NATIONAL LABOR RELATIONS BOARD Case No. Date No. <thdate no.<="" th=""> Date No. <thd< th=""><th>UNITED STATE</th><th colspan="4">DO NOT WRITE IN THIS SPACE</th></thd<></thdate>	UNITED STATE	DO NOT WRITE IN THIS SPACE						
INSTRUCTIONS: Unless e-Field using the Agency's website, www.ntht.gov, submit an original of this Petition to an NLRB office in the Region to which the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Porm NLRP-505); and (3) Description of Representation Case Proceedings (Form NLRB 4812). The showing of interest should only be lifed with the NLRB and should ang Description of Representation Case Proceedings (Form NLRB 4812). The showing of interest should only be lifed with the NLRB and should ang Desvered on the employer or any other party: Interest should and the employer or any other party. The showing of interest should have be represented the petition of: (1) the petition; (2) Statement of Position form (Porm NLRB 505); and (3) Description of Representation and other party. Interest should all body and position of Representation of the employee. The Petitioner allegas that the should Labor Relation Relatin Relation Relation Relation Relation Rela			D			-255788		
In which the employer concerned is located. The petition must be accompanied by both a showing of linterest (see bb below) and a certificate of service showing service on the employer and all other parties named in the petitions of (1) beschinct (2) Statement of Position form (For MLRB 4512). The showing of Interest should only be filed with the LLBs and should got beschowing service on the employers and the petitions of (1) beschinct (2) Statement of Position form (2) beschinct (2) Statement of Position form (2) beschinct (2) Statement of Position Filed (2) beschinct (2) Statement of Position Filed (2) beschinct (2) beschi			's website w	ww.nlrh.a	ov submit	an original of this	Petition to a	an NI RB office in the Region
of service showing service on the employer and all other parties named in the petition of (1) the petition; (2) Estimated to Position form (LRS 45); and (3) Description of Representation Case Proceedures (Form NLRS 45); and (3) Description of Representation Case Proceedures (Form NLRS 45); and (3) Description of Representation case is the employer or any other party. PURPOSE OF THE PETITION, FIC CENTRCATTOR OF REPRESENTATION TO It is excluded and the representation of the employees. The Petitioner and Petitoner devices to be certified as representative of the employees. The Petitioner and Petitoner devices to be certified as representative of the employees. The Petitioner and Petitoner devices to be certified as representative of the employees. The Petitioner and Petitoner devices to be certified as representative of the employee. The Petitioner and Petitoner devices to be certified as representative of the employees. The Petitioner and Petitoner devices to be certified as representative of the employee. The Petitioner and Petitoner devices to active the employee of the employee and an under devices the second of the employee. The Petitioner and Petitoner devices the second of the employee of t								
(Form NLR6-505); and (3) Description of Representation Case Procedures (Form NLR6 442). The showing of Interest should only be filed with the NLR6 and should pay be served on the employer are your other party. 1: PURPOSE OF THIS FETTION: RC-CERTIFICATION OF REPRESENTATION: - A substantial number of employees with be temployer and the following classes that the following classes has exclused in the employee are provided as the presentative of the employees. The Automation and Public Constantial as the following classes has exclused in the employee and the employee are provided as the presentative of the employee and the employee are provided as the following classes has exclused in the following classes have been different of the following classes have been different or constitute was hade on (Class Machines and the following classes have been different or the following classes have different ore classes classes classes classes classes and the cla								
with the NLRB and should not be served on the employer or any other party. PURPROE OF CENTREFATION CENTREFATION CENTRE A subtained number of employees with to be represented for purposes of collective braginations by Petitioner allesion Bade proceed under its progrese attending version of Exabilitations Act. PURPROE OF CENTREFATION OF REPRESENTATIVE - A subtained number of employees with to be represented for purposes of collective arguments that its National Labor Relations Bade proceed under its progrese attending version of Exabilitations (AC States 24, AC								
1. PURPOSE OF THIS FETTOD: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees with to be employee study to following any entropy of the registrom and the following of collective and number of memployees with to be employee. The retitioner all subor Retaining a negresentative of the registrom Act. North American Security please sets and the National Labor Retaining Board proceed under its indeer authority pursuant to Security proves and number, disc, 2000 North American Security North American Security please sets altached So. Galaxies (If anno as 2 - state same) 34. Employer Representative - Name and Title So. Galaxies (If anno as 2 - state same) So. Control Namer and Name Act State Stat						no to rej. me s	nowing of in	terest should only be med
Burgaustis bit Patitioner delises to be certified as myssentialitie of the employees. The Patitioner alleges that the following circumstances axist and requests that the National Labor Relations Actor Relations Actoreres Acto Relations Relations Actor Relations Actor Relations A	1. PURPOSE OF THIS PETITION: RC-CE	RTIFICATION OF R	REPRESENTATI	IVE - A subs	stantial number	of employees wish t	be represente	d for purposes of collective
2a. Name of Employer 2b. Address(a) of Establishmet(a) involved (Street and number, city, State, ZiP code) 3b. Employer Representative – Name and Tile 3b. Address(a) of Establishmet(b) involved (Street and number, city, State, ZiP code) 3b. Employer Representative – Name and Tile 3b. Address(a) of Establishmet(b) involved (Street and number, city, State, ZiP code) 3b. Ent Ion 3d. Cell No. 3e. Fra No. al.Ope22[Dmsecurity(inc.com) 3c. Tel No. 3d. Cell No. 3e. Fra No. al.Ope22[Dmsecurity(inc.com) 4c. Type of Establishmet(Factory, mine, wholesaler, etc.) Bb. Pricipal product or service Security Establishmet(Street, Case) Ba. No Employee in Unit. Federal Buildings Ta. Request for recognition as Bangaking Representative was made on (Date) NA and Employeer Representation under the Act. 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). Bb. Date of Tell No. Site F-Mail Address 96. Trat No. 8d Cell No. 8d Cell No. Site F-Mail Address 96. Trat No. 8d Cell No. 8d Cell No. Site F-Mail Address 96. Trat No. 8d Cell No. 8d Cell No. Site F-Mail Address 96. Trat No. NA NA NA Na	bargaining by Petitioner and Petitioner d	lesires to be certified	as representativ	ve of the em	ployees. The	Petitioner alleges th	hat the followin	g circumstances exist and
North American Security please see attached 36. Employer Representative – Name and Title 30. Address of terms et 20 – state same) Sc Tal. No. 38. Employer Representative – Name and Title 550 Carson Plaza Dr. #222 Carson, CA 90746 3c. Tal. No. 38. Employer Representative – Name and Title 36. Citle and State where unit is located: Scale State		tions Board procee						
a. Employer Representative – Name and Tile 3b. Address (if tames as 2bstate same) Status Status 32.3 Address (if tames as 2bstate same) 32.4 Tatus 32.3 Address (if tames as 2bstate same) 32.3 Address (if tames as 2bstate) Ab. Type of Establishment (Factory, mine, wholeseler, str.) 4b. Principal product or service Sc. City and State where unit is located. Ba. Decerption of Unit Involved Included: Included: Call (Julitime and part time armed and unarmed security officers employed by the employer defined to the tame of the bar entresemed by the pationer. Yes Excluded: Ta. Request for recorption as Bragaling Representative was made on (Date) NA and Employer decined recognition on a abut Check One: Ta. Request for recorpting as Bragaling Agent (if none, so state). B. Address B. Tal No. Bd Call No. Bd Explain(Date) State where and the bar of						it(s) involved (Street	and number, city	, State, ZIP code)
Art Loppiz S50 Carson Plaza Dr. #222 Carson. CA 90746 32: Tel No. 36 Fa No. 37 Bank 3.0paz/@nasecurityInc.com 4a. Type of Edablishment (Pactoy, mine, wholeseler, etc.) 4b. Principal product or service 5a. Git y and State where unit is localed. Federal Buildings Lass Vegas Nevrada 5a. Git y and State where unit is localed. Bb. Description of Unit Involved Security Lass Vegas Nevrada Included:: Influence Security officers employed by the employed 67 Excluded: Celect One: 7a. Request for necopition as Bargalning Representative was made on (Date) NA and Employer decline recognition or or about 70 Pathone of Certified Bargaining Agent (if none, so state). NA Be. Far No. 950 Ferson 950 Ferson SFFPA Bb. Address Bb. Address Security received, so state). NA Secure of the cognition or a bout SFFPA Bb. Address Secure of the cognition or a state) Secure of the cognition or a state. Secure of the cognition or a state. SFFPA Bb. Address Secure of the cognition or a bout Machine. Secure of the cognition or a state. Secure of the cognition or a bout Machine. Secure of the cognition or a bout Machine. Sector rate or		d Title	pieas			(ama)		
3c. Tel No. 3d. Cell No. 3e. Fax No. 3d. E-Mail Address 323-83-634-1011 NA 3d. Par No. 3d. E-Mail Address 323-83-634-1011 NA 3d. Par No. 3d. E-Mail Address 323-83-634-1011 NA 3d. Cell No. 3d. Fax No. 3d. E-Mail Address Bit. Decentifion of Unit Involved Included:							CA 90746	
323-834-1011 NA NA a. lopez@nasecurityinc.com 4a. Type of Edablishment (Packoy, mine, wholeseler, etc.) 4b. Principal product or service 5a. City and State where unit is hocaled: Federal Buildings Security Las Vegas Newada 6a. No. of Employees in Unit. Bb. Description of Unit Involved Included: all fullitime and part time armed and unarmed security officers employed by the employees in the unit whit ho be represented by the Patience Y res []] ho. 6a. No. of Employees in Unit. Check One: 7a. Request for necognition as Bargahing Representative was made on (Date) NA and Employee declined recognition or a bout. Check One: 7a. Request for necognition as Bargahing Representative was made on (Date) NA and Employee declined recognition or a bout. SPFPA Data (Date) (fino re, so state) NA 8b. Test No. Sol Call No. 8b. Call No. Sol Call No. SPFPA Bb. Deter Recognition or Cartified Bargaining Agreesentative and desires certification under the Act. 8b. Trai No. Sol Call No. 8b. Call No. Sol Call No. 8p. Affiliation, if any SPFPPA Bb. Deter Areaganition or Cartification Date of Current or Nost Recent. NA Bb. Call No. NA Sol Call No. NA Bb. Deter Areaganition or Cartification Date of		3d Cell No				DI. HELL OUISOI		Iness
Tay Type of Establishment (factory, mine, wholesaler, etc.) 4b. Principal product or service Security 5a. Generation of Unit Involved Las Vegas Nervada Bb. Description of Unit Involved Included: all fullitime and part time armed and unarmed security officers employed by the employer Cerical, managerial, salaried, and supervisory personel as defined by the act Image: Cerical, managerial, salaried, and supervisory personel as defined by the act Check One: Ta. Request for recognition as Bargabing Representative was made on Clarb) MA and Employer declined recognition or about and Employer declined recognition or about Check One: Ta. Request for recognition as Bargabing Representative was made on Clarb) MA and Employer declined recognition or about and Employer declined recognition or about Check One: Ta. Petitioner is currently recognited as Bargabing Representative was made on Clarb) MA and Employer declined recognition or about State When auto the second the seco								337 - 524
Feddraft Buildings Security Las Vogas Nevada Sb. Description of Unit Involved Included: all fullitime and part time armed and unarmed security officers employed by the employer clerical, managerial, salaried, and supervisory personel as defined by the act Image: Clerical in the involved into the increasent by the act Check One: Ta. Request for recognition as Bargaling Representative and desires certification under the Act. Ba. Name of Recognized or Certified Barganing Agent (if none, so state). NA She Tr2 200 80 Cell No. 80. Address optigatroe@jota.org softpare@@jota.org She Tr2 200 80 Cell No. 80. Address optigatroe@jota.org 80. Address optigatroe@jota.org She Tr2 200 80 Cell No. 80. Address optigatroe@jota.org 80. Address optigatroe@jota.org She Tr2 200 80 Cell No. 80. Address optigatroe@jota.org 80. Address optigatroe@jota.org She Tr2 200 80 Cell No. 80. Address NA 80. Address optigatro@jota.org 80. Address optigatro@jota.org She Tr2 200 80 Cell No. 80. Address NA 80. Address NA 80. Address NA 80. Address NA <td>4a. Type of Establishment (Factory, mine,</td> <td>wholesaler, etc.)</td> <td colspan="5">4b. Principal product or service 5a. City</td> <td></td>	4a. Type of Establishment (Factory, mine,	wholesaler, etc.)	4b. Principal product or service 5a. City					
Included: all fullitime and part time armed and unarmed security officers employed by the employer is constrained by the armore and the security officers employed by the employer is constrained by the armore and the security officers of an armore and another and the security officers of an	Federal Buildings	S	Security				Las Ve	gas Nevada
	5b. Description of Unit Involved						-	6a. No. of Employees in Unit:
Excluded: clerical, managerial, salaried, and supervisory personel as defined by the act be. Do a substantial number (20% or more) of the angleyees in the unit with to be received by the part with the received by the part with thereceived by the part with with the received b	Included: all fulltime and part ti	me armed and	d unarmed s	security	officers en	noloved by the	employer	
Excluded. clerical, managerial, salaried, and supervisory personel as defined by the act unit with to be represented by the petitioner? View of No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) NA and Employer declined recognition on or about MA (Date) (If no rely) received, so state). NA Specification is ourseling Agent (If none, so state). 8b. Address SpFPA 8b. Address 8c. Trai No. 8d Cell No. 8d. Attrained or Recognized or Certified Bargaining Representative and desires certification under the Act. 8d. Attrained Recognized or Certified Bargaining Representative and desires certification under the Act. 8d. Attrained Recognized or Certified Bargaining Representative and desires certification under the Act. 8d. Attrained Recognized or Certified Bargaining Representative and desires certification under the Act. 8d. Attrained Recognized or Certified Bargaining Representative and state certification under the Act. 8d. Attrained Recognized or Certified Bargaining Representative and state certification under the Act. 8d. Attrained Recognized or Certified Bargaining Representative and those marked in terms and state certification under the Act. 9d. Attrained Recognized or Certified Bargaining Representative in any omployees ince (Month, Day, Year) NA NA 10. Organizations								
Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) Mathematic Ma	Excluded:	a coloriad a	nd supon	deen (n	oroonolo	a defined by	the est	
MA	ciencal, managena	al, salaneu, a	and superv	nsory p	ersoner a	is defined by	the act	
Image: Second	Check One: 7a. Request for re	ecognition as Bargain	ning Representa	itive was ma	ade on (Date)	VA ar	d Employer dec	lined recognition on or about
8a. Name of Recognized or Certified Bargaining Agent (<i>if none</i> , so state). 8b. Address SPFPA 8d Cel No. 8d Cel No. 8g. Affiliation, if any 8d Cel No. 8d Cel No. Spectral 8b. Date of Recognized or Certification 8f. E-Mail Address Spectral 8b. Date of Recognized or Certification 8f. E-Mail Address Spectral 8b. Date of Recognized or Certification 8f. E-Mail Address Spectral 8b. Date of Recognized or Certification 8f. E-Mail Address Spectral 8b. Date of Recognized or Certification 8f. E-Mail Address Spectral 8b. Date of Recognized or Certification 8f. E-Mail Address Spectral 8b. Date of Recognized or Certification 8f. E-Mail Address NA 18 . Spectral 8f. Selficiton Date of Current or Most Recent Contract, if any (Month, Day, Yeer) Mare of labor organization? NA 18 . Spectral NA 10 Organizations or individuals other than Petitioner and those name and in items 8 and 9, which have claimed recognized and recognized and ther organizations and individuals NA 10 a. Name 10b. Address 10c. Tel No. NA 110. Election Date(s): 116. Election Time(s): NA NA	NA	(Date) (/f	no reply received	d, so state).	NA			
