UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
32-RC-247696	09/05/2019				

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) International Paper (Bay Sheets Plant) 6791 Alexander Street. Gilroy, CA 95020 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Kim Carlson, Human Resource Representative same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 408-846-2060 Kimcarlson@ipaper.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Factory Paper Gilroy, CA 5b. Description of Unit Involved 6a. No. of Employees in Unit: 38 Included: See Attachment A 6b. Do a substantial number (30% Excluded: Guards, Office Clerical and Supervisors as defined in the Act. or more) of the employees in the unit wish to be represented by the 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. 7b. 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? 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) none 10b. Address 10c. Tel. No. 10a. Name 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 11a. Election Type: V Manual Mail Mixed Manual/Mail any such election 11d. Election Location(s): 11b Election Date(s): 11c Election Time(s): Wednesday September 25, 2019 2:30 pm-4:00 pm and 10:30 pm- 11:59 pm Conference or Break Room at 6791 Alexander Street, Gilroy CA 95020 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 5150 Kearny Mesa Road San Diego, CA 92111 International Association of Machinists and Aerospace Workers, District Lodge 725 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 12g. E-Mail Address (619) 906-0394 jmauldin@iam725.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding

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

13e. Fax No.

510-337-1023

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

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

13f. E-Mail Address ccohen@unioncounsel.net

nlrbnotices@unioncounsel.net

September 5, 2019

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.

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

Caroline N. Cohen

13c. Tel No. 510-337-1001

13a. Name and Title Caroline N. Cohen, Attorney

13d. Cell No.

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

Attachment A

5b. Description of Unit Involved

Included: All full time and regular part-time CCC Operator/ Lead, Services, Shipping Lead, Clamp 1, Clamp 2, Ducker 1, Ducker 2, Ducker 3, Ducker 4, Rollstock Clerk, Safety Advocate, Strapper, Stacker 1, Stacker 2, MF 1 Operator, MF 2 Operator, DB, Wet End Relief, Dry End Relief, Forklift 1 Driver, Forklift 2 Driver, Forklift 3 Driver employees employed at the International Paper Bay Sheets plant at 6791 Alexander Stree, Gilroy, CA 95020.

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

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

Case No.

DO NOT WRITE IN THIS SPACE

Date Filed 09/06/2019

9-4-19

TION 1001)

32-RD-247755 09/06/2019 **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. 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) 20 quail Run Circle કોંધ 3b. Address (If same as 2b - state same) chief Compliance 20 Rusin ste 3f. E-Mail Address Kelly Dindusholding Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service Cannabis 5b. City and State where unit Included: is located: Salinas, ca Excluded: 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 1 8b. Affiliation, if any 8a. Name of Recognized or Certified Bargaining Agent Commergial Workers 8c. Address N. Main st, Salinas, ca 93906 9. Date of Recognition or Certification 10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) Hpr 1 None 11a. Is there now a strike or picketing at the Employer's establishment(s) involved? oИK 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 12d Fax No None NoNe 12e. Cell No. 12f. E-Mail Addres 13. Election Details: If the NLRB conducts an election in this Mixed M 13a. Election Type: X Manual Mail Mail matter, state your position with respect to any such election 13b. Election Date(s) 13c. Election Time(s) 13d. Election Location(s) 9/24/19 llam luesdau 14. Full Name of Petitioner (b) (6), (b) (7)(C) 14c. Fax No. 14b. Tel. No. 14a. Address (Street and number, city, state, ZIP code) (b) (6), (b) (7)(C) (b) (ぢ), (b) (イ)(じ) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 14f. Affiliation, if any 15. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 15b Title (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) nolividua (b) (6), (b) (7)(C) hat I have read the above petition and that the statements are true to the best of my knowledge and belief Date Filed Title (b) (6), (b) (7)(C)

59. Included All full time and regular part time general labor employes, packaging employees, production employees, dishwashers, maintenance employees invertibry employees, lab extraction, technicians and lab apprentices employed by the Employer at its facility located at 20 quail Run Circle suite C in Salinas, ca

5b. Excluded: Consultant, Company, Owners, management employees truck drivers, sales person, administrative employees working foremen. confidential employees, office clerical employees, guards and supervisors as defined in the art.

