ORM NLRB-502 (RC) (4-

15)					12 12 12 12 MI	dt-2241			
UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD					DO NO	T WRITE IN T	HIS SPACE Date Filed		
	RCPETITION				Case No 10-RC-237161 Date Filed 03/06/2019				
INSTRUCTIONS: Unless e-Filed in which the employer concerned certificate of service showing ser Position form (Form NLRB-505);	l is located. Th vice on the en	ne petition mus mployer and al	st be ac Il other	companied by parties name	y both a showing d in the petition o	of interest of: (1) the p	(see 6b below) and a betition; (2) Statement of		
should only be filed with the NLR	B and should <u>r</u>	not be served o	on the ei	nployer or any	y other party.				
1. PURPOSE OF THIS PETITIONRC CER bargaining by Petitioner and Petitioner desir National Labor Relations Board proceed ur	es to be certifled as	representative of th	e employe	es. The Petitioner	alleges that the follow				
2a. Name of Employer					t(s) involved (street and	d number, city	, state, zip code)		
TECHNICA LLC						CAMPBE	ELL, KY 42223		
3a. Employer Representative - Name a BRENDA MALICK - TRANSP	ORTATION N	MANAGER	(S	AME AS AB	s 2b - state same) OVE)	¥	ж		
3c.Tel. No.	3d. Cell No.		3e. Fa	ix No.		3d, E-Mail	Address A.G.MALICK.CTR@MAIL.MIL		
270-956-1418 4a, Type of Establishment (Factory, mine, w	the locales at a								
TRANSPORTATION AND L		4b. Principal pro		TIN AND F	REIGHT		y and State where unit is located; T. CAMPBELL, KY		
5b. Description of Unit Involved Included:							6a. No. of Employees in Unit: 4		
ALL FULL AND REGULAR PAI						ATION	6b. Do a substantial number (30% or more) of the employees in the		
Excluded: OFFICE CLERICAL EMPLOYEES, PRO	FESSIONAL EM	PLOYEES, MAN	AGERIAL	EMPLOYEES,	GUARDS, AND SUF	ERVISORS	unit wish to be represented by the Petitioner? Yes V No		
AS DEFINED IN THE ACT, Check One:									
about(date)	(if no reply receive acognized as Barg	ed, so state). aining Representa				gnition and E	mployer declined recognition on or		
8a. Name of Recognized or Certified Bargaining	Agent (If none, so s	itate).		8b. Address N/A					
8c. Tel. No. N/A	8d. Cell No. N/A		8e, Fax	No.		8f. E-Mail A N/A	ddress		
8g. Affiliation, if any N/A			8h Date N/A	of Recognition or	r Certification		n Date of Current or Most Recent any (<i>Month, Day</i> . Year)		
9. Is there now a strike or picketing at the E (Name of labor organization)		ment(s) Involved? the Employer since (roximately how many	employees a	re participating?		
10. Organizations or individuals other than F known to have a representative interest in an	Petitioner and those any employees in the	e named in items & a unit described in	8 and 9, w item 5b ab	hich have claimed ove, (<i>If none, s</i> o sta	d recognition as repre-	sentatives an	d other organizations and individuals		
10a. Name	10b, Add	lress		10c. Tel. No.			10d. Cell No.		
N/A	N/A	4			N/A 10e. Fax No.		N/A 10f. E Mail Address		
11. Election Details: If the NLRB conducts an el any such election.	ection in this matt	er, state your positi	tion with r	espect to	N/A 11a. Election Ty ✓ Manual	pe: Mail	Mixed Manual/Mail		
11b, Election Date(s):	11c. Ele	ection Time(s):			11d. Election Locat	لسما	Mixed Marida/Mari		
MARCH 27, 2019		00 AM 10:0	0 AM		BRIEFING ROOM #200 7162 HEDGEROW ROAD, FT. CAMPBELL, KY 42223				
12 a. Full Name of Petitioner (including local nam IAMAW, AFL-CIO	e and number)				12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011				
12c. Full name of national or international lat INTERNATIONAL ASSOCIA						CIO			
12d. Tel, No. 817-505-0100	12e, Cell No,			7-459-0107		12g, E-Mall	Address		
 Representative of the Petitioner who will accept 13a. Name and Title 	t service of all papers	s for purposes of the			we giv plate and 710				
JAMES R. LITTLE - GRAND LODGE SPE		NTATIVE	690	E. LAMAR	per, city, state, and ZIP cod BLVD, SUITE 5	BO, ARLIN	GTON, TX 76011		
13c, Tel, No. 817-505-0100	13d. Cell No. 682-401-7835			7-459-0107		13d. E-Mail JLITTL	Address E@IAMAW.ORG		
I declare that I have read the above Petition and t	nat the statements an	re true to the best of	my knowle	dge and belief.					
Name (Print) Signa	Jam	Ra	CE	GRAND LO	DGE REPRESEN	ITATIVE	DATE 3/06/2019		
WILLFUL FALSE STATE	MENTS ON THIS P			D BY FINE AND	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		LE 18, SECTION 1001)		
		PRI	VACY AC	TSTATEMENT					