SPFPA 25510 Kelley Rd. Roseville, MI 48066 Bc. Tai No. 6d Cell No. NA Be Faxi No. Seb-772-7250 NA By Affliation, if any Br. Date of Recognition or Certification SPFPA NA SPFPA NA By Affliation, if any Br. Date of Recognition or Certification NA NA SPFPA NA Is there now a strike or picketing at the Employer's establishment(s) involved? NA (Name of labor organization) NA 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representative interest in any employees in the unit described in item 5b above. (# none, so state) NA 100. Crel No. NA 100. Address NA 100. Address NA 1010. Cell No. NA 1010. Cell No. 111. Election Datalis: If the NLRB conducts an election in this matter, state your position with respect to any such election. NA 112. Election Date(s). 111. Election Time(s): 111. Election Location(s): 123. Full Name of Petitioner (including local name and number) 120. Address (street and number, city, state, and ZIP code)					and the second	certification under the	e Act.	
566-772-7250 NA 596-772-9644 splapres@spla.org 8g. Affiliation, if any Bi. Date of Recognition or Certification Bi. Explantion Date of Current or Most Recent Contract, if any (Month, Day, Year) SPFPA It so approximately how many employees are participating? NA 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 how many employees are participating? NA 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. Teil. No. 10d. Cell No. NA 10b. Address 10c. Teil. No. 10d. Cell No. NA NA 10b. Exted in this matter, state your position with respect to any employees and individuals 11a. Election Type: Manual // Mail 11b. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Location(s): NA 11d. Election Location(s): NA 12b. Address I1c. Election Time(s): NA NA 11d. Election Location(s): NA 12b. Full Mam of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 22b. Full man of Petitioner (including local name and number) 12b. Address (street and num		gaining Agent (If no	one, so state).			Rd. Roseville, MI 48	3066	
8g. Affiliation, if any SPFPA Bt. Date of Recognition or Certification NA Bt. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) March 31, 2020 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA NA 10. Organization) NA NA 10. Organization) NA NA 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. (# none, so state) NA 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. NA NA 10f. E-Mail Address NA 11. Election Date(s): 02/03/2020 11c. Election Time(s): NA 11d. Election Location(s): NA NA 12a. Full Name of Petitioner (Including local name and number) United Government Security Officers of America and its Local 323 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 12a. Full Name of Petitioner (Including local name and number) 12r. Full Name of national or international labor organization of which Petitioner is an affiliate or constituent (# none, so state) 12g. E-Mail Address 13a. Rame and Title Make LeBlanc DHS vice President UGSOA International Union 13b. Address (street and number, city,								
SPFPA NA Contract, If any (Month, Day, Year) March 31,2020 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA If so, approximately how many employees are participating? NA 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 58 above. (If none, so state) NA 10d. Cell No. NA 10b. Address 10c. Tel No. 10d. Cell No. NA NA 10b. Address 10c. Tel No. 10d. Cell No. NA 10e. Fax No. 10f. E-Mail Address NA 11b. Election Details: 11e. Election Time(s): 11a. Election Type: Manual Mail Mixed Manual/Mail 11b. Election Date(s): 22/03/2020 11c. Election Time(s): NA 12b. Address (street and number, city, state, and ZIP code) 22/03/2020 12e. Cell No. NA 12b. Address (street and number, city, state, and ZIP code) 22/03/2020 12e. Cell No. 12f. Fax No. 12g. E-Mail Address NA 12d. Tel No. 12b. Address (street and number, city, state, and ZIP code) 22/03/2020 12e. Cell No. 12f.	Contraction of the Design of t	NA						
SPFFA MA March 31,2020 9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA If so, approximately how many employees are participating? NA 10. Organization) NA Is so, approximately how many employees are participating? NA 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state) NA 10b. Address 10c. Tel. No. 10d. Cell No. NA 10b. Address 10c. Tel. No. 10f. E-Mail Address NA 10e. Fax No. 10f. E-Mail Address NA 11. Election Details: 11c. Election Time(s): 11d. Election Location(s): NA 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 12a. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12b. Address Male Delanc@ugsoa.com 12a. Full name of national critemational lubor organization of which Petitioner is an affiliate or constituent (if none, so state) 12b. Address (street and number, city, state, and ZIP code) <td></td> <td></td> <td></td> <td></td> <td>Recognition of</td> <td>r Certification</td> <td></td> <td></td>					Recognition of	r Certification		
(Name of labor organization) NA . has picketed the Employer since (Month, Day, Year) NA 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NA 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. NA NA 10f. E-Mail Address NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual / Mail Mixed Manual/Mail 11b. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual / Mail Mixed Manual/Mail 12b. Full Name of Petitioner (including local name and number) 11b. Election Type: Manual / Mail Mixed Manual/Mail 12c. Full name of rational labor organization of which Petitioner is an affiliate or constituent (if none, so state) NA Vanited Government Security Officers of America and its Local 323 12f. Fax No. 12g. E-Mail Address 12c. Full name of rational labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12g. E-Mail Address MA 12c. Full name of rational babor organization of which Sectrest and number, city, state, and ZIP code)	SPEPA		1	NA				
(Name of labor organization) NA . has pickated the Employer since (Month, Day, Year) NA 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NA 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. NA NA 10f. E-Mail Address NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Miked Manual/Mail 11b. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Miked Manual/Mail 12b. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of nitemational labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12g. E-Mail Address United Government Security Officers of America and its Local 323 12f. Fax No. 12g. E-Mail Address 12c. Full name of rational babor organization of which sets (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Ful No. 12	9. Is there now a strike or picketing at the E	mployer's establishn	nent(s) involved	? NA	If so, approx	imately how many er	nployees are pa	rticipating? NA
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. NA 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. NA NA 10f. E-Mail Address 10f. E-Mail Address NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 10f. E-Mail Address NA 12b. Fax No. 10f. E-Mail Address NA NA NA 12b. Fax No. 11d. Election Type: Manual / Mail					nplover since //	Month Day Year)	JA	
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 NA NA 11. Election Details: if the NLRB conducts an election in this matter, state your position with respect to any such election. 10c. Tel. No. NA 11. Election Details: if the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 02/03/2020 NA 12b. Address (street and number, city, state, and ZIP code) 12a. Full Name of Petitioner (<i>including local name and number</i>) 12b. Address (street and number, city, state, and ZIP code) 12d. Full Name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12g. E-Mail Address United Government Security Officers of America International Union 12l. Fax No. 12g. E-Mail Address 12d. Tel No. 12g. E-Mail Address Mikeblanc@ugsoa.com 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 12b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 2at7e TAO. 13b. Add								d other organizations and individuals
10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. NA NA 10e. Fax No. NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Mixed Manual/Mail 11b. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 02/03/2020 NA 12b. Address (street and number, city, state, and ZIP code) 223/2020 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 220.7225 12c. Full name of national or international lubric organization of which Petitioner is an affiliate or constituent (if none, so state) 12g. E-Mail Address United Government Security Officers of America and its Local 323 12f. Fax No. 12g. E-Mail Address 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 13d. Address (street and number, vity, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13b. Address (street and number, city, state, and ZIP code) 13d. Tel No.							Coontaires an	
NA NA NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 10f. E-Mail Address NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): NA 20/20/20/20 NA 11d. Election Location(s): NA 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so stale) 12g. E-Mail Address 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 617-620-7225 617-620-7225 NA 12g. E-Mail Address 13a. Name and Title Mike LaBlanc DHS vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 13d. Cell No. 13d. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13a. Tel No. 13d. Cell No. 13d.								
NA 10e. Fax No. NA 10f. E-Mail Address NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Manual/Mail Mixed Manual/Mail 11b. Election Date(s): 02/03/2020 11c. Election Time(s): NA 11d. Election Location(s): NA 12a. Full Name of Petitioner (including local name and number) United Government Security Officers of America and its Local 323 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Government Security Officers of America International Union 12f. Fax No. NA 12g. E-Mail Address Mileblanc@ugsoa.com 12d. Tel No. 617-620-7225 12e. Cell No. 617-620-7225 12f. Fax No. NA 12g. E-Mail Address Mileblanc@ugsoa.com 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 617-620-7225 13d. Cell No. 617-620-7225 13d. Cell No. 617-620-7225 13f. E-Mail Address Mileblanc@ugsoa.com 13c. Tel No. 617-620-7225 13d. Cell No. 617-620-7225 13f. Fax No. NA 13f. E-Mail Address Mileblanc@ugsoa.com 13c. Tel No. 617-620-7225 13d. Cell No. 617-620-7225 13d. Cell No. 617-620-7	10a. Name	10b. Addre	ISS .					
NA NA NA 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 02/03/2020 NA 11d. Election Location(s): 12b. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12b. E-Mail Address United Government Security Officers of America International Union 12e. Cell No. 12f. Fax No. 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) 13a. Name and Title Mike LaBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13d. Cell No.<	NIA	NIA						
any such election. 11c. Election Time(s): 11d. Election Location(s): 11b. Election Date(s): NA NA 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 12b. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12g. E-Mail Address United Government Security Officers of America and its Local 323 12e. Cell No. 12g. E-Mail Address 12d. Tel No. 12e. Cell No. 12e. Cell No. 12e. Cell No. 617-620-7225 NA 12g. E-Mail Address 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13d. Cell No. 12f. Fax No. 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13d. Cell No. 13d. Cell No. 617-620-7225 13d. Cell No. 13e. Fax No. Mileblanc@ugsoa.com 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 617-620-7225 NA 13f. E-Mail Address 617-620-7225 NA Mileblanc@ugsoa.com <	INA	INA						
11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 02/03/2020 NA NA 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 12a. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12b. Address (street and number, city, state, and ZIP code) 12d. Tel No. 12e. Cell No. 12e. Cell No. 12e. Cell No. 617-620-7225 617-620-7225 NA 12g. E-Mail Address 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 13f. E-Mail Address 13c. Tel No. 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. E-Mail Address 14cla		s an election in this n	natter, state you	r position wi	ith respect to	11a. Election Type	Manual	✓ Mail Mixed Manual/Mail
12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 12b. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 12g. E-Mail Address 12d. Tel No. 12e. Cell No. 12f. Fax No. 617-620-7225 12e. Cell No. 12g. E-Mail Address 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) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 12g. E-Mail Address 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13c. Tel No. 13f. E-Mail Address 617-620-7225 NA 13e. Fax No. 13f. E-Mail Address <t< td=""><td></td><td>11c. Elect</td><td>tion Time(s):</td><td></td><td></td><td>11d. Election Local</td><td>tion(s):</td><td></td></t<>		11c. Elect	tion Time(s):			11d. Election Local	tion(s):	
United Government Security Officers of America and its Local 323 2879 Cranberry Highway East Wareham, MA 02538 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (<i>if none, so stale</i>) 12g. E-Mail Address 12d. Tel No. 12e. Cell No. 12f. Fax No. 617-620-7225 617-620-7225 NA 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) 13a. Name and Title 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 13o. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 13o. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 617-620-7225 NA 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13o. Tel No. 617-620-7225 13e. Fax No. 13f. E-Mail Address 617-620-7225 NA 13e. Fax No. 13f. E-Mail Address 14eclare that I have read the above petition and that the statements are true to the best of my knowledge and belief. 1 1 Name (Print) Signature Title Date 63/63/2000 Mike L								
United Government Security Officers of America International Union 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 617-620-7225 617-620-7225 NA Mleblanc@ugsoa.com 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) 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 617-620-7225 NA 13e. Fax No. 13f. E-Mail Address 13c. Tel No. 617-620-7225 13e. Fax No. 13f. E-Mail Address 617-620-7225 NA 13e. Fax No. 13f. E-Mail Address 617-620-7225 NA Mleblanc@ugsoa.com 13e. Fax No. I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Image: Comparison of the comparison of t								
617-620-7225 617-620-7225 NA Mleblanc@ugsoa.com 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) 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 617-620-7225 617-620-7225 NA 13e. Fax No. I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. 1 Name (Print) Signature Title DHS Vice President UGSOA International Union Date Mike LeBlanc Signature Title DHS Vice President UGSOA International Union Date				is an affiliate	e or constituen	t (if none, so state)		
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538 13o. Tel No. 617-620-7225 13d. Cell No. 617-620-7225 13e. Fax No. 617-620-7225 13f. E-Mail Address Mieblanc@ugsoa.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. 1 Name (Print) Mike LeBlanc Signature Title DHS Vice President UGSOA International Union Date	12d. Tel No.	12e. Cell No.		12f. Fax N	No.		12g. E-Mail Ad	Idress
13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 13b. Tel No. 13c. Tel No. 13c. Cell No. 13e. Fax No. 617-620-7225 617-620-7225 NA 13f. E-Mail Address I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. 1 1 Name (Print) Signature Title DHS Vice President UGSOA International Union Date				1				soa.com
13c. Tel No. 13d. Cell No. 13d. Cell No. 13f. E-Mail Address 617-620-7225 617-620-7225 NA Mleblanc@ugsoa.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. 13f. E-Mail Address Name (Print) Signature Title Mike LeBlanc Date 02/03/2020								
617-620-7225 NA Mleblanc@ugsoa.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Image: Comparison of the statement of the statement of the best of my knowledge and belief. Name (Print) Signature Title Mike LeBlanc Date Comparison of the statement of the best of my knowledge and belief.	13a. Name and Title Mike LeBlanc DHS Vice	President UGSOA Inte	mational Union				and ZIP code)	
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) Name (Print) Mike LeBlanc Date Date<					No.			
Name (Print) Mike LeBlanc Signature Title DHS Vice President UGSOA International Union Date 62/03/2020		the second s				1	Mieblanc@ugs	soa.com
Mike LeBlanc DHS Vice President UGSOA International Union 02/03/2030			tements are tru		st of my know	neage and belief.		1 1
		gnature	2		President 1100			103 man
		NTS ON THIS PETIT	TION CAN BE P					

