UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE						
Case No.		Date Filed				
22-F	RC-25558	2/3/2020				

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): Planned Lifestyle Services, affiliated The Shipyard, 2 12th Street, 1 Independence Court, and 1 14th Street, with and related to Planned Companies Hoboken, NJ 07030 3a, Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): 150 Smith Road Robert Francis, President Parsippany, NJ 07050 3f. E-Mail Address 3c. Tel. No. 3d. Cell No. 3e. Fax No. 973-739-0080 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service 5a. City and State where unit is located: Residential **Building Services** 5b. Description of Unit Involved: 6a. Number of Employees in Unit: Included: All full-time and regular part-time concierges/front desk 21 6b. Do a substantial number (30% or more) Excluded: Supervisors, confidential employees and guards as defined by the act of the employees in the unit wish to be represented by the Petitioner? 🔽 Yes 🔲 No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. 8b. Address: 8a. Name of Recognized or Certified Bargaining Agent (If none, so state) none 8c. Tel. No. 8d. Cell No. 8e. Fax No. 8f. E-Mail Address 8g. Affiliation, if any: 8h. Date of Recognition or Certification | 8l. Expiration Date of Current or Most Recent Contract, If any (Month, Day, Year) If so, approximately how many employees are participating? 9. Is there now a strike or picketing at the Employer's establishment(s) involved? no (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 10c Tel No 10d Cell No 10h Address 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 Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election L 2/18/2020 2 12th Street, Package Room 7:30-8:30am, 3:30-4:30pm, 5:30-7:30 12b. Address (street and number, city, State and ZIP code): 12a. Full Name of Petitioner (including local name and number): 494 Broad Street, 3rd Floor SEIU Local 32BJ Newark, NJ 07102 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Service Employees International Union 12d. Tel. No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 937-827-3225 862-236-3605 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): 25 West 18th Street Brent Garmen, Deputy General Counsel New York, NY 10011 13d. Cell No. 13f. E-Mail Address 13e, Fax No. 13c. Tel. No. 212-388-3943 212-388-2062 917-208-4287 bgarren@seiu32bj.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Date Name (Print) **Brent Garren** Deputy General Counsel 1/31/2020

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

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

DO NOT WRITE IN T	HIS SPACE	
Case No.	Date Filed	
22-RC-255638	FEB 3.	2020

		(ed)		الفراد محادث والمستور	22 110	, 2330	130 1150	5, 202		
INSTRUCTIONS: Unless e-Filed un employer concerned is located. To the employer and all other parties Case Procedures (Form NLRB 48)	he petition must named in the pe	be accompanied tition of: (1) the	d by both a sh petition; (2) S	owing of interest (see tatement of Position 1	6b below) and form (Form NLI	l a certificat RB-505); an	e of service showing so d (3) Description of Rep	ervice on presentation		
PURPOSE OF THIS PETITION: It bargaining by Petitioner and Petit requests that the National Laboratory	ioner desires to be	certified as repr	esentative of th	ne employees. The Peti	itioner alleges	that the foll	owing circumstances e			
2a. Name of Employer: Village Supermarkets, Inc., d/b/a Shoprite of East Orange 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 533 Main Street, East Orange, NJ 07018										
3a. Employer Representative - Nan James Stevens, HR Direct	ne and Title: Or	3b. <i>A</i> 733	Address (if sam 3 Mountair	ne as 2b - state same): n Avenue, Spring	gfield, NJ 0	7081				
3c. Tel. No. 973-467-2200	3d. Cell No.	397	3e. Fax No).	3f. E-Mail A	ddress		1 Variation		
4a. Type of Establishment (Factory, I Supermarket	mine, wholesaler,	etc.)	4b. Princip Food Sa	al Product or Service ales			d State where unit is locarange, NJ	ated:		
5b. Description of Unit Involved: Included: All Full and regular part-t	ime mainten	ance and car	rt personne	el		6a. Numbe	r of Employees in Unit:			
Excluded: See attached.						of the e	ubstantial number (30% of mployees in the unit wis ented by the Petitioner?	h to be		
Check One: X 7a. Request for reconnection on about (Date) 7b. Petitioner is cui	1/31/2020	(If no repl	y received, so			Employer	declined recognition			
8a. Name of Recognized or Certifie None	The same of the sa									
8c. Tel. No.	8d. Cell No.	8d. Cell No. 8e. Fax No.					8f. E-Mail Address			
8g. Affiliation, if any:				n. 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 Employer's e	establishment(s) i	nvolved? No	If so, approxi	angua sena ana ana ana		s are participating? er since (Month, Day, Ye	ar)		
Organizations or individuals othe individuals known to have a representation. N/A					recognition as re	epresentative				
10a. Name	10b.	Address			10c. Tel. No).	10d. Cell No.			
	4				10e. Fax No. 10f. E-Mail Address					
11. Election Details: If the NLRB co				tion with respect to any	such election:	11a. Electio X Manua	74	Manual/Mail		
11b. Election Date(s): 11c. Election Time(s): March 5, 2020 7:00am-8:00am and 4:00pm to 5:00pm						on Location(s				
12a, Full Name of Petitioner (including local name and number): UFCW Local 1262 12b. Address (street and number, city, State and ZIP code): 1389 Broad Street, Clifton, NJ 07013										
12c. Full name of national or internat United Food and Commen			etitioner is an a	affiliate or constituent (if	none, so state)		*****			
12d. Tel. No. 12e. Cell No. 732-496-7232 12f. Fax No. 12g. E-Mail Address dmerritt@ufcwlocal1262.0rg										
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title: Don Merritt, Asst. Field Director 13b. Address (street and number, city, State and ZIP code): 1389 Broad Street, Clifton, NJ 07013										
13c. Tel. No. 973-777-3700	13d. Cell No. 732-496-72		13e. Fax N 973-77	7-3430	13f. E-Mail Address dmerritt@ufcwlocal1262.org					
I declare that I have read the above	e petition and the		are true to the					10-4-		
Name (Print) Don Merritt		Signature	1		Title Asst. Field	Director		Date 2/3/2020		

