Representative - Name and Title: Andy Duncan		3b. Address (if same as 2b - state same): Same	
3c. Tel. No. (513) 725-2250 ext 101	3d. Cell No. (602) 525-6504	3e. Fax No. N/A	3f. E-Mail Address andy.duncan@naes.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Gas Power Plant		4b. Principal Product or Service Electricity	
5b. Description of Unit Involved: Included: See Attached Excluded: See Attached		5a. City and State where unit is located: Middletown, Ohio	
		6a. Number of Employees in Unit: 9	
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 6/27/2019 (If no reply received, so state). and Employer declined recognition <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state) N/A		8b. Address: N/A	
8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
8g. Affiliation, if any: N/A		8h. Date of Recognition or Certification N/A	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? (Name of Labor Organization) N/A, has picketed the Employer since (Month, Day, Year) N/A			
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) N/A			
10a. Name N/A	10b. Address N/A	10c. Tel. No. N/A	10d. Cell No. N/A
		10e. Fax No. N/A	10f. E-Mail Address N/A
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: 11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail			
11b. Election Date(s): July 26, 2019		11c. Election Time(s): 7am to 8am and 6pm to 7 pm	
		11d. Election Location(s): Midpointe Library 125 S Broad St. Middleto	
12a. Full Name of Petitioner (including local name and number): International Brotherhood of Electrical Workers AFL-CIO Local 1347		12b. Address (street and number, city, State and ZIP code): 2100 Oak Road Cincinnati, OH 45241	
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			
12d. Tel. No. 513.541.6200	12e. Cell No. 513.505.1510	12f. Fax No. N/A	12g. E-Mail Address ibcw1347@yahoo.com
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Chad Donathan 4th District Lead Organizer		13b. Address (street and number, city, State and ZIP code): 2100 Oak Road Cincinnati, OH 45241	
13c. Tel. No. 859.404.8905	13d. Cell No. 859.404.8905	13e. Fax No. N/A	13f. E-Mail Address chad_donathan@ibew.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) Chad Donathan	Signature 	Title IBEW 4th District Organizer	Date 06/27/19

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.

Attachment

5. Unit Involved

Included: All full time and regular part time employees performing Production and Maintenance for the Employer at the Middletown Energy center located at 3439 Cincinnati Dayton Rd Middletown, OH 45044.

Excluded: Office Clerical employees, Professional employees, Guards and Supervisors as defined in the Act.

FORM NLRB-502 (RD)
(8-18)UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RD PETITIONCase No.
09-RD-244062Date Filed
6-27-2019

INSTRUCTIONS: Unless a 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 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-503); 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 Cincinnati Union Bethel		2b. Address(es) of Establishment(s) Involved (Street and number, city, state, ZIP code) 2015 West North Blvd Rd, Cincinnati, OH 45224	
3a. Employer's Name and Title Rach Leemooddy HR Director		3b. Address (if same as 2b - state name) 2401 Reading Rd, Cincinnati, OH 45202	
3c. Tel. No. 513-768-6907	3d. Fax No. 513-768-6922	3e. Cell No. 513-768-6927	3f. E-Mail Address rleemooddy@cubclincy.org
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Social service agency		4b. Principal product or service child care	

5a. Description of Unit Involved Included: All full time and part time non professional employees, including cooks, assistant cooks, Head Start teachers, Assistant Head Start teachers, Family service workers, maintenance employees, receptionist, switchboard operators and all other clerical employees employed by the Agency		5b. City and State where unit is located: Cincinnati
6. No. of Employees in Unit 9	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 SEIU		8b. Affiliation, if any	
8c. Address 917 MAIN ST, FIRST FLOOR CINCINNATI, OHIO 45202		8d. Tel. No. 477-233-8880	8e. Cell No.
		8f. Fax No.	8g. E-Mail Address no mrca seiu1199.org

9. Date of Recognition or Certification JUNE 16, 1998	10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) JUNE 1, 2020
---	--

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? 0
11c. The Employer has been picketed by or on behalf of (Insert Name) (Insert Address) since (Month, Day, Year)	

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	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 type="checkbox"/> Manual <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Mixed Manual/Mail
13b. Election Date(s)	13c. Election Time(s)	13d. Election Location(s)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

14. (b) (6), (b) (7)(C)	14a. (b) (6), (b) (7)(C)	14b. (b) (6), (b) (7)(C)	14c. (b) (6), (b) (7)(C)
14d. (b) (6), (b) (7)(C)	14e. (b) (6), (b) (7)(C)	14f. (b) (6), (b) (7)(C)	14g. (b) (6), (b) (7)(C)

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
RM PETITION

DO NOT WRITE IN THIS SPACE

Case No.