					-			
FORM NLRB-502 (RC)		ATES OF AMERI				DO NOT V	WRITE IN THIS SP	ACE
(2-18)	NATIONAL LABO		BOARD		Case No.		0	Date Filed
	RC	PETITION			28-RC-2	55857		2/6/2020
INSTRUCTIONS: Unless e-Filed u employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48	he petition must s named in the pe	be accompanied tition of: (1) the	i by both a si petition; (2) \$	howing of interest (s Statement of Positio	see 6b below) an n form (Form NL	d a certifica RB-505); an	te of service show ad (3) Description	n in which the wing service on of Representation
1. PURPOSE OF THIS PETITION: bargaining by Petitioner and Petiti requests that the National Labor	tioner desires to be	certified as repre	esentative of t	the employees. The P	etitioner alleges	that the fol	lowing circumsta	nces exist and
2a. Name of Employer:		2b. A	ddress(es) of	Establishment(s) invo	olved (Street and	number. City	. State, ZIP code);	
Amentum		205	01Seneca	Meadows Pkwy	, Ste. 300 Ge	rmantown	MD 20876	
3a. Employer Representative - Nar Jonathan Jones	me and Title:	3b. A	ddress (if san San	ne as 2b - state same 10	p):			
3c, Tel. No. (817) 984-2569	3d. Cell No.		3e. Fax N	lo.	3f, E-Mail /	Address .jones@ae	com com	
4a. Type of Establishment (Factory,	mine wholesaler	etc.)	4b Princi	pal Product or Service			nd State where unit	t is located
Service Provider	nine, interestion, i			y Accessory Issue		El Paso		10 1001100.
5b. Description of Unit Involved:				,,			er of Employees in	Linit
Included: SEE ATTACHED						ou. wanto	15	Unit.
Excluded:						6b. Do a s	ubstantial number	(30% or more)
All supervisors as defined by	the Act.					of the	employees in the u ented by the Petitic	nit wish to be
Check One: 7a. Request for red	cognition as Bargai	ning Representa	tive was made	e on (Date)	N/A ar		declined recognitio	the second se
on or about (Date)		(If no reply	recaived, so	state).	<u></u>			
7b. Petitioner is cu	and the second se		-	and the second	on under the Act.			
8a. Name of Recognized or Certific None	ed Bargaining Ag	ent (if none, so s	tate) 8b. A	ddress:				
8c. Tel. No.	8d. Cell No.	8e. Fax No. 8f. E-Mail Address						
8g. Affiliation, if any:			8h. Date of F	Recognition or Certific			urrent or Most (Month, Day, Year	1
9. Is there now a strike or picketing a	at the Employer's e	stablishment(s) in	volved? No	If so, appro	oximately how ma	ny employee	es are participating	?
(Name of Labor Organization)					, has pickete	the Employ	ver since (Month, D	av. Year)
10. Organizations or individuals othe individuals known to have a repr None					ed recognition as r	epresentativ		
	Lin							
10a. Name	10b. /	Address			10c. Tel, N	0,	10d. Cell No,	
					10e. Fax N	lo.	10f. E-Mail Addre	255
11. Election Details: If the NLRB cc	onducts and electio	n in this matter, s	tate your pos	ition with respect to a	ny such election:	11a. Electio		Mixed Manual/Mail
11b. Election Date(s):	10.02200	Election Time(s):	-			on Location(
Thursday, February 27, 2020	and the second se	0 a.m. to 12:3	0 p.m.					Rd. Fort Bliss TX.
12a. Full Name of Petitioner (inclue International Union of Opera				12b. Address (stree 6967 Commerce				
12c. Full name of national or internal International Union of Operatin			etitioner is an	affiliate or constituent	(if none, so state):		
12d. Tel. No.	12e. Cell No.		12f. Fax M	10.	12g. E-Mai	Address		
(915) 771-0224			(915) 77	71-9018				
13. Representative of the Petitione	er who will accept	service of all pa	apers for pur	poses of the represe	entation proceed	ing.		
13a. Name and Title: Butch Ballez, Organizer			[10] S. P. M. S. M. S	ess (street and numb ommerce Street,		물건을 한 것이 많은 것을 가지 않는 것이 없다.		
13c. Tel. No.	13d. Cell No.		13e. Fax	No	13f E-Mail	Address		
(915) 771-0224	(915) 493-977	8	(915) 77			llez@local	351.com	
I declare that I have read the abov		and the second s			and the second	son in Schemitter, Schemitter, St.		
Name (Print)	- province and and	Signature		sector my know	Title			Date
Butch Ballez		-		2	Organizer			2/6/20
		6	25	>	1 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