Cont'd from RC Petition 5b - Description of Unit involved:

1-

Excluded: All Store Managers, supervisors, temporary employees, clerical employees and guards as defined by the Act as well as all other employees.

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UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No. 22-RC-255828	2/6/2020				

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.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) Oldcastle APG 103 Yellow Brook Rd Farmingdale NJ 07731 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Albert Rocco, Transportation Manager Same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 732-919-2022 al.rocco@oldcastle.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Factory & Distribution Facility Concrete Block Newark, NJ 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All full-time and regular pert-time drivers employed by the Employer at its 103 Yellow Brook Rd Farmingdale NJ 6b. Do a substantial number (30% Excluded: All production and maintenance employees, office derical employee, confidential employees, guards and supervisors as defined in the Act. or more) of the employees in the unit wish to be represented by the Petitioner? Yes ✓ No 7a. Request for recognition as Bargaining Representative was made on (Date) none Check One: 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). 8b. Address None 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? , 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) 10b. Address 10c. Tel. No. 10d. Cell No. None 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 11a. Election Type: Manual Mail / Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): February 27, 2020 5:45 to 6:15 A.M. Driver's room, 103 Yellow Brook Rd Farmingdale NJ 07731 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Local 641, International Brotherhood of Teamsters 714 Rahway Ave., Union, NJ 07083 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Teamsters 12d Tel No. 12e. Cell No. 12g. E-Mail Address 908-686-8898 908-964-6970 Jimmy Kilkenny <local641@aol.com> 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Raymond G. Heineman, Esq. 13b. Address (street and number, city, state, and ZIP code) 99 Wood Ave., South, Suite 307, Iselin, NJ, 08830 13c Tel No 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 732-491-2104 732-266-8287 732-491-2120 rheineman@krollfirm.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) Date Raymond G. Heineman Attorney February 6, 2020 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

DO NOT WRITE IN THIS SPACE						
Case No.	Date Filed					
22-RC-256239	FEB 11, 2020					

