FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE	IN THIS SPA	CE
No. 21-RC-240953	Date Filed	5-7-2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, <u>www.nlrb.gov</u>, 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

Case

(Form NLRB-	505); and (3) Descript	ion of Repres	entation C	ase F	roced	ures (Form NL)	RB 4812). The s	howing	g of inter	rest sho	uld only be filed
with the NLRE									_	-		-
PURPOSE OF bargaining by requests that	THIS PETITION Petitioner and the National	ON: RC-CEI Petitioner de	RTIFICATION OF	REPRESE ed as repres eed under i	NTATI centativ its pro	VE - A s ve of the per auth	ubstantial number employees. The lority pursuant to	of employees wish Petitioner alleges to Section 9 of the N	hat the f	ollowing Labor Rel	circumst ations Ac	ances exist and ct.
2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number. city, State, ZIP code) Killion Industries, Inc. 1380 Poinsettia Avenue, Vista, CA 92081 & 2480 Ash Street, Vista CA 92081												
									& 248	U Ash S	treet, v	ISta CA 92081
3a, Employer Ro Richard W. Ki		- Name and	Litte			Same	•	s 2b – state same)				
3c. Tel. No.			3d. Cell No.			3e. Fa	ıx No.		3f. E-N	Mail Addre	SS	
(760) 727-5102 (760) 727-5108												
4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located:										there unit is located:		
Manufacturing	Store			Store fix	tures	and c	ase work	•	\ \	/ista, Ca	alifornia	·
5b. Description	of Unit Involv	ed		·								Employees in Unit:
Included: Ple	2266 666	attach	ment Δ							1	'5	
Excluded:	ease See	١									or more) (unit wish	substantial number (30% of the employees in the to be represented by the ? Yes 🗸 No
Check One:	7a. R	equest for re	cognition as Barg	aining Repr	esenta	tive was	made on (Date)	None a	nd Emplo	yer declir	ned recog	nition on or about
i	片 _		(Date)	(If no reply r	eceive	d, so sta	te).					!
	7b. P	etitioner is cu	rrently recognize	d as'Bargai	ning R	epresen	ative and desires	certification under th	e Act.			
	ognized or C	ertified Barg	gaining Agent (II	f none, so s	tate).		8b. Address					
None.			1 0 1 0 11 1			1 00 5	<u> </u>		1 2f C.A	Anil Addre	<u> </u>	
8c. Tel No.			8d Cell No.			Be. 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 nicke	eting at the F	mployer's establis	shment(s) in	volved	? No	If so, approx	imately how many e	mployee	s are parti	icipating?	
	ŕ	-						Month, Day, Year) _				•
	or organization									tives and	albor oros	rainations and individuals
 Organization known to have a None. 	s or individual representative	s other than t e interest in a	Petitioner and tho my employees in	se named in the unit desi	ritems cribed	and 9 in item 5	, which have claim b above. (Il none,	, so state)	presenia	lives and	omer orga	inizations and individuals
10a. Name			10b. Ad	dress			10c. Tel. No.				10d. Ce	il No.
								10e. Fax No.			10f. E-N	fail Address
11. Election Det		RB conducts	an election in th	is matter, st	ate you	ır positio	n with respect to	11a. Election Typ	e:tv	/anual	Mail _	Mixed Manual/Mail
11b. Election Da				lection Time				11d. Election Location(s): ad of shift time Break / funch room at each location above in Section 2.b				
May 28, 2019					wo hou	ars from	end of shift time					
Cabinet Makers.	Millmen & In	dustrial Car	ocal name and no penters Local 72	21				12b. Address (str 10015 Rose Hills				
12c. Full name o	f national or in	itemational la	abor organization ners of America	of which Pe	titioner	is an af	illiate or constituer	nt (if none, so state)				
124, 161116.						ax No. 695-1159		12g. E	E-Mail Add	fress		
(562) 695-0571	ive of the Pe	litioner who	will accept serv	ice of all pa	pers f			sentation proceeding	ng.			
· ·				•••				d number, city, state		code)		
13a. Name and	'''' Desr	nond C	. Lee			DeCar	to & Shanley, 533 S.	Fremont Ave., 9th Floor	Los Ange	eles, Californ	nia 90071	
13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address												
(213) 488-4100			l				488-4180	·	dlee@	deconsel	.com	
I declare that I I	have read the	above petit	ion and that the	statements	are tr	ue to th	e best of my know	wledge and belief.				
Name (Print)						Tille				ale		<u> </u>
Desmond C. Led	ė	1/8	gnature:			Attorn	ey		Ma	ay 6, 2019	3	

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 Intigation. 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 LLRB to decline to invoke its processes.