Petition CRC Unit

5b. Description of Unit Involved:

Included: All hourly employees including all full-time and part-time Sewing Machine Operators, Stock Clerks, and Stock Clerk Lead employed by the employer at Conus Redeployment Center (CRC) at Fort Bliss Texas.

Excluded: All supervisors as defined by the Act.

FORM NLRB-502 (RC)	UNITED STATES OF	AMERICA		-	DO NOT WRITE IN THIS SPACE					
(2-18)	NATIONAL LABOR RELAT RC PETITIO				Case	^{No.} 28-F	RC-2559	945	Date Fi	led uary 6, 2020
INSTRUCTIONS: Unless e-Filed u employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48	he petition must be accom named in the petition of: (panled by 1) the pet	both a sh tition; (2) S	owing of interest (s statement of Position	see 6b i n form	below) and (Form NL	d a certifica RB-505); an	te of service sho d (3) Descriptio	owing s n of Re	ervice on presentation
1. PURPOSE OF THIS PETITION: bargaining by Petitioner and Petiti requests that the National Labor	ioner desires to be certified a	is represei	ntative of th	ne employees. The P	etition	er alleges	that the foll	owing circumst	ances e	
2a. Name of Employer: Audio Visual Services Gr d/b/a PSAV and/or PSAV			ess(es) of Attachn	Establishment(s) invo nent A	olved (S	Street and i	number, City	, State, ZIP code	ə):	
3a. Employer Representative - Nar Ray Trujillo, Regional M	ne and Title:	PSAV	V Branc	he as 2b - state same h Office - Las	Vega		Vac	NN/ 2011	2	
			-	Springs Street		and the second	-	is, INV 8911	3	
3c. Tel. No. (702) 891-0953	3d. Cell No. (702) 281-2224		3e. Fax No		1	3f. E-Mail A rtrujillo(@psav.c	Sector Contractor		
4a. Type of Establishment (Factory, Entertainment	mine, wholesaler, etc.)	Entertain					Las Ve	d State where ur gas, Nevada		ated:
5b. Description of Unit Involved: Included: See Attachmen	t A						6a. Numbe	er of Employees i	in Unit:	
Excluded: See Attachmen	t A						of the e represe	ubstantial numbe imployees in the ented by the Petil	unit wis tioner?	h to be
Check One: X 7a. Request for rec on or about (Date)	ognition as Bargaining Repre		was made ceived, so		is Peti	tion and	d Employer o	declined recognit	ion	
7b. Petitioner is cu	rrently recognized as Bargain	ing Repre	sentative a	and desires certification	on unde	er the Act.				
8a. Name of Recognized or Certifie None	ed Bargaining Agent (If none	e, so state	9) 8b. Ad	dress:						
8c. Tel. No.	8d. Cell No.		8e. Fax No).	8	8f. E-Mail A	ddress			
8g. Affiliation, if any:		8h.	. Date of R	ecognition or Certifica				urrent or Most (Month, Day, Yea	ar)	
9. Is there now a strike or picketing a (Name of Labor Organization)	t the Employer's establishme	nt(s) invol	ved? No) If so, appro				s are participating er since (Month,		osl
10. Organizations or individuals othe individuals known to have a representation of the second secon					d recog	gnition as re	epresentative			
10a. Name	10b. Address				1	10c. Tel. No	D .	10d. Cell No.		
					1	10e. Fax No	D .	10f. E-Mail Add	ress	
11. Election Details: If the NLRB co	nducts and election in this ma	atter, state	e your posit	ion with respect to ar	ny such	election:	11a. Electio	· · · · · · · · · · · · · · · · · · ·	Mixed	Manual/Mail
11b. Election Date(s): February 21, 2020	11c. Election Tin		m: 6:00	pm - 9:00 pm			n Location(s			manaanman
12a. Full Name of Petitioner (include			11, 0.00	12b. Address (stree					,	
IATSE, Local 720	ng loou nano ano nanooj.			3000 S. Valley Las Vegas, N	y Vie	w Boul				
12c. Full name of national or internat International Alliance of 7				ffiliate or constituent	(if none	e, so state)	:			
12d. Tel. No. (702) 309-8052	12e. Cell No.		12f. Fax N	0.	1	12g. E-Mail	Address			
13. Representative of the Petitione 13a. Name and Title: Lisl R. Soto, Attorney	r who will accept service o		13b. Addre	ooses of the represents (street and number shire Boulevard,	er, city,	State and	ZIP code):	es, CA 9001'	7	
13c. Tel. No. (213) 380-2344	13d. Cell No.		/ Y / /	43-5098	1			oncounsel.n	et	
I declare that I have read the above Name (Print)	e petition and that the state Signature		e true to th		Title	and belief.				Date
Lisl R. Soto	Signature	1	al s	ko-	100000	orney				02/06/20
	TEMENTS ON THIS PETITI	ON CAN P	E DINIEL	IED BY EINE AND	MDDIS			TITLE 18 SECT		11

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 fourtime 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.