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE IN THIS SPACE

Case No. 32-RC-248038

Date Filed 9-11-2019

instructions: Unless e-Filed us in which the employer concerned it of service showing service on the c (Form NLRB-505); and (3) Descript with the NLRB and should not be s 1. PURPOSE OF THIS PETITION RC-CE bargaining by Petitioner and Petitloner de requests that the National Labor Relations	s located. The imployer and ion of Represerved on the RITIFICATION OF ESTIMATION OF ESTIMATION OF THE ION OF T	e petition must all other partie entation Case i employer or an REPRESENTATI ed as representati	be acco s named Procedur y other p IVE - A sub ve of the e	mpanied by I in the petition res (Form NL) party. pstantial number mployees. The	both a showing on of: (1) the peti RB 4812). The si of employees wish to Petitioner alleges the	of interest (se tion; (2) State howing of inter- be represented at the following	e 6b below) and a certificate ement of Position form erest should only be filed for purposes of collective goldcumstances exist and	
2a. Name of Employer KTVU Fox 2		2b. Ac	dress(es) k Londo	of Establishment n Square, Oa	i(s) involved (Street a akland, CA 9460	and number, city,		
3a. Employer Representative – Name and Mellynda Hartel, General Manage			3b. Add	iress (if same as	2b – stale same)			
3c. Tel. No. 510.834.1212	3d. Cell No.		3e. Fax	No.		3f. E-Mail Addi mellynda.ha	ress artel@foxtv.com	
4a. Type of Establishment (Factory, mine, in News Media	rholesaler, etc.)	4b. Principal pro Media	duct or ser	vice		5a. City	and State where unit is located:	
5b. Description of Unit Involved		4	-6-4-				6a, No. of Employees in Unit: 4	
Included: All full time and re Excluded: Standard exclusion		time news	pnoto	grapners		-	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes \(\sqrt{N} \) No	
Check One: 7a. Request for re 7b. Petitioner is c Sa. Name of Recognized or Certified Ban	(Date) urrently recognize	(If no reply receive ad as Bargaining R	d, so state,).	ar certification under the		lined recognition on or about	
None		nono, so statey.	1 0. 5.			0.50.2044	- 14 4 15 -	
Bc. Tel No.	8d Cell No.		8e. Fax	No.		8f, E-Meil Add	reas	
8g. Affiliation, if any 8h			8h. Date o	of Recognition or	r Certification	etification Bi. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)		
Is there now a strike or picketing at the E (Name of labor organization)		, has pici	keled the E	imployer since (i	Month, Day, Year) _			
Organizations or individuals other than known to have a representative interest in a						presentatives and	d other organizations and individuals	
10a. Name	10b, Ad				10c. Tel. No. 323,876,0160		10d, Cell No.	
IATSE Local 60		V. Sunset Blvd			10e. Fax No. 323.875.1162		10f. E-Mail Address	
 Election Details: If the NLRB conducts any such election. 			ur position	with respect to	11a. Election Type		Mail Mixed Manual/Mail	
11b. Election Date(s): September 26, 2019		lection Time(s): n - 11:00 am			11d. Election Loca Back Room	1d. Election Location(s): ack Room		
12a. Full Name of Petitioner (Including Id International Brotherhood of Electrical Wo	rkers Local 45					et and number, (city, state, and ZIP code)	
12c. Full name of national or international la international Brotherhood of Electrical Wo	-	of which Petitioner	r is an affilia	ate or constituen	t (if none, so state)		*	
12d. Tel No. 323.851.5515	12e. Cell No.		12f. Fax	(No.		120 E-Mail Ad eocasio@ibew		
13a. Name and Title Amanda Liv			13b. Ad	dress (street and	entation proceeding d number, city, state, 304, Encino, CA 91436			
13c. Tel No. 818-501-8030 x 326	134. Cell No.	- Carrier Company	13e. Fa 818-501			13f. E-Mail Ad alively@wkcle		
I declare that I have read the above petiti	and that the	statements are to	to the b	est of my know	viedge and belief.			
Amanda Lively	datur			for IBEW Loca		Date September		
WILLFUL FALSE STATEME	NTS-ON THIS P	ERTION-CAN-BE	PUNISHED	D-BY-FINE AND	IMPRISONMEN T (L	I.S. CODE, TITL	E-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.