Attachment A to RC Petition

Cabinet Makers Millmen and Industrial Carpenters Local 721 and Killion Enterprises, Inc.

5.b. Description of Unit Involved

INCLUDED: Any employees performing store fixture or case work at Killion Enterprises, Inc.'s addresses at 1380 Poinsettia Avenue, Vista, California 92081 and 2480 Ash Street, Vista, California 92081 which include but are not limited to assembling and building cabinets, finishing completion of refrigeration work, performing of work by electricians (certified or non-certified), driving from either addresses to other addresses, shipping and receiving, assembling refrigerators and any leads or assistants to the above-referenced work.

EXCLUDED: Any supervisors, clerical employees, confidential employees and guards.

FORM NURB-502 (RC) (2:18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE Date Filed 5-8-2019 Case No. 21-RC-241000

			·									
INSTRUCTIONS: Unless e-Filed us employer concerned is located. Ti the employer and all other parties Case Procedures (Form NLRB 481	he petition must named in the p	t be accompa- etition of: (1)	inled by the peti	both a	sho 2) Sta	wing of interest (sec itement of Position	e 6b t form	below) and (Form NLR	a certificat (8-505); and	e of service she I (3) Descriptio	owing se n of Rep	ervice on presentation
PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Labo	ioner desires to b	e certified as r	represer	ntative o	of the	employees. The Pet	titione	er alleges t	hat the follo	owing circumst	ances e	
2a. Name of Employer. Digntiy Memorial d/b/a G Memorial Park & Mortuai	len Abbey					stablishment(s) involved., Bonita, CA			umber, City,	State, ZIP code);·	
3a. Employer Representative - Name and Title: 3b. Addres Pamela S. Giley, Manager Same					same	as 2b - state same):	;					
3c. Tel. No. 619-498-4600	3d. Gell No.	- 		3e. Fax	c No.]3	f, E-Mail Ad	dorešs			
4a. Type of Establishment (Factory, of Memorial Park and Mortu		, etc.)		_		Product or Service Services	•		5a, City an Bonita	d State where u	nlt is loca	rted:
5b. Description of Unit Involved: Included: Ground Specialists								,	11	r of Employees		
Excluded: All other employees, office				•	•				of the e represe	ibstantial number imployees in the inted by the Peti	unit wish tioner?	n to be
Check One: X 7a. Request for rec on or about (Date) 7b. Petitioner is cur		(If no.	reply re	ceived,	so st	ate).			i Employer (ledined recogni	ion	
8a. Name of Recognized or Certifie None										 		
8c. Tel. No.	8d. Cell No.	Marie Control of the		8e. Fax	x No.		I	8f. E-Mail A	ddress	·		
8g. Affiliation, if any:			8h	Date of Recognition or Certification 8I, Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)								
Is there now a strike or picketing a (Name of Labor Organization)	t the Employers	establishment	i(s) invol	ved? N	Vo	If so, approx		٠.		s are participatir er since (Month,	·	
Organizations or individuals other individuals known to have a repressione	r than Petitioner esentative interes	and those nam st in any emplo	ned in its oyees in	ems B a the unit	nd 9	, which have claimed cribed in item 5b abo	recog	gnition as re	presentativ			
10a, Name	10b	. Address						10c. Tel. No).	10d. Cell No.		
⊽ভু, ,⊲	}-						ļ.	10e. Fax No.		10f. E-Mail Address		<u>.</u>
11. Election Details: If the NLRB co				e your p	oosític	on with respect to any			Manua	il Mail [Mixed	Manual/Mail
11b. Election Date(s): Any date after June 8, 20	19 60			ote b		re start of shift	t		iate mee	ting or brea	ık rooi	n at site
12a. Full Name of Petitioner (including local name and number): Southern California District Council of Laborers and its Affiliated Local 89 12b. Address (street and number, city, State and ZIP code): 4399 Santa Anita Ave., Suite 205 El Monte, CA 91731												
12c. Full name of national or internal Laborers International Un				oner is a	an əf	filiate or constituent ((it non	e, so state).				
12d. Tel. No. 626-350-6900	12e, Cell No.	<u> </u>	:	12f. Fa	X No			12g. E-Mail Vmaced	Address O@local	89.огд		
13. Representative of the Petitione 13a. Name and Tille: Aaron G. Lawrence, Attorne	`-	pt service of	all pape	13b. A	ddres	oses of the represer ss (street and numbe Ishire Blvd., Sur	r, city	State and	ZIP code):	CA 90010		
13c. Tel. No: 213-386-3860	13d, Cell No.			i.	386	5-5583		131. E-Mail arthurf@		com.		
I declare that I have read the abov	e petition and t	hat the statem Signature		re true 1	to th	e best of my knowle	edge					Date
Arthur N. Four			1	سينسد		>	1 .	torney				05/07/19