Re: IATSE Local 720 and Audio Visual Services Group d/b/a PSAV and/or PSAV Hotel Division

ATTACHMENT A

RC PETITION

2b. Address(es) of Establishment(s) involved:

Las Vegas, NV, including but not limited to:

The Cosmopolitan of Las Vegas 3708 Las Vegas Boulevard South, Las Vegas, NV 89109

M Resort Spa Casino 12300 South Las Vegas Boulevard, Henderson, NV 89044

Four Seasons Hotel Las Vegas 3960 Las Vegas Boulevard South, Las Vegas, NV 89119

JW Marriott Las Vegas Resort and Spa 221 North Rampart Boulevard, Las Vegas, NV 89145

5b. Description of Unit Involved:

Included:

All Stagehands and Technicians, including Technical Lead, Technical Spec, Technician, Lead Rigger, Rigger, Power Distributor, Floor "supervisor," performing work in Las Vegas, NV, including but not limited to at the Cosmopolitan, M Resort Spa Casino, Four Seasons, and JW Marriott.

Excluded:

All other employees, including management, supervisors, confidential employees, guards, sales, and area scheduling.

	GOVERNMENT			DO NOT W	RITE IN THI	S SPACE
NATIONAL LABOR		ARD	Case No.		Date	
RC PE				B-RC-255958	1 2012/16/20	bruary 6, 2020
INSTRUCTIONS: Unless e-Filed us						
in which the employer concerned i						
of service showing service on the						
(Form NLRB-505); and (3) Descript				RB 4812). The sho	wing of int	erest snould only be filed
with the NLRB and should not be s 1. PURPOSE OF THIS PETITION: RC-CE	RTIFICATION OF	EREPRESENTATIV	Other party .	of employees wish to b	e represente	d for purposes of collective
bargaining by Petitioner and Petitioner de	esires to be certifi	ed as representa ive	e of the employees. The I	Petitioner alleges that	the followin	g circumstances exist and
requests that the National Labor Relat 2a. Name of Employer	tions Board proc		er authority pursuant to ress(es) of Establishment			
Great Southwestern Construction, Inc.			B5 Pendale Rd El Paso 79907-		I number, city	, State, ZIF Code)
3a. Employer Representative – Name and	1 Title		BL Paso /990/- 3b. Address (If same as	2b – state same)		
Efrain Cerros			1035 Pendale Rd TX El Paso 79907			
3c. Tel. No.	3d. Cell No.		3e. Fax No.		f. E-Mail Add	ress
(915) 856-8766			(915) 595-9989	e	ecerros@myrgro	oup.com
4a. Type of Establishment (Factory, mine, v	wholesaler, etc)	4b. Principal produ		n	5a. City	and State where unit is located:
Construction			Electrical Powerline Cons	struction		El Paso, TX
5b. Description of Unit Involved						6a. No. of Employees in Unit: 30
Included: See Attached Page 2 for addition	nal details					6b. Do a substantial number (30%
Excluded: See Attached Page 2 for addition						or more) of the employees in the
EXCLUDED: See Attached Page 2 for addition	nal details					unit wish to be represented by the Petitioner? Yes Ves
Check One: 7a. Request for re	ecognition as Bard	aining Representativ	ve was made on (Date)	and E	Employer dec	lined recognition on or about
	(Date)	(If no reply received,	so state).			ner under die die die die die eine eine die eine die die die die die die die die die di
			presentative and desires of	certification under the A	.ct.	
8a. Name of Recognized or Certified Bar	gaining Agent (h	f none, so state).	8b. Address			
8c. Tel No.	8d Cell No.		8e. Fax No.	8	f. E-Mail Add	ress
8g. Affiliation, if any	2	8	3h. Date of Recognition or	Certification 8	i Expiration	Date of Current or Most Recent
						y (Month, Day, Year)
			N-			
9. Is there now a strike or picketing at the E				imately how many emp	loyees are pa	inticipating?
(Name of labor organization)						
 Organizations or individuals other than known to have a representative interest in a 					sentatives and	d other organizations and individuals
known to have a representative interest in a	iny employees in	and anni described in	Incin ob above. (in none,	So sidic)		
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.
				10e. Fax No.		10f. E-Mail Address
				IDE. FAX NO.		TOI. E-IVIAII AUGLESS
11. Election Details: If the NLRB conducts any such election.	s an election in th	s matter, state your	position with respect to	11a. Election Type:	Manual [Mail Mixed Manual/Mail
11b. Election Date(s):	11c. E	ection Time(s):		11d. Election Location	n(s):	
02/21/2020	17000002386	n to 7:30 am		Office at 1035 Pendal		
12a. Full Name of Petitioner (including lo Leticia Marcum IBEW Local 583				311 Boderland TX FI Paso 79932-	and number,	city, state, and ZIP code)
12c. Full name of national or international la International Brotherhood of Electrical Worke	abor organization ers, AFL-CIO, CL	of which Petitioner is C	s an affiliate or cons ituent	t (if none, so state)		
12d. Tel No. (915) 877-9166	12e. Cell No.		12f. Fax No.	1	2g. E-Mail Ac etty@ibew583	ddress 3.com
13. Representative of the Petitioner who	will accept servi	ce of all papers for	purposes of the repres	entation proceeding.		
13a. Name and Title		f	13b. Address (street and	d number, city, state, an	d ZIP code)	
Michael A Murphy Counsel IBEW Local 583			311 W Borderland TX El Paso 79932-			
13c. Tel No. (512) 920-4114	13d. Cell No. (512) 920-4114		13e. Fax No.		3f. E-Mail Ad hichael murp	dress hy@ibew.org
(512) 920-4114 I declare that I have read the above petiti	(512) 920-4114	statements are true	to the best of my know	3		
	qnature	1	Title		Date	
	chael A Murphy		Counsel		02/6/2020	15:48:40
WILLFUL FALSE STATEME	NTS ON THIS PE	TITION CAN BE PU	UNISHED BY FINE AND	IMPRISONMENT (U.S.		

ATTACMENT A

Included: All General Foreman, Foreman, Journeyman, Apprentice, and Groundman Line Construction workers employed by the Employer in El Paso, Hudspeth, and Culberson counties in Texas, and Luna, Dona Anna, and Otero counties in New Mexico.

Excluded: All other employees, including office clerical, guards, and supervisors within the meaning of the Act