RC PETITION 22						2-RC-256	5239		FEB	11, 2020	
INSTRUCTIONS: Unless e-Filed u employer concerned is located. 7 the employer and all other parties Case Procedures (Form NLRB 48	The petition m s named in th	nust be acc re petition (ompanied in of; (1) the pe	by both a station; (2) S	nowing of Interest (: Statement of Positio	see 6b on form	below) and n (Form NLF	a certificat RB-505); an	e of service sho d (3) Descriptio	owing son of Rep	ervice on presentation
PURPOSE OF THIS PETITION: bargaining by Petitioner and Petitioner requests that the National Laboratory	tioner desires	to be certiff	ed as repres	entative of the	he employees. The F	Petition	ner alleges t	that the foll	owing circumst	ances e	
2a. Name of Employer: Nissan Parts Distribution Warehouse 2b. Address(es) of Establishment(s) involved 1501 Cottontail Lane, Somerse									State, ZIP code);	
3a. Employer Representative - Nar Richard Dobrzynski, SR I			3b. Add same	200	ne as 2b - state same	ej:					
3c, Tel, No. 732-805-3100	3d. Cell No.			3e. Fax No	0,	7	3f. E-Mail A Richard.		ski@nissar	ı-USA	.com
4a. Type of Establishment (Factory, Parts Warehouse	mine, wholese	aler, etc.)		4b. Princip Nissan	parts	е		Somer:	d State where u	nit is loc	ated:
5b. Description of Unit Involved: Included: Parts Warehouse Pickers				Transconding to the second				6a. Numbe 64	r of Employees	in Unit:	
Excluded: Supervisory and Manager	rial Emplo	yees						of the e	ibstantial number imployees in the inted by the Peti	unit wis	
Check One: 7a. Request for reconnection or about (Date) 7b. Petitioner is cu		5 15	(If no reply r	received, sa	state).	ion unc			leclined recognit		K
8a. Name of Recognized or Certific					ddress:	ion unc	and not		100,000		
8c. Tel. No.	8d. Cell No.	ell No. 8e. Fax No.					8f. E-Mail Address				
8g. Affiliation, if any:				n. Date of Recognition or Certification Bi. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)							
9. Is there now a strike or picketing a	st the Employe	er's establis	hment(s) inv	olved? No	If so, appn	oximat	ely how man	y employee	s are participatin	g?	
(Name of Labor Organization)						named			er since (Month,		STATE OF THE PERSON NAMED IN
Organizations or individuals other individuals known to have a representation.									es and other org	anization	ns and
10a. Name	1	10b. Addres	s	~			10c. Tel. No).	10d. Cell No.		
	}	£1					10e. Fax No	10f. E-Mail Add	-Mail Address		
11. Election Details: If the NLRB co UAW Region 9 be recogn	inducts and el	lection in thi	s matter, sta ining age	nt for the	ilon with respect to a e warehouse p	arts p	h election: pickers		레이크로 - 18 - 18 - 18 - 18 - 18	Mixed	I Manual/Mail
11b. Election Date(s): 11c. Election Time(s): 10:00 AM to 9:00 PM					-		11d. Electio Nissan,				
12a. Full Name of Petitioner (including local name and number): Int'l Union, UAW Region 9 12b. Address (street and number, city, State and ZIP code): 1930 Marlton Pike East, Suite W-109, Cherry Hill, NJ 08003											
12c. Full name of national or internal International United Auto	mobile, A	ganization of erospac	of which Peti e & Agr	tioner is an i icultural	affiliate or constituen Implement W	t (il noi orke	ne, so state). rs of Am	erica, U	ΑŴ		
12d. Tel. No. 215-591-0830 12e. Cell No. 856-220-7521				12f. Fax No. 12g. E-Mail Address pashton@uaw.net			et				
13. Representative of the Petitioner who will accept service of all par 13a. Name and Title: Patrick Ashton, Int'l Representative			13b. Addr	poses of the represess (street and number arlton Pike East	ber, cit	y, State and	ZIP code):	Hill, NJ 0800)3		
13c. Tel. No. 856-220-7521	13d. Cell No 856-220-	-7521		13e. Fax t 215-59	No. 1-0837		13f. E-Maii Address pashton@uaw.net				
I declare that I have read the abov	e petition and		*	are true to t	he best of my know	viedge					Date
Name (Print) Patrick Ashton Signature Cetrif alt					eta		t'l Repres	entative			02/11/20

