

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

16-RC-237007

Date Filed

3/4/19

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

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

2a. Name of Employer: Oncor Electric Delivery	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1616 Woodhall Rogers FWY, Dallas, TX 75202
3a. Employer Representative - Name and Title: Kyle Davis, Senior Director	3b. Address (if same as 2b - state same): Same as 2b

3c. Tel. No.	3d. Cell No. 214-808-7447	3e. Fax No.	3f. E-Mail Address Kyle.Davis3@oncore.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electric Utility		4b. Principal Product or Service	5a. City and State where unit is located: Texas
5b. Description of Unit Involved: Included: Distribution Operation Technicians ("DOTs") working for the Employer in Texas. Excluded: All other employees including guards and supervisors as defined in the Act			6a. Number of Employees in Unit: 90
			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: ☐ 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ (If no reply received, so state).
☐ 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state) None	8b. Address:
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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)
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: ☐ Manual ☒ Mail ☐ Mixed Manual/Mail

11b. Election Date(s): ASAP	11c. Election Time(s): N/A	11d. Election Location(s): Mail
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12a. Full Name of Petitioner (including local name and number): International Brotherhood of Electrical Workers, Local 69	12b. Address (street and number, city, State and ZIP code): 1408 N Washington, Suite 210, Dallas, TX 75204
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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):
International Brotherhood of Electrical Workers

12d. Tel. No. 214-821-4700	12e. Cell No.	12f. Fax No. 214-821-6906	12g. E-Mail Address
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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: Bobby Reed, Business Manager/Financial Secretary	13b. Address (street and number, city, State and ZIP code): 1408 N Washington, Suite 210, Dallas, TX 75204
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13c. Tel. No.	13d. Cell No. 972-965-1382	13e. Fax No.	13f. E-Mail Address ibewloc69@aol.com
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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) Bobby Reed	Signature <i>Bobby W. Reed</i>	Title Business Manager	Date 3/4/19
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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. **16-RC-237030**

Date Filed **3/5/2019**

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 Dollar/Thrifty Car Rental		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Bush Intercontinental Airport, 17330 Palmetto Pines, Houston, TX 77032	
3a. Employer Representative - Name and Title Nolan Darby, Manager		3b. Address (If same as 2b - state same) 7330 Palmetto Pines, Houston, TX 77032	
3c. Tel. No. 281-408-5649	3d. Cell No.	3e. Fax No.	3f. E-Mail Address jmcpherson@hertz.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) car rental agency		4b. Principal product or service rental of motor vehicles	
5b. Description of Unit Involved Included: All Counter Sales Representatives, Instant Return Representatives, Exit Gate Representatives, and Host/Customer Experience Representatives employed by the Employer at Bush Intercontinental Airport Excluded: Supervisors, confidential secretarial, security employees as defined by The Act, and other titles specifically excluded by the Act.		5a. City and State where unit is located: Houston, Texas	

6a. No. of Employees in Unit: Approximately 28	
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) NA 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). NA		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)
NA

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):
11c. Election Time(s):
11d. Election Location(s):

12a. Full Name of Petitioner (including local name and number) Communications Workers of America, AFL-CIO	12b. Address (street and number, city, state, and ZIP code) 2300 Valley View Lane, Suite 700 Irving, Texas 75062
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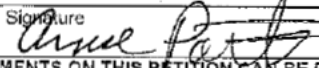
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Communications Workers of America, AFL-CIO

12d. Tel No. 214-441-9290/214-638-3255	12e. Cell No. 817-692-4206	12f. Fax No. 214-441-9399	12g. E-Mail Address aporter@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.

13a. Name and Title Annise Porter		13b. Address (street and number, city, state, and ZIP code) 2300 Valley View Lane, Ste 700 Irving, Texas 75062	
13c. Tel No. 214-441-9290/214-638-3255	13d. Cell No. 817-692-4206	13e. Fax No. 214-441-9399	13f. E-Mail Address aporter@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.

Name (Print) Annise Porter	Signature 	Title CWA Campaign Lead	Date March 4, 2019
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

16-RC-237565

Date Filed

3/13/2019

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 5b 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: 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:

Du Pont

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

9701 Bayport Blvd Pasadena, TX 77507

3a. Employer Representative - Name and Title:

Ed Flanagan Plant Manager

3b. Address (if same as 2b - state same):

Same As Above

3c. Tel. No.

281-474-8604

3d. Cell No.

3e. Fax No.

281-474-8640

3f. E-Mail Address

edward.m.flanagan@dupont.com

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

Chemical Plant

4b. Principal Product or Service

Plastics

5a. City and State where unit is located:

Pasadena TX

5b. Description of Unit Involved:

Included:

All hourly full time and part time Lab, Maintenance and Operations employees.

Excluded:

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

5c. Number of Employees in Unit:

32

5d. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? ☒ Yes ☐ NoCheck One: ☒ 7a. Request for recognition as Bargaining Representative was made on (Date) 3/13/2019 and Employer declined recognition

on or about (Date) N/A (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):

4/11/2019 & 4/12/2019

11c. Election Time(s):

3:00 pm to 5:00pm each day

11d. Election Location(s):

Employee Manufacturing Breakroom

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

International Union of Operating Engineers Local 564

12b. Address (street and number, city, State and ZIP code):

2120 n Brazosport Blvd Richwood, TX 77531

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 local 564

12d. Tel. No.