UNITED STATES	S GOVERNMENT			DO NOT	WRITE IN THIS	S SPACE	
NATIONAL LABOR			Case No.		Date		
RC PE	TITION		28-RC-2559	62		2020	
INSTRUCTIONS: Unless e-Filed us		v's website w	ww.nlrb.gov_submit.a	on original of this			
in which the employer concerned i							
of service showing service on the							
(Form NLRB-505); and (3) Descript				RB 4812). The sr	lowing of int	erest should only be filed	
with the NLRB and should not be s	served on the	employer or an	y other party.				
1. PURPOSE OF THIS PETITION: RC-CE bargaining by Petitioner and Petitioner d							
requests that the National Labor Relation							
2a. Name of Employer			dress(es) of Establishmen				
Columbus Electric Cooperative		90	0 N Gold Ave M Deming 88030-				
3a. Employer Representative - Name and	d Title		3b. Address (If same as	s 2b – state same)			
Susanna Morris			900 N Gold Ave NM Deming 88030	1			
3c. Tel. No.	3d. Cell No.		3e. Fax No.	J- 0	3f. E-Mail Add	ress	
(575) 546-8838					suem@col-coop).com	
4a. Type of Establishment (Factory, mine, v	wholesaler, etc)	4b. Principal pro	duct or service		5a. City	and State where unit is located:	
Utilities			Electricity			Deming, NM	
5b. Description of Unit Involved						6a. No. of Employees in Unit:	
	nal dataila					9	
Included: See Attached Page 2 for addition	nai details					6b. Do a substantial number (30%	
200 State of 100						or more) of the employees in the	
Excluded: See Attached Page 2 for addition	nal details					unit wish to be represented by the	
						Petitioner? Yes [🖌 No [🗌	
Check One: 7a. Request for re	ecognition as Barg	aining Representa	tive was made on (Date)	an	d Employer dec	lined recognition on or about	
		(If no reply receive					
			epresentative and desires	certification under the	Act.		
8a. Name of Recognized or Certified Bar	gaining Agent (h	f none, so state).	8b. Address				
8c. Tel No.	8d Cell No.		8e. Fax No.		8f. E-Mail Add	ress	
8g. Affiliation, if any							
					Contract, if an	y (Month, Day, Year)	
O to these next a statut as sightfing at the D	and the sector in which the	have a file a line of the set	0 No. 16	in the ball of the second s			
9. Is there now a strike or picketing at the E	imployer's establis	nmeni(s) involved	i so, approx	amately now many en	ipioyees are pa	articipating?	
(Name of labor organization)		has pick	eted the Employer since (I	Month, Day, Year)			
10. Organizations or individuals other than	Petitioner and tho	se named in items	8 and 9, which have claim	ed recogni ion as repi	resentatives and	d other organizations and individuals	
known to have a representative interest in a	any employees in	the unit described i	in item 5b above. (If none,	so state)			
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.	
				10e. Fax No.		10f. E-Mail Address	
				IUE. Fax NU.		TOI. E-IVIAII AUGLESS	
11. Election Details: If the NLRB conducts	s an election in th	s matter, state vou	r position with respect to	11a. Election Type:	Manual	Mail Mixed Manual/Mail	
any such election.	a 2000 - 2002					manual manual man	
11b. Election Date(s): 2-19-20	The second s	ection Time(s):		11d. Election Locat			
	8am-11			Confrence room at	•		
12a. Full Name of Petitioner (including lo Jason W Simpson	ocal name and n	imber)		12b. Address (stree 4921 Alexander Blvg	et and number,	city, state, and ZIP code)	
Jason W Simpson International Brotherhood of Electrical workers, AFL	/CIO Local 611	of which Datition or	is an offlicte or some ituan	4921 Alexander Blvc NM Albuquerque 87	107-"		
12c. Full name of national or international la International Brotherhood of Electrical worke	abor organization ers. AFL/CIO	or which Pelluoner	is an annuale of constituen	it (il none, so state)			
12d. Tel No.	12e. Cell No.		12f. Fax No.	ī	12g. E-Mail Ad	ddress	
(817) 975-7044	(817) 975-7044		121. T dA 140.		Jason_Simpso	on@IBEW.org	
13. Representative of the Petitioner who		ce of all papers fo	or purposes of the repres	entation proceeding	1.	unne 187	
13a. Name and Title		A 16	13b. Address (street and	10			
Contraction and ADDE STOCKED ADDRESS (SPACE)			in the second se	,,,,,			
13c. Tel No.	13d. Cell No.		13e. Fax No.	I	13f. E-Mail Ad	dress	
ios. formo.	TOU. COILINO.		100. T uA 110.		TOI. L-IVIAII AU	G1 666	
I declare that I have read the above petit	ion and that the	statements are tru	le to the best of my know	ledge and belief.	2		
Name (Print) Si	gnature		Title		Date		
	ison Simpson		International Lead Organ	nizinr	02/7/2020	12:59:07	
WILLFUL FALSE STATEME	NTS ON THIS PE	TITION CAN BE F	PUNISHED BY FINE AND	IMPRISONMENT (U.			

DO NOT WRITE IN THIS SPACE

Attachment

Employees Included

All Journeyman Linemen, Apprentice Linemen, Groundmen and working Formen

Case

Employees Excluded

All Supervisors, Clerical and Guards as described by the ACT

UNITED STATES	GOVERNMENT	7	Г		DO NO	T WRITE IN THIS	S SPACE	
NATIONAL LABOR RELATIONS BOARDCase No.28-RC-256437Date Filed February 14, 2020						Filed		
INSTRUCTIONS: Unless e-Filed us in which the employer concerned i of service showing service on the (Form NLRB-505); and (3) Descript with the NLRB and should not be s	s located. The employer and ion of Represe	e petition must all other partie entation Case I	t be acco es named Procedur	mpanied by in the petition res (Form NL	both a showing o on of: (1) the peti	of interest (se ition; (2) State	e 6b below) and a certificate ement of Position form	
1. PURPOSE OF THIS PETITION: RC-CE bargaining by Petitioner and Petitioner do requests that the National Labor Relat	RTIFICATION OF	REPRESENTATI	IVE - A sub ve of the er	stantial number nployees. The	Petitioner alleges t	hat the following	g circumstances exist and	
2a. Name of Employer Frontier Communications d/b/a Nav	vajo Commun	2b. Ad	idress(es) o 64, St Mi	of Establishmen chaels, AZ 8	it(s) involved (Street 86511			
3a. Employer Representative – Name and Mark Jeffries, Director of Operation	ons		831 Ea	st Hall Stree	s 2b – state same) et, Show Low, A			
3c. Tel. No. (928) 871-3814	3d. Cell No.		3e. Fax			3f. E-Mail Add Mark.Jeffrie	s@ftr.com	
4a. Type of Establishment (Factory, mine, w Telecommunications Service Prov		4b. Principal pro Telecommuni				5a. City and State where unit is located		
5b. Description of Unit Involved Included: Technicians and N	/lechanics						6a. No. of Employees in Unit: 33	
Excluded: All other employee	S						6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes	
7b. Petitioner is cu	(Date) urrently recognize	(If no reply received ad as Bargaining Re	d, so state)	No repl	2/13/2020_ar V certification under the		ined recognition on or about	
8a. Name of Recognized or Certified Barg	gaining Agent (II	f none, so state).		8b. Address				
8c. Tel No.	8d Cell No.		8e. Fax	No.		8f. E-Mail Addi wreinken@cwa		
8g. Affiliation, if any	0 (0 100 M		8h. Date o	f Recognition o	r Certification		Date of Current or Most Recent y (Month, Day, Year)	
9. Is there now a strike or picketing at the En (Name of labor organization)	mployer's establis				kimately how many e Month, Day, Year)		rticipating?	
10. Organizations or individuals other than F known to have a representative interest in a None		se named in items	8 and 9, w	hich have claim	ed recognition as rep	Contraction of the second s	d other organizations and individuals	
10a. Name	10b. Ad	dress			10c. Tel. No.		10d. Cell No.	
					10e. Fax No.		10f. E-Mail Address	
11. Election Details: If the NLRB conducts any such election.	an election in thi	is matter, state you	ur position v	with respect to	11a. Election Type	e: 🗸 Manual	Mail Mixed Manual/Mail	
11b. Election Date(s): March 3, 2020		lection Time(s): d all practicable	140 - CANA 0		11d. Election Loca AZ-264, St Michae			
12a. Full Name of Petitioner (including lo Communications Workers of America, AF	L-CIO	•			8085 East Prentic		city, state, and ZIP code) nwood Village, CO 80111	
12c. Full name of national or international la Communications Workers of America, AFL	-CIO	of which Petitioner			nt (if none, so state)		5	
12d. Tel No. (303) 770-2822	12e. Cell No.		12f. Fax	0.0.0.0		12g. E-Mail Ad wreinken@cwa		
13. Representative of the Petitioner who 13a. Name and Title William R. R			13b. Add	dress (street an	sentation proceedin d number, city, state, , Greenwood Village, CO	and ZIP code)		
13c. Tel No. (303) 721-7399	13d. Cell No.	Ψ.	13e. Fax	«No.		13f. E-Mail Ad wreinken@cwa		
I declare that I have read the above petiti	11 01	statements are tru		est of my know	vledge and belief.		-	
William R. Reinken	mature AT	V.	Title Attorney			Date 2-14-2020		
WILLFUL FALSE STATEME	NTS'ON THIS PE	TION CAN BE H	PUNISHED	BY FINE AND	IMPRISONMENT (U	J.S. CODE, TITL	E 18, SECTION 1001)	