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 er 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, 2005). 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

DO NOT WRITE IN THIS SPACE Case No. Date Filed 21-RC-241065 5-8-2019

BC PETITION

no rei		<u> </u>			411 88 20 1 1 1 2					
INSTRUCTIONS: Unless e-Filed usin										
in which the employer concerned is										
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-CERT	FICATION OF REPRESE	NTATIVE - A substantial number	of employees wish to	ne represented	for purposes of collective					
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 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)										
Médi-Waste Disposal 235 Deininger Circle, Corona, CA 92880										
3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Richard Brager, CEO, Same										
3c. Tel. No. (323) 892-8459	d. Čeli No.	3e. Fax No.		3f, E-Mail Addr richard	ess @medi-waste.com					
4a. Type of Establishment (Factory, mine, who	lesaler, etc.) 4b. Princi	pal product or service	······································	5a. City a	nd State where unit is located:					
Waste disposal facility		Medical was	te disposal		Corona, CA					
5b. Description of Unit Involved					6a. No. of Employees in Unit:					
Included: All full-time and regular part-ti	me drivers employed by the	ne Employer at its facilities curren	ntly located at 235 Deir	inger	6b. Do a substantial number (30%					
	ent contractors, office and	clerical employees, professional	employees, managerial	ľ	or more) of the employees in the					
employees, guards, supervisors	·		4		unit wish to be represented by the Petitioner? Yes \(\sqrt{N} \) No					
Check One: 7a. Request for reco	inition as Bargaining Repr	esentative was made on (Date) _	and	Employer decli	ned recognition on or about					
	(Date) (If no reply r									
8a. Name of Recognized or Certified Bargai		ning Representative and desires (tate). 8b. Address	certification under the A	ACI.						
None .	mig Agein (il fioric, 50 5	ob, Address								
8c. Tel No.	d Cell No.	8e. Fax No.		Bf. E-Mail Addr	ess					
8g. Affiliation, if any		8h. Date of Recognition o			ate of Current or Most Recent					
				Contract, if any	(Month, Day, Year)					
9. Is there now a strike or picketing at the Emp	oyer's establishment(s) in	volved? No If so, approx	rimately how many emp	loyees are par	ticipating?					
(Name of labor organization)	, h	as picketed the Employer since (Month, Day, Year)							
10. Organizations or individuals other than Pet known to have a representative interest in any				sentatives and	other organizations and individuals					
	compleyees in the unit desi	oned in term of above. (in none)	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 ar	election in this matter, sta	ate your position with respect to	11a. Election Type:	Manual	Mail Mixed Manual/Mail					
any such election. 11b. Election Date(s):	11c. Election Time	· · · · · · · · · · · · · · · · · · ·	11d. Election Location							
ASAP	1 i.c. Liecuon inne	3:30 a.m.		Empic	oyee Break Room					
	12a. Full Name of Petitioner (<i>Including local name and number</i>) 12b. Address (<i>street and number, city, state, and ZIP code</i>) 12c. Address (<i>street and number, city, state, and ZIP code</i>) 379 W. Valley Blvd., Rialto, CA 92376									
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (<i>if none, so state</i>) International Brotherhood of Teamsters										
	organization of which Pet	itioner is an affiliate or constituen	t (if none, so state)							
International Brotherhood of	organization of which Pet	itioner is an affiliate or constituen		12g. E-Mail Ado	dress					
International Brotherhood of 12d. Tel No.	organization of which Pet eamsters 2e. Cell No.	12f. Fax No.		12g. E-Mail Add	dress					
International Brotherhood of 12d. Tel No. (909) 877-4760 1	organization of which Pet Camsters 2e. Cell No: accept service of all pa	12f. Fax No.	sentation proceeding.	nd ZIP code)						
International Brotherhood of 12d. Tel No. (909) 877-4760 13. Representative of the Petitioner who will 13a. Name and Title Bradley S. Behern: 13c. Tel No. 1	organization of which Pet Camsters 2e. Cell No: accept service of all pa	12f. Fax No.	sentation proceeding. d number, city, state, at 3625 Ruffin Road, S	nd ZIP code) Suite 300 San I 13f. E-Mail Add	Diego, CA 92123					
International Brotherhood of 12d. Tel No. (909) 877-4760 13. Representative of the Petitioner who will 13a. Name and Title Bradley S. Behern:	organization of which Pet Teamsters 2e. Cell No. accept service of all pa , Esq. 3d. Cell No.	pers for purposes of the repres 13b. Address (street and 13e. Fax No.	sentation proceeding. d number, city, state, at 3625 Ruffin Road, S	nd ZIP code) Suite 300 San I 13f. E-Mail Add	Diego, CA 92123 Iress					
12d. Tel No. (909) 877-4760 1 1 1 1 1 1 1 1 1	organization of which Pet eamsters 2e. Cell No. accept service of all pa , Esq. 3d. Cell No. and that the statements	pers for purposes of the repres 13b. Address (street and 13e. Fax No.	sentation proceeding. d number, city, state, at 3625 Ruffin Road, S	nd ZIP code) Suite 300 San I 13f. E-Mail Add	Diego, CA 92123 Iress					