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

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No. 32-RC-248268	Date Filed 9/13/2019				

INSTRUCTIONS: Unless e-Filed using the Agency's website, warm nituger, 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.

	-,							
PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Laboratory	ioner desires to be	certified as repres proceed under i	entative of the	ne employees. The Peti uthority pursuant to Se	itioner alleges tection 9 of the	hat the followant hat	owing circumstances bor Relations Act.	
2a. Name of Employer:		2b. Ad	dress(es) of	Establishment(s) involv	ed (Street and r	umber, City,	, State, ZIP code):	
Hallcon, Inc.		1675	Pomona	Avenue, San Jo	se, CA 95	110-3513	3	
3a. Employer Representative - Nan	ne and Title:		•	e as 2b - state same):				
Michael Springer, VP and Officer	Chief People	1432	5 West 9	5th Street, Lene	xa, KS 662	215		
3c. Tel. No.	3d. Cell No.		3e. Fax No).	I 3f. E-Mail A	ddress		
(913) 890-6125	(913) 553-19	71			mspring		con.com	
4a. Type of Establishment (Factory, I	, ,		4b. Princip	al Product or Service	18		d State where unit is lo	cated:
Transportation			Transpo	ortation			, California	
5b. Description of Unit Involved:						6a. Numbe	er of Employees in Unit:	
Included:						5		
All full-time and regular p Excluded: Jose facili		cleaners emp	oloyed by	the Employer a	t its San		ubstantial number (30%	
All other employees, Mai					ct.	represe	employees in the unit wi ented by the Petitioner?	v Yes ☐ No
Check One: 7a. Request for reconnection on or about (Date)		(If no reply i	received, so	state).	<u>ponnon</u>	Employer o	declined recognition	
8a. Name of Recognized or Certific				and desires certification	under the Act.			
None	o barganing Age	mt (ii none, so sta	100.70	nuress.				
8c. Tel. No.	8d. Čell No.		8e. Fax No) .	8f. E-Mail A	ddress		
8g. Affiliation, if any:		8	h. Date of R	ecognition or Certification			urrent or Most (Month, Day, Year)	
9. Is there now a strike or picketing a	t the Employer's es	tablishment(s) inv	olved? No	If so, approxir	mately how man	y employees	s are participating?	
(Name of Labor Organization)			111	<u></u>	, has picketed	the Employe	er since (Month, Day, Y	ear)
10. Organizations or individuals othe	r than Petitioner an	d those named in	items 8 and	9. which have claimed i	<u> </u>			
individuals known to have a repre								
10a. Name	10b. A	ddress			10c. Tel. No).	10d. Cell No.	
					10e. Fax No	10e. Fax No. 10f. E-Mail Address		
11. Election Details: If the NLRB co	nducts and election	in this matter, sta	ate your posit	tion with respect to any	such election:		· <u> </u>	
								d Manual/Mail
11b. Election Date(s):	i i	lection Time(s):			ł	n Location(s	•	5110
September 30, 2019		a.m 9:30 a	a.m.	1 40h Address (street	<u> </u>		ve., San Jose, CA	1 3110
12a. Full Name of Petitioner (included Teamsters Local 853	ing local name and	numoer):		12b. Address (street a 7750 Pardee La			•	
12c. Full name of national or internat	•		tioner is an a	affiliate or constituent (if	none, so state):	1		
International Brotherhood		3						
12d. Tel. No. (510) 895-8853	12e. Cell No. (510) 673-44	175	12f. Fax N	o. 95-6853	12g. E-Mail		sters853.org	
13. Representative of the Petitions						, , ,	sic18033.01g	
13a. Name and Title:	who will dooopt	service of all pap	13b. Addre	ess (street and number,	city, State and	ZIP code):		
Sheila K. Sexton, Attorney				th Street, Ste. 200				
13c. Tel. No.	13d. Cell No.	1	13e. Fax N		13f. E-Mail			
(510) 625-9700			, ,	25-8275		<i>a</i>)beeson	tayer.com	
I declare that I have read the above Name (Print)	e petition and that	Signaldije	are true to ti		ige and belief. Title			Date
Sheila K. Sexton			\		Attorney fo	r Petition	ner	09/13/19
		,						-