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.0 § 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.

DRM NLRB-502 (RC)										
INM MEND-JUZ (NU)	UNITED STATES OF AMERICA					DO NOT WRITE IN THIS SPACE				
(2-18)		ONAL LABOR RELATIONS BOAF			Ca	se No. 10-RC-237852			Date Filed 03/18/2019	
NSTRUCTIONS: Unless e-Filed employer concerned is located. the employer and all other partic Case Procedures (Form NLRB 4	The petition r	nust be accomp	panied by 1) the period	/ both a sho tition: (2) St	owing of interest (see (atement of Position fo	5b below) and rm (Form NLF	a certificate RB-505); and	of service s (3) Descript	nowing service on tion of Representation	
1. PURPOSE OF THIS PETITION bargaining by Petitioner and Pe requests that the National La	titioner desires	CATION OF REF	RESEN	TATIVE - A sentative of the	substantial number of er e employees. The Petiti	nployees wish oner alleges f	to be represe that the follo	ented for purp	ooses of collective stances exist and	
2a. Name of Employer:			2b. Add	ress(es) of E	Establishment(s) involve					
United Campus Workers Workers of America Loo		nications	1000 000 000 000 000 000	Box 3814 ville, TN						
3a. Employer Representative - N Edward McDaniel, Pres	lame and Title: ident		3b. Add same	ress (if same	e as 2b - state same):					
^{3c.} Tel. No. 865-329-0085	3d. Cell No).		3e. Fax No		3f. E-Mail A presiden	ddress It@ucw-c	wa.org		
4a. Type of Establishment <i>(Factor</i> Union	y, mine, whole	saler, etc.)			al Product or Service enting campus wo	orkers	5a. City and Tenness		unit is located:	
5b. Description of Unit Involved Included: All full time and regular		employees					6a. Number 4	of Employee	s in Unit:	
Excluded: Guards and supervisors							of the er	nployees in th	ber (30% or more) ne unit wish to be etitioner? X Yes No	
Check One: X 7a. Request for on or about (Dat	recognition as te) NO YE	Bargaining Repr	no reply re	eceived, so s	state).			eclined recog		
7b. Petitioner is 8a. Name of Recognized or Cert					nd desires certification u	inder the Act.				
None	aneo bargaini	ng Agent (ii non	ie, so stat	te) 8b. Ad	uress.					
Bc. Tel. No.	8d. Cell No	0.		8e. Fax No).	8f. E-Mail A	ddress			
8g. Affiliation, if any:			8	h. Date of R	ecognition or Certificatio			rrent or Most Month, Day,		
9. Is there now a strike or picketin	g at the Emplo	yer's establishme	ent(s) invo	olved? No	If so, approxim	nately how man	ny employees	are participa	ting?	
(Name of Labor Organization)				<u></u>		, has picketed	the Employe	er since (Mon	th, Day, Year)	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re	ther than Petiti	oner and those n	amed in i	items 8 and 1	9, which have claimed re	, has picketed	the Employe	er since (Mon	th, Day, Year)	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re	ther than Petiti	oner and those n	amed in i	items 8 and 1	9, which have claimed re	, has picketed	the Employe epresentative state)	er since (Mon	th, Day, Year)	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name	ther than Petiti opresentative ir	oner and those n nterest in any em 10b. Address	amed in i ployees i	items 8 and 1	9, which have claimed rescribed in item 5b above	, has picketed ecognition as re e. (If none, so