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

PRIVACY ACT STATEMENT

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UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE IN THIS SPACE							
Case No. 21-RC-241238	Date Filed 05-10-2019						

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 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) UIC Government Services, LLC dba Bowhead 606 S. Olive Street, Los Angeles, CA 90014 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 4900 Seminary Road, Suite 1200 Alexandria, VA 22311 April Ealy 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (703) 578-5566 (703) 379-6826 april.ealy@bowheadsupport.com 4b. Principal product or service 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: Military Contractor Military Support 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All full time and regular part-time General Clerks employed by the employer at its facility located at 6b. Do a substantial number (30% 606 S. Olive Street, Los Angeles, CA 90014. or more) of the employees in the Excluded: All managers, branch managers, regional managers, cooperate managers, all other professional employees, guards and unit wish to be represented by the supervisors as defined by the Act. Petitioner? Yes V No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) Ry Petition and Employer declined recognition on or about (Date) (If no reply received, so state). 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). 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? has picketed the Employer since (Month, Day, Year) (Name of labor organization) 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. 10f. E-Mail Address 10e. Fax No. 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: Manual Mail Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): Mail ballots Friday May 24, 2019 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Association of Machinists and Aerospace Workers, District Lodge 947 535 W. Willow Street Long Beach, CA 90806 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Association of Machinists and Aerospace Workers, AFL-CIO 12d. Tel No. 12e Cell No. 12f. Fax No. 12g. E-Mail Address (760) 810-6989 (916) 542-3351 rcarrillo@iamaw.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding 13a. Name and Title Eric J. Wiesner, Attorney 13b. Address (street and number, city, state, and ZIP code) Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501 13d. Cell No. 13e. Fax No. 13c. Tel No 13f. E-Mail Address nlrbnotices@unioncounsel.net 510-337-1023 510-337-1001 ewiesner@unioncounsel.net 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) Signature Title Date May 10, 2019 Eric J. Wiesner

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

PRIVACY ACT STATEMENT

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FORM NLRB-502 (RC) (2-18)

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

DO NOT WRITE IN THIS SPACE

Case No.