(FAX) P.002/009

FORM NLRB-502 (RC) UNITED STATES OF AMERICA
(2-18) NATIONAL LABOR RELATIONS BOARD

DO DETITION

DO NOT WRITE IN T	THIS SPACE		
Case No.	Date Flied		
32-RC-248241	9/13/2019		

	RC	PETITION		Ī	32-	RC-24	8241	9/13/2019
INSTRUCTIONS: Unless e-Fill employer concerned is locate the employer end all other pa Case Procedures (Form NLRE	d. The polition must ties named in the pe	be accompanied tition of: (1) the	by both a showing petition; (2) Statem	; of interest (see 6 ant of Position for	b below) a m (Ferm N	nd a certific (LRB-805);	ate of service : and (3) Descrip	shawing #ervice on tion of Representation
PURPOSE OF THIS PETITION bargaining by Petitioner and I requests that the National L	etitioner desires to be	cartified as repre	santative of the emp	doycos. The Petitio	ner allege	s that the f	nuorlo gniwollo	etances exist and
2a. Name of Employer: Valley Pride, Inc.		2b. A 365	ddress(es) of Establi Victor St. Sal	shment(s) involved inas, CA 9390	(Street and)7	i number, C	ity, State, ZIP co	d o):
3s. Employer Representative - Jose Guadalupe Jimene	Name and Title: Z	3b. A Sam	ddre ss (if same a a 2 NC	b - stale seme): -			Y	
3c. Tel. No. 831 633-5883	3d. Cell No. 831 970-331	6	3e. Fax No. 831 633-921	8	Sf. E-Mail	Address		
ta. Type of Establishment (Factor Transportation	y, mine, wholeseler, e	10.)	4b. Principal Prod Ag	uct or Service			and State where LS, CA	unit is located:
ib. Description of Unit Involved ncluded: All truck drivers	-	uc-			-	6a. Numi 13	per of Employee	s in Unit
excluded: any supervisor						of the	amployees in th	cer (30% or more) e unit wish to be titioner? 🔀 Yes 🔲 N
nock One: 7a. Request for on or about (Da	recognition as Sargair a)		ve was made on (Da received, so state).	te) by this pe	tion &	nd Employer	declined recogn	illion
a. Name of Recognized or Cert IONE c. Tel, No.	Bd, Cell No.	ne (ii none, ao an	8e. Fax No.		Of. E-Mail /	Address		
g. Affiliation, if any:			h. Date of Recognit				urrent or Most (Month, Day, Y	9 <i>01</i>)
In there now a strike or picketing (Name of Labor Organization) 1. Organizations or individuals out individuals known to have a rep ONE	ner than Petitioner and	I those named in	Items 6 and 9, which	have dulmed reco	es picketed gnition as r	the Employ	er since (Month	, Day, Year)
a. Name	10b. Ac	idress	4	1	100. Tel. N	ð.	10d. Cell No.	
			5 7	ŀ	10e. Fax N	D .	107. E-Mail Adi	dreas
Election Detella: If the NLRB of soon as posible			le your position with			X Menu	si 🦳 Mali T	Mixed Menual/Mail
b. Election Date(s): Soon as posible B. Full Name of Petitioner (Incl.)	ding local name and r		12b. Ad	III M. dream (street and n	> 4/ <u>2 2</u> umber, dity	State and	ZIP code):	Recuilled
eamsters Union Local 8				Sanborn Ro	- Vav		903	
e: Full name of national or Interna rescencio Diaz	tional labor organizati	on of which Petili	oner is en affiliete or	- The State of the	Table 1			
i. Tel. No. 10424-5743	12n, Cell No. 831 240-5976		121, Fax No. 831 424-2091	ļc		local890	.org	
Representative of the Petition b. Name and Title: escencio Diaz, President	er who will accept se	ervice of all pape	13b. Address (zires 207 N. Sanborr	t and number, city,	State and a	ZIP gode):		
i, Tel. No. 1 424-5743	13d. Cell No. 83 I 240-5976		13a. Fax No. 831 424-2091	C		Address local890	org	
clare that I have read the abov ne (Pdnt)		io statements ar Ilgnature	true to the best o	Title	ident			Date 09/12/19