s 10c. Tel. No 10e. Fax N	I the Employe epresentative state)	er since (Mon s and other o	th, Day, Year) organizations and	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name 11. Election Details: If the NLRB	ther than Petiti	oner and those n nterest in any em 10b. Address election in this m	amed in i ployees in natter, sta	items 8 and 1	9, which have claimed rescribed in item 5b above	, has picketed ecognition as re 2. (If none, so s 10c. Tel. No 10e. Fax N such election:	the Employe epresentative state) o. 11a. Election	ar since (Mon s and other o 10d. Cell No 10f. E-Mail A 1 Type: I X Mail	th, Day, Year) organizations and	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name 11. Election Details: If the NLRB 11b. Election Date(s):	ther than Petiti presentative ir	oner and those n nterest in any em 10b. Address	amed in i ployees in natter, sta	items 8 and 1	9, which have claimed rescribed in item 5b above	, has picketed ecognition as re 2. (If none, so s 10c. Tel. No 10e. Fax N such election:	I the Employe epresentative state) o. 0.	ar since (Mon s and other o 10d. Cell No 10f. E-Mail A 1 Type: I X Mail	th, Day, Year) rganizations and	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name 11. Election Details: If the NLRB 11b. Election Date(s): 04/01/20 12a. Full Name of Petitioner (inc	ther than Petiti epresentative ir conducts and I 9 cluding local na	oner and those n nterest in any em 10b. Address election in this m 11c. Election Tr n/a	named in i ployees in natter, sta ime(s):	items 8 and 1	9, which have claimed rescribed in item 5b above	, has picketed ecognition as re a. (If none, so s 10c. Tel. No 10e. Fax N such election: 11d. Election n/a nd number, city	I the Employe epresentative state) 0. 0. 11a. Election 11a. Election Manua on Location(s	ar since (<i>Mon</i> s and other of 10d. Cell No 10f. E-Mail A h Type: I X Mail):	th, Day, Year) rganizations and	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name 11. Election Details: If the NLRB 11b. Election Date(s): 12a. Full Name of Petitioner (inc Southern Organizers Un 12c. Full name of national or inter	ther than Petiti epresentative in conducts and I 9 cluding local na nited	oner and those n nterest in any em 10b. Address election in this m 11c. Election Ti 11/a ame and number,	named in i ployees in natter, sta ime(s):):	tems 8 and 1 n the unit de	9, which have claimed rescribed in item 5b above tion with respect to any standard respect to any stan	has picketed ecognition as re- c. (If none, so s 10c. Tel. No 10e. Fax N such election: 11d. Election n/a nd number, city 7212	I the Employe epresentative state) o. 	ar since (<i>Mon</i> s and other of 10d. Cell No 10f. E-Mail A h Type: I X Mail):	th, Day, Year) rganizations and	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name 11. Election Details: If the NLRB 11b. Election Date(s): 04/01/20 12a. Full Name of Petitioner (inc Southern Organizers Un 12c. Full name of national or inter None 12d. Tel. No.	ther than Petiti appresentative in conducts and I G cluding local na nited national labor	oner and those n nterest in any em 10b. Address election in this m 11c. Election Ti n/a ame and number, organization of w No.	named in i ployees in natter, sta ime(s):):	tioner is an a	9, which have claimed rescribed in item 5b above scribed in item 5b above tion with respect to any s PO Box 121436 Nashville, TN 3 affiliate or constituent (if	has picketed ecognition as re (<i>If none, so s</i> 10c. Tel. No 10e. Fax N such election: 11d. Election n/a nd number, city 7212 none, so state, 12g. E-Mai souther	I the Employe epresentative state) 0. 