21-RC-241305

Date Filed 5-13-2019

INSTRUCTIONS: Unless e-Filed us employer concerned is located. Ti the employer and all other parties Case Procedures (Form NLRB 48:	he petition must named in the pe	be accompanie tition of: (1) the	d by both a petition; (2	showing of interest (se 2) Statement of Position	ee 6b below) i form (Form	and a certifica NLRB-505); ai	te of service id (3) Descri	showing s ption of Re	ervice on presentation	
PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Labo	oner desires to be	certified as repr	resentative o	of the employees. The Pe	etitioner alleg	es that the fol	lowing circu	mstances e		
2a, Name of Employer: SYSCO RIVERSIDE INC	2b. 7	Address(es) 750 Mer	of Establishment(s) involidian Parkway, Ri	lved (Street a iverside, (nd number, Cit CA 92518	, State, ZIP o	code):			
3a. Employer Representative - Nan Jon Nelson, Director	ne and Title:		Address (if same as 2b - state same): me							
3c. Tel. No. 951-601-5746	3d. Cell No. 3e. Fax No.					3f. E-Mail Address Nelson Jon@rssysco.com Nelson Jon@RS.Sysco.com				
4a. Type of Establishment (Factory, r warehouse	nine, wholesaler,	etc.)		ncipal Product or Service service distribution	<u> </u>	5a. City a	ide, CA			
5b. Description of Unit Involved: Included: All regular full and part- employed by the Emplo Excluded: All other employees, general r	oyer at its facility	currently loca	ated at 157	50 Meridian Way, Rive	erside, CA.	Act. 6b. Do a s	er of Employe	mber (30%		
						of the repres	employees in ented by the	Petitioner?		
	rently recognized	(If no rep as Bargaining R	ly received, tepresentativ	so state). ve and desires certification	n under the A	and Employer	aeclinea reco	ognition 		
8a. Name of Recognized or Certifie Salesdrivers, Helpers, and 683, International Brother	Dairy Empl	oyees Loca	state) 8b.	. Address: 333 E. Madison A	ve., Suite	200, El Ca	ijon, CA	92021		
8c. Tel. No. 61/9-232-7903	8d. Cell No. 619-396-66	56	8e. Fax	(No. 232-8077		ail Address her@team	sters683.	com		
8g. Affiliation, if any: IBT		· · · · · · · · · · · · · · · · · · ·	8h. Date o	of Recognition or Certification 2018		ation Date of C Contract, if any				
9. Is there now a strike or picketing a	t the Employer's e	stablishment(s) i	<u> </u>	<u> </u>	ximately how	many employee	s are particip	eating?		
(Name of Labor Organization) 10. Organizations or individuals other	then Ostitioner o	nd these named	in itoms 9 a	ad 9, which have claimed		eted the Employ				
individuals known to have a repre							es and other	organization	13 8110	
10a. Name	10b.	Address				10c. Tel. No.		0.		
					10e. Fa	x No.	10f. E-Mail	f. E-Mail Address		
11. Election Details: If the NLRB con	nducts and electio	n in this matter,	state your po	osition with respect to any	y such electio	n: 11a. Electio		☐ Mixed	l Manual/Mail	
11b. Election Date(s): June 4, 2019		Election Time(s): 0 pm to 3:00		· · · · · · · · · · · · · · · · · · ·		11d. Election Location(s): Conference Room at Sysco Riverside				
12a. Full Name of Petitioner (includ Salesdrivers, Helpers, and International Brotherhood	Dairy Empl	oyees Loca	1 683,	12b. Address (street 1333 E. Madis	and number, son Ave.,	city, State and Suite 200,	zip code): El Cajon,	CA 920	21	
12c. Full name of national or internati International Brotherhood			etitioner is a	an affiliate or constituent (if none, so sta	ite):				
12d. Tel. No. 202-624-6800	12e. Cell No.	<u> </u>	12f. Fa:	x No.	12g. E-I	Mail Address				
13. Representative of the Petitione 13a. Name and Title: Lee Fletcher, Secretary Trea		service of all p	13b. Ac	ourposes of the represer ddress (street and numbe E. Madison Ave., S	r, city, State a	nd ZIP code):	A 92021	, .		
13c. Tel. No. 619-232-7903	13d. Cell No. 619-396-66		- 5	873-2174	I.fleto	lail Address her@team	sters683.	com		
I declare that I have read the above Name (Print)	petition and the	t the statement Signature	ts are true t	o the best of my knowle	dge and bel	ef.			Date	
Florice Hoffman		Flore	ce Ho	ffman	attorney	<u>:</u>	 		05/10/19	