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

Case No. Do NOT WRITE IN THIS SPACE
Date Filed
32-RC-248280
9-16-2019

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) National Express Transit - Maxx 1001 N. 9th Street, Suite A. Modesto, CA 95354 3a. Employer Representative Name and Title 3b. Address (If same as 2b - state same) Janice Curre, General Manager Same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. F-Mail Address (209) 521-1274 x. 100 (209) 522-5659 Janice.curre@nationalexpresstransit.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Transportation Modesto, California Transportation 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All dispatchers and customer service representatives 6b. Do a substantial number (30% or more) of the employees in the Excluded: All other employees, guards and supervisors unit wish to be represented by the Petitioner? Yes No 7a. Request for recognition as Bargaining Representative was made on (Date) 9/16/2019 and Employer declined recognition on or about Check One: (Date) (If no reply received, so state) by this Petition 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 None 8c Tel No. 8d Cell No. 8f. F-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? ____No___If so, approximately how many employees are participaling? , 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) 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 an election in this matter, state your position with respect to 11a. Election Type:

Manual Mail Mixed Manual/Mail any such election. 11d. Election Location(s): 11c. Election Time(s): 11b. Election Date(s): September 27, 2019 TBD Breakroom 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Teamsters Local 386 1225 13th Street, Modesto, CA 95354 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 12f. Fax No. (209) 526 2755,Ext. #17 (209) 526 9485 (209) 872 8527 michelle@teamsters386.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding 13b. Address (street and number, city, state, and ZIP code) Eric J. Wiesner, Attorney Weinberg, Roger & Rosenfeld, 1001 Marina VIIIage Parkway, Suite 200, Alameda, CA 94501 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address (510) 337 1001 (510) 337-1023 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Signature Title Name (Print) 6 Eric J. Wiesner Attorney

