

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
16-RC-253030

Date Filed
12/6/2019

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

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

2a. Name of Employer Travis Transit Management, Inc.	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2910 East 5th Street TX Austin 78702-
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3a. Employer Representative - Name and Title Kevin Gould	3b. Address (if same as 2b - state same) 2910 East 5th Street TX Austin 78702-
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3c. Tel. No. (512) 369-7409	3d. Cell No.	3e. Fax No.	3f. E-Mail Address kevin.gould@ratpdev.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transportation	4b. Principal product or service Passenger Transportation	5a. City and State where unit is located: Austin, TX
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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: 38 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) 12/06/2019 and Employer declined recognition on or about 12/06/2019 (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? _____ 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
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11b. Election Date(s): December 27, 2019	11c. Election Time(s): 11:00-11:30 am, 6:00-6:30 pm	11d. Election Location(s): Drivers' Quiet Room
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12a. Full Name of Petitioner (including local name and number) Brent Payne Amalgamated Transit Union Local 1091	12b. Address (street and number, city, state, and ZIP code) 725 Airport Blvd. TX Austin 78702-
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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)
Amalgamated Transit Union

12d. Tel No. (512) 386-6485	12e. Cell No. (512) 947-4298	12f. Fax No. (512) 386-7183	12g. E-Mail Address atupres1091@outlook.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Daniel B. Smith Assistant General Counsel AMALGAMATED TRANSIT UNION	13b. Address (street and number, city, state, and ZIP code) 10000 New Hampshire Ave MD Silver Spring 20903-1790
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13c. Tel No. (301) 431-7100	13d. Cell No. (202) 714-4219	13e. Fax No.	13f. E-Mail Address dsmith@atu.org
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Daniel B. Smith	Signature Daniel B. Smith	Title Assistant General Counsel	Date 12/6/2019 17:39:04
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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

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Employees Included

All full-time and regular part-time run dispatchers, lead run dispatchers, radio dispatchers, field supervisors, QA specialists, QA specialists Is, vehicle maintenance supervisors, service island supervisors, building maintenance supervisors and staff instructors working for the Employer at its Austin, Texas facility. The Petitioner is seeking a self-determination election to include the petitioned-for employees within an existing unit.

Employees Excluded

All other employees, office clerical employees, guards, managers, and supervisors as defined by the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RD PETITION

DO NOT WRITE IN THIS SPACE

Case No.

16-RD-253504

Date Filed

12/18/19

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

1. PURPOSE OF THIS PETITION: 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 Greif		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 902 S. William St. TX A lanta 75551-	
3a. Employer Representative - Name and Title Chris Adamson Plant Manager		3b. Address (If same as 2b - state same) 902 S. William St. TX A lanta 75551-	
3c. Tel. No. (903) 336-6501	3d. Cell No.	3e. Fax No.	3f. E-Mail Address christopher.adamson@greif.com
4a. Type of Establishment (Factory, mine, wholesaler, etc) Paper & Paper Products		4b. Principal product or service Paper cores and tubes	
5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details		5a. City and State where unit is located: A lanta, TX	
		6a. No. of Employees in Unit: 45	
		6b. 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 <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 United steel, paper and forestry, rubber, manufacturing, energy, allied industrial and service		8b. Address 9978 FM road 3129 TX Queen city 75572-	
8c. Tel No.	8d Cell No. (903) 824-5468	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any United steel, paper and forestry, rubber, manufacturing, energy, allied		8h. Date of Recognition or Certification 03/02/2017	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 03/01/2021

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No _____. If so, approximately how many employees are participating? _____.
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

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

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

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

11a. Election Type: ☒ Manual ☐ Mail ☐ Mixed Manual/Mail
11b. Election Date(s): 12/23/2019 **11c. Election Time(s):** 10am

12a. Full Name of Petitioner (b) (6), (b) (7)(C) **12b. Address** (street and number, city, state, and ZIP code)
(b) (6), (b) (7)(C)

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) (b) (6), (b) (7)(C)
United steel, paper and forestry, rubber, manufacturing, energy, allied industrial and service and service workers international u

12d. Tel No. (b) (6), (b) (7)(C)	12e. Cell No.	12f. Fax No.	12g. E-Mail Address (b) (6), (b) (7)(C)
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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)	
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) (b) (6), (b) (7)(C)	Signature (b) (6), (b) (7)(C)	Title (b) (6), (b) (7)(C)	Date 12/16/2019 12:56:39
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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Attachment

Employees Included
Hourly collegus

Employees Excluded
None

DO NOT WRITE IN THIS SPACE	
Case 16-RD-253504	Date Filed 12/18/19

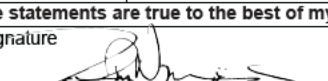
UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
16-RC-253830Date Filed
12/26/19

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

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

2a. Name of Employer: LaSalle Southwest Corrections		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1209 Sunflower Lane, Alvarado, TX 76009	
3a. Employer Representative - Name and Title: Chris Bell, Regional Warden		3b. Address (if same as 2b - state same): 26228 Ranch Road 12, Dripping Springs, TX 78620	
3c. Tel. No. 512-858-7202	3d. Cell No. 936-355-7864	3e. Fax No. 512-858-7212	3f. E-Mail Address cbell@lasallecorrections.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Detention Center		4b. Principal Product or Service Security	5a. City and State where unit is located: Alvarado, TX
5b. Description of Unit Involved: Included: See attached Excluded: See attached			6a. Number of Employees in Unit: 150 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) <u>NA</u> and Employer declined recognition on or about (Date) (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>No</u> <input checked="" type="checkbox"/> If so, approximately how many employees are participating? _____ (Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state) None			
10a. Name		10b. Address	10c. Tel. No.
			10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts and 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): ASAP		11c. Election Time(s): TBD	11d. Election Location(s): On-site
12a. Full Name of Petitioner (including local name and number): Federal Contract Guards of America		12b. Address (street and number, city, State and ZIP code): 445 Park Ave, New York, NY 10022	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): None			
12d. Tel. No. 212-541-3753	12e. Cell No.	12f. Fax No.	12g. E-Mail Address MEMBERSERVICES@FCGOA.COM
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Kim Nguyen, Esq., Vice President		13b. Address (street and number, city, State and ZIP code): 445 Park Ave, New York, NY 10022	
13c. Tel. No. 212-541-3753	13d. Cell No. 917-747-8338	13e. Fax No.	13f. E-Mail Address KNGUYEN@FCGOA.COM
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Kim Nguyen		Signature 	Title Vice President
			Date 12/26/19

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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RC Petition – LaSalle Southwest Corrections

5b. Description of Unit Involved:

Included:

All full-time and regular part-time, armed and unarmed, Detention/Transport and Intake Officers performing guard duties under the Employer's contract with the Federal Government at Prairieland Detention Center located in Alvarado, TX.

Excluded:

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