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
22-RC-256452	2/18/2020				

INSTRUCTIONS: Unless e-Filed using the Agency's website, | www.nirb.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). Suez Water 60 DeVoe Place, Hackensack, NJ 07601 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): 200 Old Hook Road, Harrington Park, NJ 07640 Eva Martinez, Labor Relations Director 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 201681-7675 eva.martinez@suez.com 2017503427 2017677142 5a. City and State where unit is located: 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service Hackensack, NJ 5b. Description of Unit Involved: 6a. Number of Employees in Unit: Included: 5 All full time and regular part time equipment operators. Excluded: 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? All guards, managers and supervisors as defined in the act. 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. Ba. Name of Recognized or Certified Bargaining Agent (If none, so state) 8b Address 8c, Tel, No. 8d. Cell No. 8f. E-Mail Address 8e. Fax No. 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) 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: At Employer Premises X Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): March 12, 2020 To be determined To be determined 12a. Full Name of Petitioner (including local name and number): 12b. Address (street and number, city, State and ZIP code): Utility Workers Union of America, AFL-CIO 42 Ravenwood Blvd, Barnegat, NJ 08005 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Utility Workers Union of America, AFL-CIO 12g. E-Mail Address 12f. Fax No. 12d. Tel. No. 12e. Cell No. 6096070651 6096183176 6096070679 bobhouser@uwua.net 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): 42 Ravenwood Blvd, Barnegat, NJ 08005 Robert A. Houser, Director of Organizing 13d Cell No. 13f. E-Mail Address 13c. Tel. No. 13e, Fax No. 6096070651 6096183176 6096070679 bobhouser@uwua.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 Date Robert A. Houser Director of Organizing 2/11/20

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.

FORM NLRB-502 (RC)					DO NOT WRITE IN THIS SPACE				
(2-18)		RC PETITION				Case No RC	-2568	()	21242020
INSTRUCTIONS: Unless e employer concerned is lo the employer and all other Case Procedures (Form N	cated. The petition r parties named i	in the petition of:	npanied by l	both a s ion: (2)	showing of interest (s Statement of Positio	ee 6b below) . n form (Form	and a certific. NLRB-505): a	ate of service . nd (3) Descrip	egion in which the showing service on
PURPOSE OF THIS PET bargaining by Petitioner a requests that the Nation	ind Petitioner desi	ires to be certified a	as represent	tative of	the employees. The P	etitioner alleg	es that the fo	llowing circun	nstances exist and
2a. Name of Employer: Eurest Compass	1 Johns	son &	Festablishment(s) invo Johnson Plaza vick, NJ 08933-		nd number, Cil	y, State, ZIP co	ode):		
3a. Employer Representative - Name and Title: 3b. A Cary Wang 240			2400 Y	orkm	me as 2b - state same, ont Road C 28217):	200 200		
3c, Tel. No. 704-328-4000	3d, Cell I		36	e, Fax N	o.		il Address Wang@co	mpass-usa	ı.com
4a. Type of Establishment (F Office Building		lesaler, etc.)			pai Product or Service ial Services			nd State where Brunswick	unit is located:
5b. Description of Unit Involved: Included: All full-time and regular part-time janitors and mai				nance	employees		38 75	er of Employee	
Excluded: All other employees.							of the repres	employees in the ented by the Po	nber (30% or more) he unit wish to be etitioner? X Yes No
Check One: 7a. Reques on or about 7b. Petition	(Date) er is currently reco	(If n	no reply recei	ived, so			35 100	declined recog	nition
8a. Name of Recognized or Local 1931	Certified Bargain	ning Agent (If none	e, so state)	8b. Ac 420	ddress: W. Merrick Ro ley Stream, NY	ad		410 (444.1)	e e e e e e e e e e e e e e e e e e e
8c. Tel. No. 516-825-1851	8d. Cell N	lo.	8e	e. Fax N	D	8f, E-Mail Address			- A
8g. Affiliation, if any:			8h. D	ate of R	lecognition or Certifica	or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) CBA Expired			
Is there now a strike or pick (Name of Labor Organization)		oyer's establishme	nt(s) involve	d? No	If so, approx			es are participat er since (Monti	
 Organizations or individua individuals known to have None 	is other than Petit a representative i	ioner and those na nterest in any emp	amed in item ployees in the	s 8 and e unit de	9, which have claimed scribed in item 5b abo	recognition as ove. (If none, so	representativ state)	es and other or	ganizations and
10s, Name		10b Address				10c. Tel.	No.	10d. Cell No.	
						10e. Fax	5955	10f. E-Mail Ad	Idress
11. Election Details: If the NL	.RB conducts and			our posit	ion with respect to any		X Manua	I Mail	Mixed Manual/Mail
11b. Election Date(s): 11c. Election Time(s): 3/9/2020 2pm - 6pm			22 (0)	11d. Election Location(s): Conference Room 1, J & J Pla			Plaza		
12a. Full Name of Petitioner (including local name and number): SEIU 32BJ				12b Address (street and number, city. State and ZIP code): 494 Broad Street, 3rd Fl. Newark, NJ 07102					
2c. Full name of national or in Service Employees Ir	iternational labor of iternational T	organization of whi Union	ich Petitione	r is an a	ffiliate or constituen: (i	f none, so state	e):		*************
12d. Tel. No. 12e. Cell No. 937-827-3225			f. Fax No 52-23 (x No. 12g. E-Mail Address 236-3605					
3. Representative of the Per 3a. Name and Title: Brent Garron Deputy General Counse		accept service of	135	W. 18	oses of the represen ss (street and number 8th Street, 5th Flo rk, NY 10011	, city, State and		HINTEN POR CONTRACTOR	
13c, Tel. No. 212-388-3943 13d, Cell No. 917-208-4287			13e. Fax No. 212-388-2062		13f. E-Mail Address bgarren@seiu32bj.org				