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

PRIVACY ACT STATEMENT

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

DO NOT WRITE IN THIS SPACE						
Case No. 32-RC-248601	9-20-2019					

RC PE	TITION			32	2-RC-248601		9-20-2019
INSTRUCTIONS: Unless e-Filed us	sing the Agenc	y's website, w	ww.nlrb	.gov, submit a	n original of this	Petition to ar	n NLRB office in the Region
in which the employer concerned							
of service showing service on the							
(Form NLRB-505); and (3) Descrip							
with the NLRB and should not be					,	3	,
1. PURPOSE OF THIS PETITION: RC-CE					of employees wish to	be represented	for purposes of collective
bargaining by Petitioner and Petitioner	desires to be certifi	ied as representati	ve of the	employees. The	Petitioner alleges th	at the following	circumstances exist and
requests that the National Labor Rela 2a. Name of Employer	itions Board proc	eed under its pro	dress(es	ority pursuant to	t(s) involved (Street a	nd number city	State ZIP code)
Lexus of Stevens Creek					Coleman Ave. S		
3a. Employer Representative – Name an	d Title				s 2b – state same)		
Jared Miller, General Manager					Blvd, San Jose	, CA 95117	
3c. Tel. No.	3d. Cell No.		3e. Fa	x No.		3f. E-Mail Addr	ess
(408) 553-4500						Jared.Miller	@lexusofstevenscreek.com
4a. Type of Establishment (Factory, mine,	wholesaler, etc.)	4b. Principal pro	duct or s	ervice		5a. City a	and State where unit is located:
Auto dealership	,			f automobiles			Clara, CA
5b. Description of Unit Involved							6a. No. of Employees in Unit:
Included: All full-time and regular	r part-time Ret	ail Parts Spec	ialists,	Back Counter	Specialists, Who	olesale	8
Parts Specialists, Shipp							6b. Do a substantial number (30%
Excluded: All others.	mig and recor	ring, and ran				- 1	or more) of the employees in the unit wish to be represented by the
All others.						- 1	Petitioner? Yes V No
Check One: 7a. Request for r	recognition as Barro	naining Representa	ative was	made on (Date) F	Ry Potition and	d Employer decli	ned recognition on or about
ra. Request for t		(If no reply receive			by remon	a Employer deci	nica recognition on or about
7b. Petitioner is o					certification under the	Act.	
8a. Name of Recognized or Certified Ba			ор. осо	8b. Address			
none							
8c. Tel No.	8d Cell No.		8e. Fa	x No.		8f. E-Mail Addr	ess
					2 15 11		
8g. Affiliation, if any			8h. Date	of Recognition or	r Certification		ate of Current or Most Recent (Month, Day, Year)
		1				Contract, if diffy	(Month, Day, Year)
9. Is there now a strike or picketing at the B	Employer's establis	shment(s) involved	? No	If so, approx	timately how many en	plovees are par	ticipating?
						,,,	
					Month, Day, Year)		
 Organizations or individuals other than known to have a representative interest in 						resentatives and	other organizations and individuals
none	any employees in	the unit described	iii iteiii 5	above. (ii none,	30 State)		
10a. Name	10b. Add	dress			10c. Tel. No.		10d. Cell No.
					10e. Fax No.		10f. E-Mail Address
 Election Details: If the NLRB conduct any such election. 	ts an election in this	s matter, state you	ir positior	with respect to	11a. Election Type:	✓ Manual	Mail Mixed Manual/Mail
11b. Election Date(s):	11c. El-	ection Time(s):			11d. Election Locat	ion(s):	
Wednesday October 9, 2019		.m. to 1:00 p.m.			Employee Break R	ooms at each l	ocation
12a. Full Name of Petitioner (including I	ocal name and nu	ımber)					ity, state, and ZIP code)
Machinists Automotive Trades Local 110						ad, Suite 105, S	San Jose, CA 95125
12c. Full name of national or international I			is an affi	liate or constituen	t (if none, so state)		
International Association of Machinists a		orkers, AFL-CIO	1 406 5	w Na		10a E Mail Ad	deas
12d. Tel No. 408-440-8716	12e. Cell No.		12f. Fa	ax No.		12g. E-Mail Ad	101@sbcglobal.net
13. Representative of the Petitioner who	will accept servi	ce of all papers for	or purpo	ses of the repres			io i @ ocogiocaiot
					d number, city, state,		
13a. Name and Title Caren P. Se	encer, Atto	orney			eld 1001 Marina Village P		Alameda, CA 94501
13c. Tel No.	13d. Cell No.		13e. F				dress csencer@unioncounsel.net
510-337-1001				7-1023			nioncounsel.net
I declare that I have read the above petit	tion and that the s	statements are tr	ue to the	best of my know	vledge and belief.		
Name (Print) S	ignature		Title			Date	
Caren P. Sencer	111		Attorne	ey		September	19, 2019

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

PRIVACY ACT STATEMENT

PRIVACY ACT STATEMENT

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



DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
32-RC-248749	09/23/2019				

September 23, 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) Safeway, Inc. d/b/a Safeway.com and/or Grocery Works See Attachment A 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Frank Jorgensen, HR Labor Relations 5918 Stoneridge Mall Road, Pleasanton, CA 94588 3f. E-Mail Address 3c. Tel. No. 3d. Cell No. (425) 455-6332 (623) 336-6656 fjorgensen@safeway.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Retail Groceries Groceries See Attachment A 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All drivers employed by Safeway, Inc., d/b/a Safeway.com and/or Grocery Workers in 160 6b. Do a substantial number (30% Administrative Regions 2, 3, 4 and 5 or more) of the employees in the Excluded: All other employees, including supervisors, guards and office clericals unit wish to be represented by the Petitioner? Yes V No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 09/23/19 and Employer declined recognition on or about _(Date) (If no reply received, so state). by this Petition 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 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? _______ 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 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): October 7, 2019 6:00 a.m.-12:00 p.m. Breakrooms, see Attachment A 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) See Attachment A See Attachment A 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Food & Commercial Workers Union, AFL-CIO, CLC 12f. Fax No. 12g. E-Mail Address (510) 599-0488 (925) 269-2419 jaraby@ufcw5.org 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) David A. Rosenfeld, Attorney Weinberg, Roger & Rosenfeld, 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address (510) 337-1001 (510) 337-1023 drosenfeld@unioncounsel.net, nlrbnotices@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

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

Attorney

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.



David A. Rosenfeld

ATTACHMENT A

Box2b.