11a. Election 11a. Election 11a. Clection 11a. C	ar since (<i>Mon</i> s and other o 10d. Cell No 10f. E-Mail A 1 Type: I X Mail): ZIP code):	th, Day, Year) rganizations and	
(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name 11. Election Details: If the NLRB 11b. Election Date(s): 04/01/20 12a. Full Name of Petitioner (ind Southern Organizers Un 12c. Full name of national or inter None 12d. Tel. No. 13. Representative of the Petitio 13a. Name and Title:	ther than Petiti appresentative in conducts and I G cluding local na nited national labor	oner and those n nterest in any em 10b. Address election in this m 11c. Election Ti n/a ame and number, organization of w No.	named in i ployees in natter, sta ime(s):):	tioner is an a 12f. Fax N pers for pur	9, which have claimed rescribed in item 5b above scribed in item 5b above tion with respect to any s PO Box 121436 Nashville, TN 3 affiliate or constituent (if	has picketed ecognition as re- e. (If none, so s 10c. Tel. No 10e. Fax N such election: 11d. Election n/a nd number, city 7212 none, so state, 12g. E-Mai Souther ation proceed city, State and	I the Employe epresentative state) o. 0. 11a. Election 11a. Election Manua on Location(s y, State and 2): il Address norganize ling. 12IP code):	ar since (<i>Mon</i> s and other o 10d. Cell No 10f. E-Mail A 1 Type: I X Mail): ZIP code):	th, Day, Year) organizations and 	
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(Name of Labor Organization) 10. Organizations or individuals of individuals known to have a re None 10a. Name 11. Election Details: If the NLRB 11b. Election Date(s): 04/01/20 12a. Full Name of Petitioner (inc Southern Organizers Un 12c. Full name of national or inter None 12d. Tel. No. 13. Representative of the Petitic 13a. Name and Title: Dana Smith	ther than Petiti presentative in conducts and l 9 cluding local na nited national labor 12e. Cell 1 248-47	oner and those n nterest in any em 10b. Address election in this m 11c. Election Tr n/a arre and number, organization of w No. accept service of No. 0-5572	iamed in i ployees in natter, sta ime(s):): hich Peti bf all pap	tiems 8 and 1 n the unit de te your posit 12f. Fax N 12f. Fax N 12b. Addr 2005A 13e. Fax N	9, which have claimed rescribed in item 5b above scribed in item 5b above tion with respect to any s PO Box 121436 Nashville, TN 3 affiliate or constituent (if lo. poses of the represent ess (street and number, Ashwood Ave, Nashvo.	has picketed ecognition as re- e. (If none, so s 10c. Tel. No 10e. Fax N such election: 11d. Election n/a none, so state, 2212 none, so state, 12g. E-Mai souther ation proceed city, State and shville, TN	I the Employe epresentative state) o.	ar since (Moni s and other o 10d. Cell No 10f. E-Mail A 1 Type: I X Mail): ZIP code): ersunited(th, Day, Year) rganizations and	