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

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

12e. Cell No.

13d. Cell No.

(619) 906-0394

International Association of Machinists and Aerospace Workers, District Lodge 725

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

International Association of Machinists and Aerospace Workers, AFL-CIO

13a. Name and Title David W.M. Fujimoto, Attorney

11c. Election Time(s):

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

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

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

and the second s

DO NOT WRITE IN THIS SPACE							
Case No. 21-RC-241409	Date Filed 5-14-2019						

Manual Mail Mixed Manual/Mail

13f. E-Mail Address dtujimoto@unioncounsel.ne

nirbnotices@unioncounsel.net, csencer@unioncounsel.net

11a. Election Type:

mail ballot

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

11d. Election Location(s):

Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501

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

12g. E-Mail Address

jmauldin@iam725.org

5150 Kearny Mesa Road, San Diego, CA 92111

Date

May 14, 2019

RC PETITION 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 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Affordable Engineering Systems (AES) (H-1 Depot) Camp Pendleton Hangar 1A, Oceanside, CA 92058/MCAS Miramar Hanger 5 San Diego, CA 92145 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 1455 Frazee Road, Suite #860 San Diego, CA 92108 Pat Godfrey, Manager Human Resources 3f. E-Mail Address 3d. Cell No. 3e. Fax No. (619) 522-9800 ext.#103 (619) 288-1882 (619) 522-9803 pat@affordservices.com 5a. City and State where unit is located: 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service Oceanside & San Diego, CA Military Contractor Military Support 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All full time and regular part-time Aircraft Mechanics I, Aircraft Mechanics II, Aircraft Mechanics III, 6b. Do a substantial number (30% Aircraft Workers, Aircraft Sheetmetal Mechanics, Logs and Records Clerks, Supply Technicians. or more) of the employees in the Guards, Office Clerical and Supervisors as defined in the Act. unit wish to be represented by the Petitioner? Yes V No Request for recognition as Bargaining Representative was made on (Date) By Petition and Employer declined recognition on or about Check One: (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 Bc. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address Bi. Expiration Date of Current or Most Recent 8h. Date of Recognition or Certification 8g. Affiliation, if any Contract, if any (Month, Day, Year) Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? , has picketed the Employer since (Month, Day, Year) (Name of labor organization) 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) 10c. Tel. No. 10d. Cell No. 10b. Address 10a Name 10e. Fax No. 10f. E-Mail Address

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

12f. Fax No.

13e. Fax No.

510-337-1023

Title

Attorney

(858) 292-5488

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.



any such election.

(858) 292-5150 ext 111

11b. Election Date(s): Thursday, May 30, 2019

12d, Tel No.

