UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE							
Case No.	Date Filed						
28-RC-249393	October 3, 2019						

					210 0 22 22 2		
INSTRUCTIONS: Unless e-Filed	using the	Agency	's website, <u>w</u>	<u>vw.nlrb.gov</u> , submit a	n original of this	Petition to a	n NLRB office in the Region
in which the employer concern	ed is locat	ed. The	petition must	be accompanied by i	both a showing of	interest (se	e 6b below) and a certificate
of service showing service on (he employ	er and a	II other partie	s named in the petitic	on of: (1) the petiti	on; (2) State	ement of Position form
(Form NLRB-505); and (3) Desc	ription of I	Represer	ntation Case F	Procedures (Form NL	RB 4812). The sh	owing of int	erest should only be filed
with the NLRB and should not l					·	•	_
1. PURPOSE OF THIS PETITION: RC							
bargaining by Petitioner and Petition							
requests that the National Labor F 2a. Name of Employer	terations bo	aru proce		dress(es) of Establishmen			
URS Federal Services Inc./Solu	ition One	Industrie					,,
3a. Employer Representative - Name				3b. Address (If same as		····	
Lester Jordan, Labor Relation		er		11832 Rock Landir	ng Dr. Suite 306,	Newport N	lews, VA 23606
3c, Tel. No.	3d. Ce			3e. Fax No.		3f. E-Mail Add	
757-383-6223	1] [ester.Jord	an@aecom.com
4a. Type of Establishment (Factory, mir	ne, wholesale	er, etc.)	4b. Principal pro	duct or service	<u>1</u> -	5a. City	and State where unit is located:
Military Contractor		1	Military Supp	ort		Las Ve	gas, NV
5b. Description of Unit Involved							6a. No. of Employees in Unit:
Included: All Full Time, Regula						h),	120
Weapons Tech, AG	E mechan:	ics, Sup	port & Sched	ulers and Quality As:	surance (QA).		6b. Do a substantial number (30% or more) of the employees in the
Excluded: All managers, branch ma	nagers, regi	ional mana	agers, cooperate	e managers, all other prot	fessional employees,	guards and	unit wish to be represented by the
supervisors as defined by	y the Act.						Petitioner? Yes 🗸 No 🗌
Check One: 7a. Request f	or recognition	n as Bargai	ining Representa	tive was made on (Date)	By Petition and	Employer dec	lined recognition on or about
l \(\frac{1}{2}\)			no reply receive				
				epresentative and desires	certification under the	Act.	
8a. Name of Recognized or Certified	Bargaining .	Agent (If n	ione, so state).	8b. Address	·		i
So Tol No	1 8d Cal	II No		I en Eav No		Rf E-Mail Add	race
8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address						1633	
8g. Affiliation, if any			1				Date of Current or Most Recent
]		Contract, if any (Month, Da		
9. Is there now a strike or picketing at the Employer's establishment(s) involved? no If so, approximately how many employees are participating?							
9. Is there now a strike or picketing at the	ne Employer	s establish	ment(s) involved	' no li so, approx	amately now many em	ployees are pa	inticipating?
(Name of labor organization)				eted the Employer since (
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 empi	oyees in th	e unit described	in item 50 above. (ir none,	, so state)		ı
10a. Name		10b, Addr	222		10c. Tel. No.		10d. Cell No.
100.110					1		
					10e. Fax No.		10f. E-Mail Address
					ļ		
 Election Details: If the NLRB cond any such election. 	lucts an elec	tion in this	matter, state you	r position with respect to	11a, Election Type:	Manual	Mail Mixed Manual/Mail
11b. Election Date(s): 11c. Election Time(s):				· · · · · · · · · · · · · · · · · · ·	11d. Election Locati	on(s):	
E-Mailed 10/30/2019 and counted 11/27/2019							
12a. Full Name of Petitioner (Including local name and number) International Association of Machinists and Aerospace Workers, Local Lodg					4343 N. Rancho Dr		city, state, and ZIP code) as Vegas, NV 89130
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Association of Machinists and Aerospace Workers, AFL-CIO							
12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address							
(916) 542-3351		310-6989		1		carrillo@iama	aw.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.							
13a. Name and Title David W. M. Fujimoto, Attorney 13b. Address (street and number, city, state, and ZIP code) Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Sulte 200, Alameda, CA 94501							
13c. Tel No.	13d. C	ell No.		13e, Fax No.		13f. E-Mail Ac	
510-337-1001 510-337-1023 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)	Signature			Title		October 3	2019
David W. M. Fujimoto				Attorney		Locroper 3	, 2010