F

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.

UNITED STATES		DO NOT WRITE IN THIS SPACE								
NATIONAL LABOR	ARD	Case No.								
RC PETITION 10-RC-238289 03/25/2019										
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	s named in the petition	on of: (1) the petit	tion; (2) Sta	tement of Position form				
(Form NLRB-505); and (3) Descript	tion of Repres	entation Case P	rocedures (Form NL	RB 4812). The sh	nowing of ir	nterest should only be filed				
with the NLRB and should not be s	served on the	employer or any	other party.							
1. PURPOSE OF THIS PETITION: RC-CE	RTIFICATION OF	REPRESENTATIV	/E - A substantial number	of employees wish to	be represent	ed for purposes of collective				
bargaining by Petitioner and Petitioner d	esires to be certif	ed as representa ive	e of the employees. The	Petitioner alleges th	at the followi	ng circumstances exist and				
2a. Name of Employer	requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.									
	1000 Svicco Drivo									
3a. Employer Representative – Name and	AL Caléra 35040-									
Frank Schuster	The		1000 Sysco Drive AL Calera 35040-							
3c. Tel. No.	3d. Cell No.		AL Caléra 35040- 3e. Fax No.	I	3f. E-Mail Ad	dress				
(205) 668-0001	Su. Cell NO.		JC. I dA INU.		f.schuster@sy					
4a. Type of Establishment (Factory, mine, w	wholesaler etc.)	4b. Principal prod	luct or service			y and State where unit is located:				
Food Processing	molesaler, etc.)	4b. Philopai prou	Food transportatio	n	5a. 01	Calera, AL				
5b. Description of Unit Involved				11		6a. No. of Employees in Unit:				
l						68				
Included: See Attached Page 2 for addition	nal details					6b. Do a substantial number (30%				
						or more) of the employees in he				
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				and	d Employer de	eclined recognition on or about				
		(If no reply received	· ·							
			presentative and desires	certification under the	Act.					
8a. Name of Recognized or Certified Bar	gaining Agent (i	r none, so state).	8b. Address							
8c. Tel No.	8d Cell No.		8e. Fax No.		8f. E-Mail Ad	Idress				
8g. Affiliation, if any		8	8h. Date of Recognition or	r Certification		Date of Current or Most Recent				
					Contract, If a	iny (Month, Day, Year)				
9. Is there now a strike or picketing at the E	mployoda ostabli	abmont(a) involved?		imately here many or		articipating?				
(Name of labor organization)										
10. Organizations or individuals other than					resentatives a	nd other organizations and individuals				
known to have a representative interest in a	any employees in	the unit described in	n item 5b above. (If none,	, so state)						
10a, Name	10b. Ad	dress		10c. Tel. No.		10d, Cell No.				
ioa. Name	100. Au	01035								
				10e. Fax No.		10f. E-Mail Address				
11. Election Details: If the NLRB conducts	s an election in th	is matter, state your	position with respect to	11a. Election Type:	Manual	Mail Mixed Manual/Mail				
any such election.	L 44- E									
11b. Election Date(s): 4/12/19	11C. E 3 pm -	lection Time(s): 7 pm		11d. Election Loca MP1.2 and 3 Confe						
						, city, state, and ZIP code)				
12a. Full Name of Petitioner (including lo Ricardo' Hernandez Teamsters Local 612	ical name and m	aniber)		25 Louisana Ave DC Washington 200		, ony, state, and zir code)				
12c. Full name of national or international la			s an affiliate or constituen		UI-					
International Brotherhood of Teamsters			10f Eav No		40g E Moil /	Addroop				
12d. Tel No. (202) 624-6800	12e. Cell No. (202) 497-1796		12f. Fax No. (205) 945-9454		12g. E-Mail / rhernandez@	Address Øteamster.org				
	(202) 624-6800 (202) 497-1796 (205) 945-9454 rhernandez@teamster.org									
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title 13b. Address (street and number, city, state, and ZIP code)										
	will accept serv	ice of all papers for		d number, city, state, a	and ZIP code)	•				
	will accept servi 13d. Cell No.	ice of all papers for		d number, city, state, a	and ZIP code) 13f. E-Mail A					
13a. Name and Title 13c. Tel No.	13d. Cell No.		13b. Address (street and 13e. Fax No.							
13a. Name and Title 13c. Tel No. I declare that I have read the above petit	13d. Cell No.		13b. Address (street and 13e. Fax No. e to the best of my know		13f. E-Mail A					
13a. Name and Title 13c. Tel No. I declare that I have read the above petiti Name (Print)	13d. Cell No.	statements are true	13b. Address (street and 13e. Fax No.		13f. E-Mail A					

PRIVACY ACT STATEMENT

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

DO NOT WRITE IN THIS SPACE

Attachment

	Date
10-RC-238289	

Case

Filed 03/25/2019

Employees Included All full time and part time warehouse workers

Employees Excluded

All other workers and security guards as defined by the act.