13c. Tel No

510-337-1001

Name (Print)

David W.M. Fujimoto

FORM NLRB-502 (RC) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE

| Case No. | 21-RC-242253 | Date Filed | 5-28-2019 |

INSTRUCTIONS: Unless e-Filed u employer concerned is located. I the employer and all other parties Case Procedures (Form NLRB 48	The petition s named in	must be accom the petition of: (panied b 1) the pe	y both a sl tition; (2) S	howing of interest (se Statement of Position	e 6b below) form (Form	and a certifica NLRB-505); an	te of service showing id (3) Description of F	service on Representation	
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: 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):										
Imperial Regional Detent				Gatewa						
Management and Training	g Corpo	ration	Calex	cico, CA	. 92231					
3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same):										
John Rathman, Warden			same							
3c, Tel. No. 760-618-7200	1	0-7460		1	8-7238			ntctrains.com		
4a. Type of Establishment (Factory, Detention Center	mine, whole	esaler, etc.)			pal Product or Service y, Detention			nd State where unit is lico, CA	ocated;	
5b, Description of Unit Involved:							6a. Numb	er of Employees in Uni	t	
Included: Detention Staff							1			
Excluded:	Detention Staff Excluded: Supervisory Staff, Non-essential support staff (e.g. Kitchen, Laundry, Library, Admin) 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No									
Check One: X 7a, Request for rec	cognition as	Bargaining Repre	esentative	was made	on (Date) 03/1	4/2019		declined recognition	· [6] 165 [1]	
on or about (Date)				eceived, so					į	
7b. Petitioner is cu					and desires certification	n under the A	CL	~ 		
None	eu baigaini	ing Agent (ii nom	e, 30 Stat	6) OU. M	Juiess,				į	
									ļ	
8c. Tef. No.	8d. Cell No	1. Cell No. 8f. E-Mail Address					ail Address			
8g. Affiliation, if any:			8				ation Date of C Contract, if any	urrent or Most (Month, Day, Year)		
9. Is there now a strike or picketing a	it the Emplo	yer's establishme	nt(s) invo	lved? No	If so, approx	imately how	nany employee	s are participating?		
(Name of Labor Organization)						, has picke	ted the Employ	er since (Month, Day,	Year)	
10. Organizations or individuals othe	r than Petiti	oner and those na	amed in it	tems 8 and	9, which have claimed					
individuals known to have a repre								v		
10a. Name*		10b. Address				10c. Tel	. No.	10d. Cell No.		
						10e, Fa	x Na.	10f. E-Mail Address		
		<u></u>								
11. Election Details: If the NLRB co	nducts and	election in this ma	atter, stat	e your posi	tion with respect to any	y such electio	l l	•		
		r			<u> </u>	 	X Manua		ed Manual/Mail	
11b. Election Date(s):		11c. Election Tir	ue(e):			11d. Ele	ction Location(s):		
12a. Full Name of Petitioner (including local name and number): IRDF Detention Officer's Union 12b. Address (street and number, city, State and ZIP code): 1572 Gateway Rd. Calexico, CA 92231										
			1		L		- C-1:			
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.	12e, Cell N	ło.		12f. Fax N	o.	12g. E-l	iail Address			
13. Representative of the Petitione	r who will a	accept service o	f all pape							
13a. Name and Title: Eduardo Cuevas, Detention	Officer			10455 E	ess (street and number 3. Orion Ave. AZ 85367	r, city, State e	ind ZIP code):			
13c. Tel. No. 760-693-9743	13d. Cell N	la.		13e. Fax N			lail Address tention@g	mail.com		
I declare that I have read the above	a natition a	nd that the etate	ments a	re true to #	ne best of my knowle	ľ				
Name (Print)	- portuon a	Signature		1)	Title			Date	
))	حر ا	.o. (16,00	N>	Detentio	n Officer		05/23/19	

FORM NLRB-502 (RD) (2-18)

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

Case No. 21-RD-242540

DO NOT WRITE IN THIS SPACE

Date Filed 05-31-2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, [Vivivi heb gow], submit an original of this Petition to an NLRB office in the Region in which the