09-RM-242536

Date Filed

6/3/2019

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 a certificate of service showing service on all parties named in the petition of the following: (1) the petition; (2) Statement of Position form; and (3) Description of Procedures in Certification and Decertification Cases (Form NLRB 4812). The petition must also be accompanied by evidence supporting the statement that a labor organization has made a demand for recognition on the employer or that the employer has good faith uncertainty about majority support for an existing representative. However, if the evidence reveals the names and/or number of employees who no longer wish to be represented, the evidence shall not be served on any party.

1. PURPOSE OF THIS PETITION: RM-CERTIFICATION OF REPRESENTATIVE - One or more individuals or labor organizations have presented a claim to the Employer/Petitioner to be recognized as the representative of employees of the Employer/Petitioner or the Employer/Petitioner has a good faith uncertainty about majority support for an existing representative. If a charge under Section 8(b)(7) of the Act has been filed involving the Employer/Petitioner named in this petition, this statement shall not be deemed made. **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/Petitioner: Auto-Vehicle Parts LLC	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 100 Homan Drive, Cold Spring, KY 41076
3a. Employer/Petitioner Representative - Name and Title: Jeff Gilkinson, Chief Executive Officer	3b. Address (if same as 2b - state same): Same as 2b

3c. Tel. No. 8593416450 x102	3d. Cell No.	3e. Fax No.	3f. E-Mail Address jgilkinson@auveco.us
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Distributor		4b. Principal Product or Service Specialty and automotive clips and fasteners	

5a. Description of Unit Involved: Included: Warehouse employees of the company who are eligible to join the Union at the Cold Spring facility Excluded: Clerical Workers, Superintendents and supervisors	5b. City and State where unit is located: Cold Spring, KY
6. Number of Employees in Unit: 46	

Unless a charge alleging a violation of Section 8(b)(7) is pending, check **EITHER** item 7a or 7b, whichever is applicable

- ☐ 7a. A labor organization made a demand for recognition on the Employer/Petitioner on (Date) _____
☒ 7b. The Employer/Petitioner has a good faith uncertainty about majority support for an existing representative.

8a. Name of Recognized or Certified Bargaining Agent - Name Randy Pidcock		8b. Affiliation, if any: Staff Representative
8c. Address: 11838 Capital Way Louisville, KY 40299	8d. Tel. No. 502-968-6900	8e. Cell No.
	8f. Fax No.	8g. E-Mail Address rpidcock@usw.org

9. Date of Recognition or Certification 06/03/1998	10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 06/02/2019
--	--

11. 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) _____

12. Organizations or individuals other than those named in item 8, which have a contract with the Employer/Petitioner or represent employees of the Employer/Petitioner or demanded recognition as representatives and other organization and individuals known to have a representative interest in any employees in the unit described in item 5 above. (If none, so state)
None

12a. Name and affiliation if any	12b. Address	12c. Tel. No.	12d. Cell No.
		12e. Fax No.	12f. E-Mail Address

13. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: Auto-Vehicle Parts LLC requests an election.


13a. Election Type:☒ Manual ☐ Mail ☐ Mixed Manual/Mail

13b. Election Date(s): 06/14/2019	13c. Election Time(s): 7:30 am - 3:30 pm	13d. Election Location(s): 100 Homan Drive, Cold Spring, KY 41076
---	--	---

14. Representative of the Employer/Petitioner who will accept service of all papers for purposes of the representation proceeding.

14a. Name and Title: Jeff Gilkinson, Chief Executive Officer	14b. Address (street and number, city, State and ZIP code): 100 Homan Drive, Cold Spring, KY 41076		
14c. Tel. No. 8593416450 x102	14d. Cell No.	14e. Fax No.	14f. E-Mail Address jgilkinson@auveco.us

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) Jeff Gilkinson	Signature 	Title Chief Executive Officer	Date 5/31/19
---------------------------------------	---	---	------------------------

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.