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.

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

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Fi ≘d				
28-RC-249609	10/8/2019				

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 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.

the employer and all other parties Case Procedures (Form NLRB 48										
PURPOSE OF THIS PETITION: I bargaining by Petitioner and Petit requests that the National Laboratory	ioner desires to be	certified as repres	entative of th	e employees. The Pe	titioner alleges	that the foll	owing circun	nstances exist and		
			2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1200 Summit Ave. Ste. 320 Forth Worth, TX. 76102							
3a. Employer Representative - Nar Jason Tolbert, Human Reso		3b. Add	dress <i>(if sam</i> Sam	e as 2b - state same): e	•					
3c. Tel. No. (760) 792-4674	3d. Cell No.		3e. Fax No).	No.	3f. E-Mail Address Jason.tolbert@aecom.com				
4a. Type of Establishment (Factory, Service Provider	mine, wholesaler, e	itc.)		4b. Principal Product or Service 5a, City and State where unit is Military Accessory Issue Items El Paso Texas				unit is loc⊒ted		
5b. Description of Unit Involved: Included: All hourly employees including Excluded: All supervisors as defined by t	he Act.		oly Tech Le	eads		6b. Do a s	er of Employee 2 ubstantial num employees in tented by the P	nber (30% =r more) the unit wish to be retitioner? ☑ Yes ☐ No		
Check One: 7a, Request for recon or about (Date) 7b. Petitioner is cu		(If no reply r	eceived, so	state).		nd Employer	declined recog	gnition		
8a. Name of Recognized or Certific	ed Bargaining Age	ent (If none, so sta	te) 8b. Ad	dress:						
8c. Tel. No.	8d. Cell No.	8e, Fax No.			8f. E-Mail	8f. E-Mail Address				
8g. Affiliation, if any:		8	h. Date of R	ecognition or Certifica		n 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)				
Is there now a strike or picketing a (Name of Labor Organization)	t the Employer's es	stablishment(s) inv	olved? No	If so, approx	imately how ma			th, Day, Year)		
Organizations or individuals other individuals known to have a representation.							es and other o	organizations and		
10a. Name	10b. A	Address		100		10c. Tel. No. 10d. C				
					10e, Fax N	10e, Fax No. 10f, E-Mail Address		ddress		
11. Election Details: If the NLRB co	nducts and election	n in this matter, sta	te your posit	ion with respect to an	y such election:	11a. Electio		☐ Mixe⊂ Manual/Mail		
11b, Election Date(s): October 25, 2019	11c. Election Time(s): 11:30 a.m. to 12:00 p.m.				11d. Election Location(s): Breakroom Bld #1107 Lufberry Rd. Fort Bliss TX.					
12a. Full Name of Petitioner (include International Union of Opera				12b. Address (street 6967 Commerce						
12c. Full name of national or internat International Union of Operatin	_		tioner is an a	ffiliate or constituent (if none, so state,):				
12d, Tel, No. (915) 771-0224	100			12f. Fax No. 12g. E-Mail Address (915) 771-9018						
13. Representative of the Petitions 13a. Name and Title: Butch Ballez, Organizer	r who will accept	service of all pap	13b. Addre	oses of the represer ess (street and numbe emmerce Street, I	r, city, State and	IZIP code):				
13c. Tel. No. (915) 771-0224	13d. Cell No. (915) 493-977	8	1	1		Address llez@local	351.com			
I declare that I have read the above	e petition and that	CONTRACTOR	re true to th	e best of my knowle						
Name (Print) Butch Ballez		Signature		2	Title Organizer			Date 10/8/2019		