employer concerned is located. The polition must be accomp the employer and all other parties named in the petition of (1) Case Procedures (Form NLRB 4812). The showing of interest	the petition; (2) Statement of	f Position form	(Form NLRB-505), at	nd (3) Description of Representation				
PURPOSE OF THIS PETITION: RD-DECERTIFICATION (REM recognized bargaining representative is no longer their represent Labor Relations Board proceed under its proper authority pu	ative. The Petitioner alleges	that the following	g circumstances exi					
la. Name of Employer Prudential Overall Supply	ment(s) involved	(Street and number, o	ity, state, ZIP code)					
Ba. Employer Representative - Name and Title	state same)	1						
Sandra Lieu, Manager c. Tel. No. 13d. Fax No.	3ë. Cell No.	3f F-Meit	Address					
(323)722-0636 (323)7-22-2346	on a man	3f, E-Mail Address						
la. Type of Establishment (Factory, mlne, wholesaler, etc.) Laundry		,	al product or service g services					
5a, Description of Unit Involved.			-	5b. City and State where unit				
See attached				Commerce, CA				
Excluded:								
8. No. of Employees in Unit 60 7. Do a substantial numbe recognized bargaining r		rees in the uniting	longer wish to be rep	presented by the certified or currently				
Ba. Name of Recognized or Certified Bargaining Agent			8b. Affiliation, if any					
Laundry Workers Local 52		<u> </u>						
3c. Address 920 S. Alvarado:St.	8d. Tel. (213):	No. 385-0271	8a. Cell No.					
Los Angeles, CA 90006	(213). (8f. Fax.)		8g. E-Mail Address					
	(213)		5					
3. Date of Recognition or Certification 1990	10. Expiration Date of Curre August 19, 2019	nt ar Most Recen	t Contract, if any (Mor	n(h, Day, Year)				
t1a. Is there now a strike or picketing at the Employer's establishme	nt(s) involved? Tyes	No 11b. If so,	approximately how m	any employees are participating?				
ic. The Employer has been picketed by or on behalf of (Insert Nam	ne)			a labor organization, of				
(insert-Address)				(Month, Day, Year)				
 Organizations or Individuals other those named in items 8 and 11 and individuals known to have a representative interest in any en 				anizations				
12a. Name 12b. Address		12c. Tel. N		12d. Fex No.				
		12e, Cell N	ula.	doc C Mail Adde				
		128. CBII I	NG.	12f. E-Mail Address				
Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		13a, Electi	ion Type: 🏻 Manual	☐ Mail ☐ Mixed Manual/Mail				
3b. Election Date(s) 13c. Election Tir			ion Location(s)					
June 11, 2019 4:00am-12:	30pm	Break r	oom at 6948 Ban	dini Blvd, Commerce, CA				
14. Full Name of Petitioner b) (6), (b) (7)(C)		<u>. : : :</u>						
14a. Address (Street and number, city, state, ZIP code) (b) (6), (b) (7)(C)		14b. Tel. ř	10.	14c, Fax No.				
b) (b), (b) (7)(c)		14d Cell I	¥ <u>0</u>	14e. E-Mail Address				
		(b) (6), (l	o) (7)(C)					
14f, Affiliation, if any								
 Representative of the Petitioner who will accept service of a loa. Name 	I papers for purposes of the	representation	proceeding.					
b) (6), (b) (7)(C)	, i <u></u> .	IGD. Inte						
15c. Address (Street and number, city, state, ZIP code)	Take to the second	15d. Tel. N	¥o.	15e Fax No.				
(b) (6), (b) (7)(C)		15f, Cell N		150 C Bioli Address				
		(b) (6), (b) (7)(C)	15g. E-Mail Address				
declare that I have lead the above petition and that the statement	ents are true to the best of n	ny knowledge ar	nd bellef.					
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C	(b) (6), (b) (7)(C)	Title	: : : - :	Date Filed.				
		- AND	NUICHT ALS	05-79.19				
Augustina and the control of the con	PRIVACY ACT STATE		NMENT (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 st seq. This principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or fitigation. 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.

5a. Description of Unit Involved

Included: All full-time and regular part-time Launderers, Stock Room, Soil Room, Distribution, and Clean Room employed at the facility located at 6948 Bandini Blvd, Commerce, CA 90040.

Excluded: All other employees, office clerical employees, professional employees, guards and supervisors as defined in the Act.

02/31/5016 10:13 262--231-4400 LEDEX OLLICE 0283 BYCE 04