Safeway # 3132 5100 Broadway Oakland, CA 94611

Safeway # 3031 85 Westlake Center Daly City, CA 94015

Safeway # 1883 103 American Canyon Road American Canyon, CA 94503

Safeway # 1483 1530 Hamilton Avenue San Jose, CA 95125

Safeway # 2621 3110 Balfour Road Brentwood, CA 94513

Box 5a:

Safeway # 3132 5100 Broadway Oakland, CA 94611

Safeway # 3031 85 Westlake Center Daly City, CA 94015

Safeway # 1883 103 American Canyon Road American Canyon, CA 94503

Safeway # 1483 1530 Hamilton Avenue San Jose, CA 95125

Safeway # 2621 3110 Balfour Road Brentwood, CA 94513 Box 11d:

Breakroom in:

Safeway # 3132 5100 Broadway Oakland, CA 94611

Safeway #3031 85 Westlake Center Daly City, CA 94015

Safeway # 1883 103 American Canyon Road American Canyon, CA 94503

Safeway # 1483 1530 Hamilton Avenue San Jose, CA 95125

Safeway # 2621 3110 Balfour Road Brentwood, CA 94513

Boxes 12a-b: United Food & Commercial Workers Union, Local 5 28870 Mission Boulevard

Hayward, CA 94544

United Food & Commercial Workers Union, Local 648

1980 Mission Street San Francisco, CA 94103

DO NOT WRITE IN THIS SPACE					
Case No.	32-RC-248749	Date Filed 09/24/2019			

September 24, 2019

FIRST AMENDED R C PETITION 32-RC-248749 09/24/2019 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

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) Safeway, Inc. d/b/a Safeway.com and/or Grocery Works See Attachment A 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Frank Jorgensen, HR LAbor Relations 5918 Stoneridge Mall Road, Pleasanton, CA 94588 3c. Tel. No. 3d. Cell No. 3f. E-Mail Address (425) 455-8332 (623) 336-6656 frank.jorgensen@safeway.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Retail Groceries Groceries See Attachment A 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All drivers employed by Safeway, Inc., d/b/a Safeway.com and/or Grocery Workers in 160 6b. Do a substantial number (30% Administrative Regions 2, 3, 4 and 5 or more) of the employees in the All other employees, including supervisors, guards and office clericals unit wish to be represented by the Petitioner? Yes V No 7a. Request for recognition as Bargaining Representative was made on (Date) 09/23/19 and Employer declined recognition on or about Check One: (Date) (If no reply received, so state). by this Petition 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 None 8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8q. 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 an election in this matter, state your position with respect to 11a. Election Type: V Manual Mixed Manual/Mail Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): October 7, 2019 6:00 a.m.-12:00 p.m. Breakrooms, see Attachment A 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) United Food & Commercial Workers Union, Local 5 28870 Mission Boulevard, Hayward, CA 94544 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Food & Commercial Workers Union, AFL-CIO, CLC 12f. Fax No. 12d. Tel No. 12q. E-Mail Address (925) 269-2419 (510) 599-0488 jaraby@ufcw5.org 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) David A. Rosenfeld, Attorney Weinberg, Roger & Rosenfeld, 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501 13d. Cell No. 13e. Fax No. 13f. E-Mail Address (510) 337-1001 (510) 337-1023 drosenfeld@unioncounsel.net, nirbnotices@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) Title Date

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

Attorney

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.

David A. Rosenfeld

ATTACHMENT A

Box2b.

Safeway # 3132 5100 Broadway Oakland, CA 94611

Safeway # 3031 85 Westlake Center Daly City, CA 94015

Safeway # 1883 103 American Canyon Road American Canyon, CA 94503

Safeway # 1483 1530 Hamilton Avenue San Jose, CA 95125

Safeway # 2621 3110 Balfour Road Brentwood, CA 94513

Box 5a:

Safeway # 3132 5100 Broadway Oakland, CA 94611

Safeway # 3031 85 Westlake Center Daly City, CA 94015

Safeway # 1883 103 American Canyon Road American Canyon, CA 94503

Safeway # 1483 1530 Hamilton Avenue San Jose, CA 95125

Safeway # 2621 3110 Balfour Road Brentwood, CA 94513

Box 11d: Breakroom in:

Safeway # 3132 5100 Broadway Oakland, CA 94611

Safeway # 3031 85 Westlake Center Daly City, CA 94015

Safeway # 1883 103 American Canyon Road American Canyon, CA 94503

Safeway # 1483 1530 Hamilton Avenue San Jose, CA 95125

Safeway # 2621 3110 Balfour Road Brentwood, CA 94513

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

DO NOT WRITE IN THIS SPACE

Case No. Date Filed

32-RC-248845 09/25/2019

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. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2a. Name of Employer The Guild San Jose 2943 Daylight Way, San Jose, CA 95111 3b. Address (If same as 2b - state same 3a. Employer Representative - Name and Title Stephen Yurek same 3c. Tel. No. 3f. E-Mail Address 3d. Cell No. 3e. Fax No. (602) 478-2510 Stephen@receivershipspecialists.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Manufacturing of Cannabis Products Cannabis Products San Jose, CA 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All regular full-time and part-time employees in the classifications or jobs of Budtender and 20 6b. Do a substantial number (30% Assistant Managers. or more) of the employees in the Excluded: Guards, Processing employees, Supervisors, Financial Manager, Marketing/Buyer, Inventory Manager, Reception/ID unit wish to be represented by the Petitioner? Yes V No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 09/25/2019 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 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) (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. 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: V Manual Mail Mixed Manual/Mail any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): , 2019 TBA Breakroom, 2943 Daylight Way, San Jose, CA 95111 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) United Food & Commercial Workers Union, Local 5 28870 Mission Boulevard, Hayward, CA 94544 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Food & Commercial Workers Union, AFL-CIO, CLC 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address (925) 269-2419 (510) 599-0488 jaraby@ufcw.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding 13a. Name and Title Alan G. Crowley, Attorney for Union 13b. Address (street and number, city, state, and ZIP code) Weinberg, Roger & Rosenfeld, 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501 13c. Tel No 13d. Cell No. 13e Fax No. 13f. E-Mail Address (510) 337-1001 (510) 337-1023 acrowley@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) Title Date Signature Attorney for Union Alan G. Crowley September 25, 2019

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

PRIVACY ACT STATEMENT

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

DO NOT WRITE IN THIS SPACE				
Case No.	Date Filed			
32-RC-248845	09/26/2019			

FIRST AMENDED 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) The Guild San Jose 2943 Daylight Way, San Jose, CA 95111 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Stephen Yurek same 3c. Tel. No. 3e. Fax No. 3f. E-Mail Address 3d. Cell No. (602) 478-2510 Stephen@receivershipspecialists.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Manufacturing of Agricultural Products Cannabis Products San Jose, CA 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All regular full-time and part-time employees in the classifications or jobs of Budtender/Counter-Sales, Lead Budtender/ 20 Assistant-Manager, Lead Budtender/Floor-Manager, Reception/ID-Checker, Processing Employees/Cultivation 6b. Do a substantial number (30% or more) of the employees in the Excluded: Guards, Supervisors, Financial Manager, Marketing/Buyer, Inventory Manager unit wish to be represented by the Petitioner? Yes ✓ No 7a. Request for recognition as Bargaining Representative was made on (Date) 09/25/2019 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 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? (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 10b. Address 10c. Tel. No. 10a. Name 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 11a. Election Type: ✓ Manual Mail Mixed Manual/Mail any such election. 11c. Election Time(s): 11d. Election Location(s): 11b. Election Date(s): October 11, 2019 Approximately 2:00 p.m. Breakroom, 2943 Daylight Way, San Jose, CA 95111 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) United Food & Commercial Workers Union, Local 5 28870 Mission Boulevard, Hayward, CA 94544 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Food & Commercial Workers Union, AFL-CIO, CLC 12d. Tel No. 12f. Fax No. 12g. E-Mail Address 12e. Cell No. (925) 269-2419 (510) 599-0488 jaraby@ufcw.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Alan G. Crowley, Attorney for Union 13b. Address (street and number, city, state, and ZIP code) Weinberg, Roger & Rosenfeld, 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501 13c. Tel No 13d. Cell No. 13e. Fax No. 13f. E-Mail Address (510) 337-1001 (510) 337-1023 acrowley@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) Title Date Signature Alan G. Crowley Attorney for Union September 26, 2019

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.