WILLFUL FALSE STATEMENTS ON THIS PETITION-GAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1041)
PRIVACY ACT STATEMENT

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

Case No. 28-RC-249653

Date Filed Octoor

Date Filed October 8, 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

	d (3) Description of Repres			RB 4812). The show	ving of int	terest should only be filed		
with the NLRB and s	hould <u>not</u> be served on the	employer or a	any other party.					
bargaining by Petitioner	TITION: RC-CERTIFICATION OF and Petitioner desires to be certificated that the control of the certification is a second process of the certification in the certification is a second process of the certification in the certification is a second process of the certification in the certification is a second process of the certification in the certification is a second process of the certification of the cert	ied as representa	ative of the employees. The	Petitioner alleges that t	he followin	g circumstances exist and		
2a. Name of Employer	2a. Name of Employer 2b. Ad			it(s) involved (Street and				
Zenetex and Tyonek	, Joint Employers	612	Liberator Ave., Hanger 204 Cannon AFB, NM 88103					
3a. Employer Representa	ative - Name and Title	3b. Address (If same as	s 2b - state same)	777				
Cheryl Reyes, HR M	anager		1550 Hotel Circle	North, Suite 100 Sa	an Diego,	CA 92108		
3c. Tel. No.	3d. Cell No.		3e. Fax No. 3f. E			E-Mail Address		
(619) 552-3305			(703) 935-8360	ch	cheryl.reyes@zentex.com			
4a. Type of Establishment	(Factory, mine, wholesaler, etc.)	4b. Principal p	product or service	THE RESERVE	5a. City and State where unit is located:			
Government Contract					Canno	n AFB, NM		
5b. Description of Unit Ir	ivolved					6a. No. of Employees in Unit:		
Included: All Full	Time and Permanen	t Part Tim	e Aircraft Mecha	nics		5		
Excluded: Managers, Sup	ervisors, Clerical Workers, and all othe oyees as defined by the Act.				supervisors,	or more) of the employees in the unit wish to be represented by the Petitioner? Yes \(\sqrt{N} \) No		
H	Request for recognition as Barry (Date) Petitioner is currently recognized	(If no reply recei	ived, so state). No Rep	oly		lined recognition on or about		
None	or Certified Bargaining Agent (I	f none, so state	8b. Address					
8c. Tel No.	8d Cell No.		8e. Fax No.	8f. E-Mail Add		dress		
8g. Affiliation, if any			8h. Date of Recognition of	The state of the s		Date of Current or Most Recent y (Month, Day, Year)		
(Name of labor organiz		, has p	picketed the Employer since (
	tative interest in any employees in				entauves an	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 any such election.	e NLRB conducts an election in the	is matter, state y	your position with respect to	11a. Election Type: Manual Mail Mix		Mail Mixed Manual/Mail		
11b. Election Date(s): ASAP	11c. E	lection Time(s):		11d. Election Location(s):				
	ner (including local name and not Machinists and Aerospace W		odge 794	12b. Address (street and number, city, state, and ZIP code) 315 Pine St SE, Albuquerque, NM 87106				
	or international labor organization of Machinists and Aerospace Wo			nt (if none, so state)				
12d. Tel No. 505-242-9622	12e. Cell No. 505-604-8217		12f. Fax No.	12f. Fax No. 12g. E-Mail sburkland@				
13. Representative of the	Petitioner who will accept serv	ice of all papers	s for purposes of the repres					
13a. Name and Title Jas	on Hardwick, Grand Lodge F	Representative	13b. Address (street an 620 Coolidge Rd., Suite 130	d number, city, state, and	ZIP code)			
13c. Tel No.	13d. Cell No.				Bf. E-Mail Address			
916-985-8101	916-936-6013		916-985-8121	jhardwick@iamaw.org		maw.org		
I declare that I have read	the above petition and that the	statements are	true to the best of my know	wledge and belief.				
Name (Print)	Signature	11.	Title Grand Lodge Represer	ntative	Date 10/8/2019			