Deputy General Counsel

Date

2/24/2020

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) Brent Garren

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE						
Case No.	22-RD-256109	2/11/2020				

RD PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 7 below) and a certificate of service showing service on the employer and all other parties named in the petition of:(1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RD- DECERTIFICATION (REMOVAL OF REPRESENTATIVE) - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) Legal Services of Northwest Jersey 90 E. Main Street Somerville, NJ 08876 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Michael L. Wojcik, Esq. 90 E. Main Street Somerville, NJ 08876 3c. Tel. No. 3e. Cell No. 3f. E-Mail Address (908) 231-0840 mwojcik@lsnj.org (908) 231-6780 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service Legal Services 5a. Description of Unit Involved 5b. City and State where unit included: is located: Non-attorney support staff. Flemington, Morristown, Somerville, Newton, Excluded: Belvidere, NJ attorneys, managers, human resources personnel, finance department personnel. 6. No. of Employees in Unit 12 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? X Yes No 8a. Name of Recognized or Certified Bargaining Agent 8b. Affiliation, if any National Organization of Legal Services Workers, UAW Local 2320 AFL-CIO 8d Tel No 8e. Cell No. 356 W. 38th St. Suite 705 (212) 228-0992 New York, NY 10018 8f. Fax No. 8g. E-Mail Address (212) 228-0097 psmith@nolsw.org 9. Date of Recognition or Certification 10. Expiration Date of Current or Most Recent Contract, If any (Month, Day, Year) September 20, 2018 No contract 11a. Is there now a strike or picketing at the Employer's establishment(s) involved? Yes No 11b. If so, approximately how many employees are participating? 11c. The Employer has been picketed by or on behalf of (Insert Name) a labor organization, of since (Month, Day, Year) 12. Organizations or individuals other 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. N/A 12e Cell No 12f. E-Mail Address 13. Election Details: If the NLRB conducts an election in this 13a. Election Type: Manual Mail Mixed Manual/Mail matter, state your position with respect to any such election 13b. Election Date(s) 13c. Election Time(s) 13d. Election Location(s) March 2, 2020 N/A Mail-in Election 14. Full Name of Petitioner (b) (6), (b) (7)(C) 14a. Address (Street and number, city, state, ZIP code) 14b, Tel. No. 14c. Fax No. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 14e. E-Mail Address 14f. Affiliation, If any 15. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 15a, Name 15c. Address (Street and number, city, state, ZIP code) 15d. Tel. No. 15e. Fax No. (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 15f. Cell No. 15g. E-Mail Address I declare that I have read the above petition and that the statements are is Sign (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) my knowledge and belief.

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

INE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

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

151 of seq. The principal use of the information is to assist the National Labor Relations Board

2-8-2020

Solicitation of the information on this form is authorized by the (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.