979-480-0003

12e. Cell No.

(b) (6), (b) (7)(C)

12f. Fax No.

979-480-0509

12g. E-Mail Address

(b) (6), (b) (7)(C) @local564.com

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

13a. Name and Title:

(b) (6), (b) (7)(C) (Organizer)

13b. Address (street and number, city, State and ZIP code):

2120 N Brazosport Blvd Richwood, TX 77531

13c. Tel. No.

979-480-0003

13d. Cell No.

(b) (6), (b) (7)(C)

13e. Fax No.

979-480-0509

13f. E-Mail Address

(b) (6), (b) (7)(C) @local564.com

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

(b) (6), (b) (7)(C)

(b) (6), (b) (7)(C)

Organizer

Date
3/13/2019

WILLFUL FALSE STATEMENTS

PRIVACY ACT STATEMENT

PRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

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.

16-RC-238022

Date Filed

3/20/19

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

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

2a. Name of Employer: Northstar Alarm and Suppression Systems LLC		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 4616W Howard Ln. Austin Texas 78728 510 E Corporate Dr. Ste#700 Lewisville Texas 75057	
3a. Employer Representative - Name and Title: Chris Shuman		3b. Address (if same as 2b - state same): same	
3c. Tel. No. (469) 635-4400	3d. Cell No. (469)293-1470	3e. Fax No. (214) 635 4401	3f. E-Mail Address: chris.shuman@northstarfire.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) construction		4b. Principal Product or Service Fire Protection	5a. City and State where unit is located: Austin Texas
5b. Description of Unit Involved: Included: Fire Alarm Technicians Excluded: Supervisors and Office Staff		6a. Number of Employees in Unit: 25 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) 3-18-2019 and Employer declined recognition on or about (Date) 2-27-2019 (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	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election:		11a. Election Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s):	11c. Election Time(s):	11d. Election Location(s):	
12a. Full Name of Petitioner (including local name and number): Road Sprinkler Fitters Local Union No.669. U.A.AFL-CIO		12b. Address (street and number, city, State and ZIP code): 7050 Oakland Mills Rd. Suite 200 Columbia Maryland 21046	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): United Association of Journeyman and Apprentices of the Plumbing and Pipefitting Industry of the United States & Canada			
12d. Tel. No. 410-381-4300	12e. Cell No.	12f. Fax No. 301-621-8045	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: (b) (6), (b) (7)(C)		13b. Address (street and number, city, State and ZIP code): PO box 60747 Houston Texas 77205	
13c. Tel. No. 713 702 0091	13d. Cell No.	13f. E-Mail Address (b) (6), (b) (7)(C); (b) (6), (b) (7)(C)	
I declare that I have read the above petition and that the statement		and belief.	
Name (Print) (b) (6), (b) (7)(C)	Signature (b) (6), (b) (7)(C)	Organizer	Date 3-18-2019

WILLFUL FALSE STATEMENTS ON THIS PETITION C

ONMENT (U.S. CODE, TITLE 18, SECTION 1001)

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

16-RC-238365

Date Filed

3/26/2019

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

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

2a. Name of Employer First Student		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 914 Cedarview Drive TX Cedar Hill 75104	
3a. Employer Representative - Name and Title Tony Handcuff		3b. Address (If same as 2b - state same) 914 Cedarview Drive TX Cedar Hill 75104	
3c. Tel. No. (972) 293-8531	3d. Cell No.	3e. Fax No.	3f. E-Mail Address TonyHandcuff@firstgroup.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transportation		4b. Principal product or service Student Transportation	
4c. City and State where unit is located: Cedar Hill, TX			

5b. Description of Unit Involved		6a. No. of Employees in Unit: 140
Included: 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"/>
Excluded: 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.

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.

11b. Election Date(s): 4/16/19	11c. Election Time(s): 8:00 AM to 2:30 PM	11d. Election Location(s): Break Room
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12a. Full Name of Petitioner (including local name and number) Kenneth Day Amalgamated Transit Union Local 1338	12b. Address (street and number, city, state, and ZIP code) 1111 Empire Central Pl TX Dallas 75247-4305
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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. (214) 828-1641	12e. Cell No. (469) 855-0994	12f. Fax No. (214) 828-1809	12g. E-Mail Address kday1338@aol.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title 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	
13c. Tel No. (301) 431-7100	13d. Cell No. (301) 431-7100	13e. Fax No.	13f. E-Mail Address dsmith@atu.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) Daniel B. Smith	Signature Daniel B. Smith	Title Assistant General Counsel	Date 03/26/2019 12:12:36
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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 16-RC-238365	Date Filed 3/26/2019

Employees Included

All full-time and regular part-time drivers and monitors employed by the Employer in and out of its facility currently located in Cedar Hill, Texas.

Employees Excluded

Mechanics, all other employees, office clerical employees, guards, managers and supervisors defined by the Act.