FORM NLRB-502 (RC) UNITED STATES OF AMERICA				ſ		DO NOT	WRITE IN THIS SPAC	E	
(2-18)	NATIONAL LABO	LABOR RELATIONS BOARD			Case No.	se No. 10-RC-238326 Date Filed 03/25/20			
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: I bargaining by Petitioner and Petit requests that the National Labo	ioner desires to be	certified as represe	entative of th	ne employees. The P	etitioner alle	ges that the fo	llowing circumstance		
2a. Name of Employer: Center Stage Entertainme	1374		Establishment(s) invo chtree Street, N 30309		nd number, Cil	y, State, ZIP code):			
3a. Employer Representative - Nar Josh Antonucci, Senior Pa	3b. Add Same	bb. Address (if same as 2b - state same):							
3c. Tel. No. 404-885-1365	3d. Cell No.		3e. Fax No 404-88		3f. E-N	ail Address			
4a. Type of Establishment (Factory, a Entertainment Venue	mine, wholesaler, e	etc.)		al Product or Service and entertainme		5a. City a Atlant	nd State where unit is l a, GA	ocated:	
5b. Description of Unit Involved: Included: stagehands, riggers, sound		ne and regular ard operators			forklift	25	er of Employees in Un	t:	
Excluded: All supervisors and guard	_	-		-	operato	6b. Do a of the	substantial number (30 employees in the unit sented by the Petitioner	wish to be	
Check One: 7a. Request for rec on or about (Date) 7b. Petitioner is cur		(If no reply r	eceived, so	state).	on under the		declined recognition		
8a. Name of Recognized or Certific None									
8c. Tel. No.	8d. Cell No.		8e. Fax No	D.	8f. E-N	8f. E-Mail Address			
8g. Affiliation, if any:				ecognition or Certifica			Current or Most (Month, Day, Year)		
9. Is there now a strike or picketing a	t the Employer's es	stablishment(s) invo	olved? No	lf so, appro	-		es are participating?		
(Name of Labor Organization) 10. Organizations or individuals othe	then Detitioner en	d these second is it	toma 9 and 1	0 which have alaima			yer since (Month, Day,		
individuals known to have a repre									
10a. Name	10b. A	ddress			10c. Te		10d. Cell No.		
11. Election Details: If the NLRB co	nducts and election	in this matter stat		tion with respect to a	10e. F		10f. E-Mail Address		
11b. Election Date(s):		ection Time(s):				ection Location	ial 🔀 Mail 🗌 Mib	ed Manual/Mail	
April 12, 2019 12a. Full Name of Petitioner (includ	Ball	ots received t	by 5:00 p).M. 12b. Address (<i>stree</i>	mail	ballot			
International Alliance of T Local 927	Theatrical and	l Stage Emplo	-	449 and 1/2, N Atlanta, GA 3	Moreland 0307	Avenue, N			
12c. Full name of national or internat International Alliance of	Theatrical and		oyees (IA	ATSE)			·····		
12d. Tel. No. 404-870-9911	12e. Cell No.	·	12f. Fax N		ba@	12g. E-Mail Address ba@iatse927.org			
13. Representative of the Petitione 13a. Name and Title: Nicolas M. Stanojevich	r who will accept	service of all pap	apers for purposes of the representat 13b. Address (street and number, ci Quinn, Connor, Weaver, Da 3516 Covington Highway, I			and ZIP code): Rouco LLH , GA 30032)		
13c. Tel. No. 404-299-1211, ext 121	13d. Cell No.		13e. Fax N 404-29	9-1288	nstar	<u> </u>	lcwdr.com		
I declare that I have read the above Name (Print)	e petition and that	the statements a	re true to th	he best of my knowl	edge and be	lief.		Date	
Nicolas M. Stanojevich			h	h	Attorne	¥		3/25/19	