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

PRIVACY ACT STATEMENT

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LINITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE Case No. 28-RC-249801

Date Filed October 11, 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. 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2a. Name of Employer Zenetex and Tyonek, Joint Employers 612 Liberator Ave., Hanger 204 Cannon AFB, NM 88103 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Cheryl Reyes, HR Representative/Tina Bruce, Director of Human Resources 1550 Hotel Circle North, Suite 100 San Diego, CA 92108/229 Palmer Road Madison, AL 35758 3f. E-Mail Address cheryl.reyes@zenetex.com/tbruce@tyonek.com (703) 935-8360/(256)258-6292 (619) 552-3305/(256)258-0112 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal product or service Government Contractor Aircraft Maintenance Cannon AFB, NM 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All Full Time and Permanent Part Time Aircraft Mechanics 6b. Do a substantial number (30% or more) of the employees in the Excluded: Managers, Supervisors, Clerical Workers, and all other employees including professional employees, managerial employees, guards, supervisors unit wish to be represented by the and other employees as defined by the Act. Petitioner? Yes ✓ No Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about (Date) (If no reply received, so state). No Reply 7b. Petitioner is currently recognized as Bargaining Representative and desire 8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 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? 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. 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): 11:00AM - 12:00PM Conference Room, 612 Liberator Ave., Hanger 204 Cannon AFB, NM 88103 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Association of Machinists and Aerospace Workers, Local Lodge 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, Local Lodge 794 12d. Tel No. 12e. Cell No. 12g. E-Mail Address 12f Fax No. 505-242-9622 505-604-8217 sburkland@iamaw.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Jason Hardwick, Grand Lodge Representative 13b. Address (street and number, city, state, and ZIP code) 620 Coolidge Rd., Suite 130, Folsom, CA 95630 13c. Tel No 13e. Fax No. 13d. Cell No. 13f. E-Mail Address 916-985-8101 916-936-6013 916-985-8121 jhardwick@iamaw.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print)

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

10/11/2019

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UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

TIONAL LABOR RELATIONS BOAR

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
28-RC-249894	10/15/2019				

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) Palms Casino Resort 4321 West Flamingo Road, Las Vegas, NV 89103 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) Joseph Grazzini, Director of Engineering for Station Casinos Same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address (702) 942-7777 joseph.grazzini@stationcasinos.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Casino Casino Las Vegas, Nevada 5b. Description of Unit Involved 6a. No. of Employees in Unit: Included: All painters employed at the Palms Casino Resort 6b. Do a substantial number (30% Excluded: All other employees, guards and supervisors employed at the Palms Casino Resort or more) of the employees in the unit wish to be represented by the Petitioner? Yes V No 7a. Request for recognition as Bargaining Representative was made on (Date) 10/14/2019 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 8c. Tel No 8d Cell No. 8f. E-Mail Address 8e. Fax No. 8g. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? _________ If so, approximately how many employees are participating? , 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) 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. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): October 28, 2019 TBD Breakroom, 4321 West Flamingo Road, Las Vegas, NV 89103 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Painters District Council 16 1701 Whitney Mesa Drive, Henderson, NV 89014 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union of Painters and Allied Trades, AFL-CIO 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address (702) 769-9122 savannah@dc16.us 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 Date David A. Rosenfeld October 14, 2019 Attorney

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

PRIVACY ACT STATEMENT

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