	S GOVERNMENT		DO NO	T WRITE IN THI			
	RELATIONS BOARD	Case No.	28-RC-256504	Date	100000		
RCPE				F6	ebruary 18, 2020		
INSTRUCTIONS: Unless e-Filed us							
in which the employer concerned i							
of service showing service on the	employer and all other parts	ies named in the pet	ition of: (1) the pet	ition; (2) State	ement of Position form		
(Form NLRB-505); and (3) Descript	ion of Representation Case	Procedures (Form N	VLRB 4812). The s	howing of int	terest should only be filed		
with the NLRB and should not be s	served on the employer or a	ny other party.	•	-	•		
1. PURPOSE OF THIS PETITION: RC-CE	RTIFICATION OF REPRESENTA	TIVE - A substantial numb	per of employees wish	to be represente	d for purposes of collective		
bargaining by Petitioner and Petitioner de							
requests that the National Labor Relat 2a. Name of Employer		Address(es) of Establishm					
Decypher Technologies Ltd.					Blvd N, Nellis AFB, NV 89191		
3a. Employer Representative – Name and		3b. Address (If same					
Deborah Heifner, Director of Ope				. San Antoni	o, Texas, 78216-6972		
3c. Tel. No.	3d. Cell No.	3e. Fax No.		3f. E-Mail Add			
(210) 735-9900					eifner@decypher.com		
4a. Type of Establishment (Factory, mine, w	vholesaler, etc.) 4b. Principal pr	roduct or service			and State where unit is located:		
Military Contractor	Military Sup				AFB, NV		
5b. Description of Unit Involved			- <u>1997</u> - 1997		6a. No. of Employees in Unit:		
Included: All full time and regular	part time Medical Office C	lerks employed by t	he employer at M	like	6		
O'Callaghan Military Me					6b. Do a substantial number (30%		
Excluded: All managers, site supervise		nlovees quards and s	unervisors as define	d by the Act	or more) of the employees in the		
, an managere, one supervice	sors, an other professional em	proyees, guardo ana o		d by the riot.	unit wish to be represented by the Petitioner? Yes V No		
Check One: 7a. Request for re	cognition as Bargaining Penresen	tative was made on /Date	Du notition	nd Employer dec			
ra. Requestione	cognition as Bargaining Represent (Date) (If no reply receiv		by permont a	na Employer dec	aned recognition on or about		
7h Petitioner is o	urrently recognized as Bargaining I	알카에서 전문 산업은 방법을 했다. 그는 그는 것은 것은 것이다.	es certification under th	e Act			
8a. Name of Recognized or Certified Barg				e Au.			
none	533						
8c. Tel No.	8d Cell No.	8e. Fax No.		8f. E-Mail Add	ress		
8g. Affiliation, if any		8h. Date of Recognition	or Certification		Date of Current or Most Recent		
				Contract, if an	y (Month, Day, Year)		
9. Is there now a strike or picketing at the Er	malayor's establishment(s) involve	d2 Ne Kasasa	evinestely here menu e		disingling 0		
and the second second second				inployees are pa			
(Name of labor organization)	, has pic	cketed the Employer since	e (Month, Day, Year) _				
10. Organizations or individuals other than F				presentatives and	d other organizations and individuals		
known to have a representative interest in a none	ny employees in the unit described	i in item 5b above. (If noi	ne, so state)				
10a. Name	10b. Address		10c. Tel. No.		10d. Cell No.		
Tou. Humo	Tob. Address		100. 10. 10.		Tod. Och Ho.		
			10e. Fax No.		10f. E-Mail Address		
11. Election Details: If the NLRB conducts	an election in this matter, state yo	our position with respect to	11a. Election Type	e: 🖌 Manual	Mail Mixed Manual/Mail		
any such election. 11b. Election Date(s):	11c. Election Time(s):		11d. Election Loca	ation(c):			
Tuesday, March 10, 2020	3:30 pm - 4:30 pm				306, or Logistics Conference Room L218		
12a. Full Name of Petitioner (including lo					city, state, and ZIP code)		
International Association of Machinists an		dge SC711			as Vegas, NV 89130		
12c. Full name of national or international la		r is an affiliate or constitu	ent (if none, so state)				
International Association of Machinists and							
12d. Tel No.	12e. Cell No.	12f. Fax No.		12g. E-Mail Ad			
(916) 542-3351	(760) 810-6989	for numbers of the rent	econtation proceedin	rcarrillo@iama	aw.org		
13. Representative of the Petitioner who		a de la company a company de la company d	anna an ann an San San Anna an Anna	Service and the service of the			
13a. Name and Title Xochitl A. Lo	opez, Attorney		and number, city, state, nfeld ,1001 Marina Village		Alamada CA 94501		
	13d. Cell No.	13e. Fax No.	meid , roor marina village				
13c. Tel No. 510-337-1001	ISE, Pax NO.						
	Tod. Cen No.	510-337-1023		nlrbnotices@u	inioncounsel.net		
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.							
	on and that the statements are t		owledge and belief.		inioncounsel.net		
Name (Print) Sig		rue to the best of my know	owledge and belief.	Date			
Name (Print) Sig Xochitl A. Lopez, Attorney	on and that the statements are t	Title Attorney		Date Tuesday, I	February 18, 2020		

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.

1\1070268

UNITED STATES	S GOVERNMENT	2		DO NOT	WRITE IN T	HIS SPACE
NATIONAL LABOR			Case No.	8-RC-25695		te Filed February 25, 2020
RC PE	TITION		2	0-RC-20090	5	February 25, 2020
INSTRUCTIONS: Unless e-Filed us	ing the Agenc	y's website, ww	w.nlrb.gov, submit a	n original of this	Petition to	an NLRB office in the Region
in which the employer concerned i						
of service showing service on the						
(Form NLRB-505); and (3) Descript						
with the NLRB and should not be s					g	
1. PURPOSE OF THIS PETITION: RC-CE	RTIFICATION OF	REPRESENTATIV	/E - A substantial number	of employees wish to	be represen	ted for purposes of collective
bargaining by Petitioner and Petitioner de	esires to be certifi	ied as representa ive	e of the employees. The	Petitioner alleges th	at the follow	ing circumstances exist and
requests that the National Labor Relat 2a. Name of Employer	tions Board proc		dress(es) of Establishment			
Balfour Beatty Communities LLC Fort Bliss		On	e Country View Rd.		nu number, u	sity, State, ZIF Code)
3a. Employer Representative – Name and	Title		Malvern 19355- 3b. Address (If same as	2h – state same)		
Leslie Cohn			One Country View PA Malvern 19355			
3c. Tel. No.	3d. Cell No.		3e. Fax No.)-	3f. E-Mail A	ddress
(610) 355-8266					lcohn@bbcgr	p.com
4a. Type of Establishment (Factory, mine, w	wholesaler, etc)	4b. Principal prod	luct or service		5a. C	ity and State where unit is located:
Others		Hou	ising Facilities at Fort Bliss	s Army Base		El Paso, TX
5b. Description of Unit Involved						6a. No. of Employees in Unit:
Included: See Attached Page 2 for addition	nal details					36
						6b. Do a substantial number (30%
Excluded: See Attached Page 2 for addition	nal details					 or more) of the employees in the unit wish to be represented by the
						Petitioner? Yes [Vo [
Check One: 7a. Request for re	ecognition as Barg	aining Representat	ive was made on (Date)	an	d Employer d	leclined recognition on or about
		(If no reply received	· · · · · · · · · · · · · · · · · · ·			
			presentative and desires	certification under the	Act.	
8a. Name of Recognized or Certified Bar International Union of Operating Engingeers			8b. Address 151 Penns	sylvania NE		
8c. Tel No.	8d Cell No.		8e. Fax No.	ierque 87108	8f. E-Mail A	ddress
(505) 266-5757	ou con no.		00. T 4X 110.		bwdixon953@ms	
8g. Affiliation, if any		1	8h. Date of Recognition or	Certification		n Date of Current or Most Recent
International Union of Operating Engineers			00/00/00	A.F.	Contract, if	any (Month, Day, Year)
21 656 5	and the sector is a factor to	have a first instance of the	06/23/20	7297803		03/29/2020
9. Is there now a strike or picketing at the E				imately how many en	ipioyees are	participating?
(Name of labor organization)			· · ·			
10. Organizations or individuals other than I	Petitioner and tho	se named in items 8	8 and 9, which have claim	ed recogni ion as repl	resentatives	and other organizations and individuals
known to have a representative interest in a	iny employees in	the unit described in	Them bo above. (II none,	so state)		
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.
				10e. Fax No.		10f. E-Mail Address
11 Election Detaile: Kits NI DD and the	an election in the	in matter state	position with respect to			
 Election Details: If the NLRB conducts any such election. 	s an election in th	is matter, state your	position with respect to	11a. Election Type:	Manua	I Mail Mixed Manual/Mail
11b. Election Date(s):	11c. E	lection Time(s):		11d. Election Locat	ion(s):	
As soon as possible	All shift	2. Channes and a second se		El Paso, TX		
12a. Full Name of Petitioner (including lo Barry Dixon	ocal name and nu	umber)				er, city, state, and ZIP code)
Barry Dixon International Union of Operating Engingeers, Local 12c, Full name of national or international la		of which Detitioner i	is an affiliate or constituen	151 Pennsylvania N NM Albuquerque 87	108-	
12c. Full name of national or international la International Union of Operating Engingeers		or which Petitioner I	is an annuale of consillen	i (ii none, so state)		
12d. Tel No.	12e. Cell No.	I	12f. Fax No.	I	12g. E-Mail	Address
(505) 266-5757					bwdixon953	@msn.com
13. Representative of the Petitioner who	will accept servi	ice of all papers for		8.0		
13a. Name and Title Stephen Cur ice Attorney			13b. Address (street and 900 Gold Ave, SW	d number, city, state,	and ZIP code	2)
Stephen Cur ice Attorney YOUTZ & VALDEZ ,PC			NM Albuquerque 87102	<u></u>		
13c. Tel No. (505) 244-1200	13d. Cell No.		13e. Fax No. (505) 244-9700		13f. E-Mail stephen@y	Address outzvaldez.com
I declare that I have read the above petiti	on and that the	statements are true		ledge and belief		
				and benet.	Data	
	gnature ephen Curtice		Title Attorney		Date 02/25/20	020 13:45:00
WILLFUL FALSE STATEME		TITION CAN BE P		IMPRISONMENT (U		

Attachment

Date	Filed

Employees Included

Full time assistant maintenance supervisors, general maintenance, techs (turns, and general maintenance techs