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 *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 STATES OF AMERICA						DO NOT W	RITE IN THIS	SPACE	
(2-18)		OR RELATIONS BO	Case No. 10	e No. 10-RC-238340 Date Filed 03/25/2019					
INSTRUCTIONS: Unless e-Filed us employer concerned is located. Ti the employer and all other parties Case Procedures (Form NLRB 481	he petition must named in the pe	be accompanied l tition of: (1) the p	by both a sh etition; (2) S	owing of interest (se tatement of Position	ee 6b below) and form (Form NLI	l a certificat RB-505); an	e of service sh d (3) Descripti	owing service on on of Representation	
1. PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Labo	oner desires to b	e certified as repres	entative of th	ne employees. The Pe	etitioner alleges	that the foli	owing circums	tances exist and	
2a, Name of Employer: Rival Entertainment LLC	1374	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1374 W. Peachtree Street, NW Atlanta, GA 30309							
3a. Employer Representative - Nar Josh Antonucci, Senior Pa		3b. Address (if same as 2b - state same): Same							
3c. Tel. No. 404-885-1365	3d. Cell No.		3e. Fax No 404-88		3f. E-Mail A	ddress			
4a. Type of Establishment (Factory, I Music, entertainment and		etc.)		al Product or Service entertainment a		5a. City an Atlanta	d State where u a, GA	unit is located:	
5b. Description of Unit Involved: Included: stagehands, riggers, sound		id regular part-		rs nushers fork	lft_site ons	6a. Numbe 25	er of Employees	in Unit:	
Excluded: All supervisors and guard	-	-		-	. –	of the e	mployees in the	er (30% or more) e unit wish to be titioner? [x] Yes [] No	
Check One: 7a. Request for rec on or about (Date)		(If no reply	received, so	state).			declined recogn		
7b. Petitioner is cui 8a. Name of Recognized or Certific None				······	in under the Act.				
8c. Tel. No.	8d. Cell No.		8e. Fax No	D.	8f. E-Mail A	8f. E-Mail Address			
8g. Affiliation, if any:		6	h. Date of R	ecognition or Certifica			urrent or Most (Month, Day, Y	ear)	
9. Is there now a strike or picketing a	t the Employer's o	establishment(s) inv	olved? No	If so, approx	ximately how mar		• •	·	
(Name of Labor Organization) 10. Organizations or individuals other	then Detitioner of	ad these named is	itomo 9 and				er since (Month		
individuals known to have a repre									
10a. Name	10b.	Address			10c. Tel. No	10c. Tel. No.			
			,		10e. Fax N		10f. E-Mail Ad	dress	
11. Election Details: If the NLRB co			tte your posi	tion with respect to an		11a. Electio	al 🔀 Mait	Mixed Manual/Mail	
11b. Election Date(s): April 12, 2019	Bal	Election Time(s): lots received	by 5:00 p		11d. Election Location(s): mail ballot set and number, city, State and ZIP code):				
12a. Full Name of Petitioner (includ International Alliance of T Local 927	Theatrical an	d Stage Empl	- , 	449 and 1/2, N Atlanta, GA 3	Ioreland Av 0307	enue, NI		5	
12c. Full name of national or internat International Alliance of					(if none, so state)	:			
12d. Tel. No. 404-870-9911	12e. Cell No.		12f. Fax N	0.		12g. E-Mail Address ba@iatse927.org			
13. Representative of the Petitione 13a. Name and Title: Nicolas M. Stanojevich	r who will accep	t service of all par	13b. Addre Quinn, (poses of the represe ess (street and numbe Connor, Weaver, ovington Highwa	er, city, State and Davies & Ro	<i>ZIP code):</i> Puco LLP			
13c. Tel. No. 404-299-1211, ext 121	13d. Cell No.		13e. Fax M 404-29	9-1288			cwdr.com		
I declare that I have read the above Name (Print)	e petition and the	at the statements a	are true to t	he best of my knowl	edge and belief. Title			Date	
Nicolas M. Stanojevich	<u> </u>	Oignature	h	L	Attorney			Date 3/25/19	

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 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.