Case

Employees Excluded

office clerical employees, guards, managers, supervisors

FORM NLRB-502 (RC)	UNIT	ED STATES OF	AMERIC	A			DO NOT	WRITE IN THIS :	SPACE	
(2-18)		L LABOR RELA				Case No.			Date Fil	led
		RC PETITIC	NC			20 00	257076		2/27	/2020
INSTRUCTIONS: Unless e-Filed	using the A	ancy's website	- uninu	nlrh aov/	submit an original		-257076	office in the Rec		
employer concerned is located. the employer and all other partie Case Procedures (Form NLRB 4	The petition as named in	must be accon the petition of:	npanied ((1) the p	by both a s etition; (2)	howing of interest (s Statement of Positio	see 6b belov on form (For	r) and a certific n NLRB-505); a	ate of service sh nd (3) Description	nowing se on of Rep	ervice on presentation
1. PURPOSE OF THIS PETITION: bargaining by Petitioner and Pet requests that the National Lab	itioner desire	s to be certified	as repres	entative of	the employees. The F	Petitioner all	eges that the fo	llowing circums	tances e	
2a. Name of Employer:			2b. Ad	dress(es) o	f Establishment(s) inv	olved (Street	and number, Ci	ty, State, ZIP cod	e):	
CoffeeMongers Inc. DB/	A Humbl	e Coffee		Central	NW Suite C At					NM
3a. Employer Representative - Na	me and Title			1.75	me as 2b - state same):				
Mark Baker, Director			1	Ball Contract of the second second	NW Suite C, A		ie, NM 871	02		
3c, Tel. No.	3d. Cell No).		3e. Fax N	0.	3f. E-I	Aail Address		10.55	
505-609-7099							r@bakerad	.com		
4a. Type of Establishment (Factory,	mine, whole	saler, etc.)		4b. Princi	pal Product or Service			nd State where u	nit is loca	ited:
Restaurants				Gourn	net Coffee		Albuqu	erque, NM		
5b. Description of Unit Involved:							6a. Numb	er of Employees	in Unit:	
Included:							12			
Full & Part-time baristas	& Assist	ant Manage	ers at a	ll NM re	etail locations.		Carrier and an and a state	substantial numbe	or /200/ 0	r moral
Excluded: Guards, Managers and Su	inervisor	s as defined	by the	Act			of the	employees in the	unit wish	to be
Check One: 🕅 7a. Request for re					e on (Date) 2-2	7-2020		ented by the Peti declined recogni		Yes No
on or about (Date)	No F	teply (If r	no reply r	eceived, so	state).		10.70			
7b. Petitioner is cu 8a. Name of Recognized or Certifi		the second se			and desires certification ddress:	on under the	Act.			
None	eu bargaini	ng Agent (ii non	e, so stat	e) 00. A	Juless.					
8c. Tel. No.	8d. Cell No		1000	8e. Fax N		SF E.M	ail Address			
ac. Tel. No.	ou. Cell No			oe, Fax N	5.	01. E-IV	Idil Address			
8g. Affiliation, if any:			8	1. Date of R	ecognition or Certifica		iration Date of C Contract, if any	urrent or Most (Month, Day, Ye	ar)	
9. Is there now a strike or picketing a	at the Employ	ver's establishme	ent(s) invo	lved? No	▼ If so, appro	ximately how	many employee	es are participatin	g?	
(Name of Labor Organization)				Real Providence		, has picl	eted the Employ	ver since (Month,	Day, Yea	nr)
10. Organizations or individuals othe individuals known to have a repre-								es and other orga	anizations	and
None										
10a. Name		10b. Address				10c. Te	I. No.	10d. Cell No.		
						10e. Fa	ix No.	10f. E-Mail Add	ress	
11. Election Details: If the NLRB co	nducts and e	election in this ma	atter, stat	e your posit	ion with respect to an	y such electi	on: 11a. Electio	n Type:		
							🗙 Manua] Mixed M	Manual/Mail
11b. Election Date(s):		11c. Election Tin		0 0 00	6.00		ection Location(7110.0	. D
March 18, 2020		8:00am-10:		& 3:00p				Abq NM 8'	/110.5	torage Rm
12a. Full Name of Petitioner (includ				1564	12b. Address (street				0	
United Food and Commen					130 Alvarado			e, INM 8710	8	
12c. Full name of national or internati United Food and Commen					ffiliate or constituent (if none, so s	ate):			
12d. Tel. No.	12e. Cell No		luonai	12f. Fax No	2	120 E	Mail Address			
505-206-1683	12e. Cell IN			121. Fax 19	J.		vedra@ufcv	v1564 org		
13. Representative of the Petitione	r who will a	ccept service of	f all pape	rs for purp	oses of the represe			i too norg		
13a. Name and Title:					ss (street and numbe					
Chris Saavedra				130 Alv	arado Dr. NE, Al	lbuquerqu	e, NM 87108	3		e.
13c. Tel. No.	13d. Cell No).		13e. Fax N	0.	13f. E-I	fail Address	22.010 22.010		
505-206-1683					1441	csaav	edra@ufcv	v1564.org		
I declare that I have read the above	e petition an			e true to th	e best of my knowle					
Name (Print)		Signature	/	10	V	Title	(V. 2.4)		1.00	Date
Chris Saavedra		Vin	410	sh &	get	Employ	ee Advocate	e	12	2-27-2020
		17.	6		References in the second					

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 *et seq*. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC)	UNITED ST	ATES OF AMERIC	A			DO NOT V	WRITE IN THIS SPACE				
(2-18)		OR RELATIONS BO	DARD		Case No.		Date F				
	RC	PETITION			28-RC-25	7243	2/2	28/2020			
INSTRUCTIONS: Unless e-Filed u employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48	he petition must s named in the pe	be accompanied l tition of: (1) the p	by both a sh etition; (2) S	nowing of interest (s Statement of Position	ee 6b below) and n form (Form NL	l a certifica RB-505); an	te of service showing s ad (3) Description of Re	ervice on presentation			
1. PURPOSE OF THIS PETITION: bargaining by Petitioner and Petiti requests that the National Labor	tioner desires to be	e certified as repres	entative of the	he employees. The P	etitioner alleges	that the fol	lowing circumstances				
2a. Name of Employer:	0001000-005	2b. Ad	dress(es) of	Establishment(s) invo	lved (Street and I	number, City	, State, ZIP code):				
Southern Glazer's Wine &	& Spirits	2375	South 4	5th Ave, Phoer	nix Arizona	85043					
3a. Employer Representative - Nar	me and Title:	3b. Ad	dress (if sam	ne as 2b - state same)):						
Mark Koslow Vp of Open	rations	Sam	e as 2b								
3c. Tel. No.	3d. Cell No.		3e. Fax No	D.	3f. E-Mail A	ddress					
602-533-8791	954-599-20	38			mkoslov	w@sgws	s.com				
4a. Type of Establishment (Factory,	mine, wholesaler,	etc.)	4b. Princip	al Product or Service		5a. City an	nd State where unit is loc	ated:			
Liquior Distributor & Wa	rehousing		Alcoho	l Distrbutor &	Warehouse	See Atta	ched Page 2 for Adit	ional Details			
5b. Description of Unit Involved:						6a. Numb	er of Employees in Unit:				
See attached Page 2 for a	dditional deta	ails				Approx	x 125				
Excluded:							ubstantial number (30%				
See attached Page 2 for a	dditional deta	ails				repres	employees in the unit wis ented by the Petitioner?	X Yes No			
Check One: X 7a. Request for rec		• •			8/2020 and	Employer	declined recognition				
on or about (Date) 7b. Petitioner is cu		(If no reply r			n under the Act						
8a. Name of Recognized or Certific				and the second sec	and and an and Add.						
None											
8c. Tel. No.	8d. Cell No.	10-100-10-10-10-10-10-10-10-10-10-10-10-	8e. Fax No).	8f. E-Mail A	ddress					
							10 92/ · · · · ·				
8g. Affiliation, if any:		8	h. Date of R	ecognition or Certifica			urrent or Most (Month, Day, Year)				
9. Is there now a strike or picketing a	at the Employer's e	stablishment(s) inv	olved? No	 If so, approx 	ximately how man	y employee	s are participating?				
(Name of Labor Organization)					, has picketed	the Employ	er since (Month, Day, Ye	ear)			
10. Organizations or individuals othe individuals known to have a representation of the second seco							es and other organization	ns and			
None											
10a. Name	10b.	Address	1941 1978 1979	2027-1024 1	10c. Tel. No).	10d. Cell No.				
					10e. Fax No).	10f. E-Mail Address				
11. Election Details: If the NLRB co	nducts and electio	n in this matter, sta	te your posit	ion with respect to an	y such election:	11a. Electio	n Type:				
						Manua Manua		Manual/Mail			
11b. Election Date(s):		Election Time(s):	00 . 10	0. / 1000 / 01/	11d. Electio						
3/12/2020			00 to 120	00 / 1800 to 210			eting room				
12a. Full Name of Petitioner (includ		2009 D. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		12b. Address (street			이 이 같은 것 이 같은 것 같은 것 같아.				
See attached page 2 for ac	ditional deta	uls		1450 South 27	th Ave Phoe	enix, Az	85009				
12c. Full name of national or internat			ioner is an a	ffiliate or constituent	(if none, so state):						
International Brotherhood	l of Teamster	S				22.2					
12d. Tel. No.	12e. Cell No.	1.143.25 1.25 A	12f. Fax No		12g. E-Mail		2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	A2-62427.50			
602-272-5561	602-477-90	60	602-27	2-3744	Russell.	medigov	rich@teamsterslo	cal104.com			
13. Representative of the Petitione	r who will accept	service of all pape									
13a. Name and Title: Russell Medigovich II Busir	ness Represent	ative		uth 27th Ave, Ph	······						
13c. Tel. No.								13f. E-Mail Address			
100. TEL NO.	12d Call No		13c Eau M	0	126 E Mail	Address					
602 272 5561	13d. Cell No.	60	13e. Fax N				ich@teamstarala	cal104 com			
602-272-5561	602-477-90		602-272	2-3744	Russell.		vich@teamsterslo	cal104.com			
I declare that I have read the above	602-477-90	t the statements a	602-272	2-3744	Russell.		vich@teamsterslo				
	602-477-90	t the statements a Signature	602-272	2-3744 te best of my knowle	Russell.	Medigov		cal104.com Date 2/28/2020			

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 may cause the NLRB to decline to invoke its processes.

Attachment page 2

5a. City and State where unit is located:

Locations in Phoenix, Tucson, Lake Havasu, Flagstaff, Sierra Vista, Seligman and Yuma, Arizona.

5b. Description of Unit involved

Included:

All full-time and part-time Drivers and Warehouse employees employed by the employer at the company's locations in Phoenix, Tucson, Lake Havasu, Flagstaff, Sierra Vista, Seligman and Yuma facilities.

Excluded:

All other employees, office and clerical employees, guards and supervisors as defended by the National Labor Relations Act.

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

General Teamsters (excluding mailers) State of Arizona, Local Union No.104.