ORM NLRB-502 (RC) (4-

15) UNITED STATES	ir	DO NOT WRITE IN THIS SPACE							
NATIONAL LABOR RCPET	Case No Date Filed 03/26/2019								
INSTRUCTIONS: Unless e-Filed using the Agency's website, <u>www.nlrb.gov</u> , submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should <u>not</u> be served on the employer or any other party.									
1. PURPOSE OF THIS PETITIONRC-CERT1FICATION 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) TECHNICA LLC 5210 8 TH AND DESERT STORM, FT. CAMPBELL, KY 42223									
3a. Employer Representative - Name an LARRY BASDEN		(SA	AME AS ABO	2b - state same) OVE)					
3c.Tel. No. 270-798-6754	3d. Cel	l No.	3e. Fax	No.			.D.BASDEN.CTR@MAIL.MIL		
4a. Type of Establishment <i>(Factory, mine, w</i> SUPPLY AND LOGISTICS				ARY GEAR			ity and State where unit is located: FT. CAMPBELL, KY		
5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART TIME HOURLY EMPLOYEES TO INCLUDE: ALL INSTALLATION 6b. Do a substantial number (3) SUPPLY DIVISION SUPPLY TECHNICIANS. Excluded:									
OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT. Check One: 7a. Request for recognition as Bargaining Representative was made on Petition will serve as request for recognition and Employer declined recognition on or about (date) (if no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.									
8a. Name of Recognized or Certified Bargaining NONE				8b. Address N/A					
8c. Tel. No. N/A	8d. Cel N/A		8e. Fax N/A			8f. E-Mail N/A			
8g. Affiliation, if any N/A			8h. Date c N/A	Contract if any (Month Day You			ion Date of Current or Most Recent f any (<i>Month, Day</i> . Year)		
9. Is there now a strike or picketing at the En (Name of labor organization)	, ha	as picketed the Employer since (I	Nonth, Day,	Year)			are participating?		
10. Organizations or individuals other than P known to have a representative interest in an					^{te)} NONE	sentatives a			
10a. Name		10b. Address			10c. Tel. No. N/A		10d. Cell No. N/A		
N/A		N/A			10e. Fax No. N/A		10f. E-Mail Address N/A		
11. Election Details: If the NLRB conducts an el any such election.	ection in		ion with res	spect to	11a. Election Ty ✓ Manual	Mail	Mixed Manual/Mail		
11b. Election Date(s): APRIL 22, 2019		11c. Election Time(s): 9:00 AM - 10:0	0 AM		11d. Election Location(s): COMPUTER ROOM BUILDING 5210 8 TH AND DESERT STORM, FT. CAMPBELL, KY 42223				
12 a. Full Name of Petitioner (including local nam IAMAW, AFL-CIO					690 E. LAMAR		er, city, state, and ZIP code) UITE 580, ARLINGTON, TX 76011		
12c. Full name of national or international lab INTERNATIONAL ASSOCIA	TION	OF MACHINISTS AN	ID AER	OSPACE Ŵ					
12d. Tel. No. 817-505-0100	12e. Ce	220-2490-220	350.147.04	-459-0107		12g. E-Mai	il Address		
 Representative of the Petitioner who will accep 13a. Name and Title 	t service o	of all papers for purposes of the			per, city, state, and ZIP cox	de)			
JAMES R. LITTLE – GRAND LODGE SPE	CIAL RI	EPRESENTATIVE	690	E. LAMAR I	BLVD, SUITE 5	80, ARLI	INGTON, TX 76011		
13c. Tel. No. 817-505-0100	13d. Cel	I No. 01-7835	13e. Fax	: No. 7-459-0107		13d. E-Mai	il Address 'LE@IAMAW.ORG		
I declare that I have read the above Petition and the						JUIT			
Name (Print) Signa	ature	210		Title			DATE		
JAMES R. LITTLE	MENTS	ON THIS PETITION CAN BE	PUNISHE		DGE REPRESEN		3/26/2019		
				STATEMENT					

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