

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

10-RC-241374

Date Filed

May 13, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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: Southern Coalition for Social Justice		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1415 West Highway 54, Suite 101 Durham, NC 27707	
3a. Employer Representative - Name and Title: Dr. Kareem Crayton, Executive Director		3b. Address (if same as 2b - state same): Same	

3c. Tel. No. 919-323-3380	3d. Cell No. Unknown	3e. Fax No. 919-323-3942	3f. E-Mail Address KAREEM@SCSJ.ORG
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Non-Profit Advocacy Organization		4b. Principal Product or Service Advocacy and Legal Services	5a. City and State where unit is located: Durham, NC

5b. Description of Unit Involved: Included: See Attached. Excluded: See Attached.		6a. Number of Employees in Unit: 13	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 4/19/19 and Employer declined recognition on or about (Date) Non-responsive (if no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state) None.	8b. Address:
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8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____
(Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None.

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: NLRB
11a. Election Type:
 Manual Mail Mixed Manual/Mail

11b. Election Date(s): May 29, 2019	11c. Election Time(s): All Day	11d. Election Location(s): SCSJ Office
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12a. Full Name of Petitioner (including local name and number): National Organization of Legal Services Workers, UAW Local 2320	12b. Address (street and number, city, State and ZIP code): 256 West 38th Street, Suite 705 New York, NY 10018
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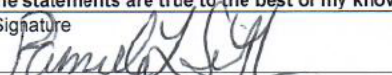
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
United Automobile, Aerospace, and Agricultural Implement Workers of America

12d. Tel. No. 212-228-0992	12e. Cell No. 410-858-7780	12f. Fax No. 877-712-4742	12g. E-Mail Address psmithnolsw@gmail.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Pamela L. Smith, President, NOLSW, UAW Local 2320		13b. Address (street and number, city, State and ZIP code): 256 West 38th Street, Suite 705 New York, NY 10018	

13c. Tel. No. 212-228-0992	13d. Cell No. 410-858-7780	13e. Fax No. 877-712-4742	13f. E-Mail Address psmithnolsw@gmail.com
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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) Pamela L. Smith	Signature 	Title President, NOLSW, UAW Local 2320	Date 5/13/19
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

**NLRB RC Petition
Form NLRB 502-RC**

Question 5(b): Description of Unit Involved

The following positions, organized by project, are INCLUDED in the proposed bargaining unit:

Voting Rights:

Voting Rights Staff Attorney
SOLVE Fellow
Paralegal

Criminal Justice:

Criminal Justice Staff Attorney
Criminal Justice Staff Attorney-Clean Slate*
Community Organizer

Youth Justice Project:

Project Director
Co-Director*

Advocacy Coordinator
Demographer and Data Analyst
Development Director*

The following positions, organized by project, are EXCLUDED from the proposed bargaining unit:

Executive Director
Deputy Director
Senior VR Attorney
Senior CJ Attorney
Communications Director
CFO
Office Manager

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
10-RC-241639

Date Filed
May 17, 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: Nestle Purina PetCare		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 5001 Fayetteville Rd, Fairburn, GA 30213	
3a. Employer Representative - Name and Title: Jon Davison - HR Manager		3b. Address (if same as 2b - state same): Same	

3c. Tel. No. 678-479-3591	3d. Cell No. 309-830-6364	3e. Fax No.	3f. E-Mail Address jonathan.davison@purina.nestle.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Factory	4b. Principal Product or Service Pet Food	5a. City and State where unit is located: Fairburn GA
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5b. Description of Unit Involved: Included: All Full time and Part time Quality Assurance Employees Excluded: All other employees, temporary, professional, office clerical, managers, guards, supervisor	6a. Number of Employees in Unit: 16	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Check One: **7a. Request for recognition as Bargaining Representative was made on (Date) 5-17-19 and Employer declined recognition on or about (Date) No Reply (If no reply received, so state).**
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state) N/A	8b. Address: N/A
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8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
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8g. Affiliation, if any: N/A	8h. Date of Recognition or Certification N/A	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) N/A
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in Items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in Item 5b above. (If none, so state)
N/A

10a. Name N/A	10b. Address N/A	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: Manual Mail Mixed Manual/Mail

11b. Election Date(s): June 4, 2019	11c. Election Time(s): 6:30 am to 7:30 am & 2:30pm to 3:30pm	11d. Election Location(s): Processing Maintenance Training Room
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12a. Full Name of Petitioner (including local name and number): Bakery, Confectionery, Tobacco Workers and Grain Millers Local Union 42	12b. Address (street and number, city, State and ZIP code): 1030 Dill Avenue SW Atlanta, GA 30310
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
Bakery, Confectionery, Tobacco Workers and Grain Millers International Union, AFLCIO, CLC

12d. Tel. No. 404-755-3553	12e. Cell No. 470-241-3384	12f. Fax No. 404-753-8111	12g. E-Mail Address bctgm42@yahoo.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.	
13a. Name and Title: Darrell Copeland - Organizer	13b. Address (street and number, city, State and ZIP code): 1030 Dill Avenue SW Atlanta, GA 30310

13c. Tel. No.	13d. Cell No. 470-347-2268	13e. Fax No.	13f. E-Mail Address d3copeland@gmail.com
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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) Darrell Copeland	Signature 	Title Local 42 - Organizer	Date 5-17-19
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-241960	Date Filed 05/22/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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 Volkswagen Group of America Chattanooga Operations, LLC	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 8001 Volkswagen Drive, Chattanooga, TN 37421
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3a. Employer Representative - Name and Title Nicole Koesling, Sr. VP of HR	3b. Address (If same as 2b - state same) 8001 Volkswagen Drive, Chattanooga, TN 37421
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3c. Tel. No. 423-320-0767	3d. Cell No.	3e. Fax No.	3f. E-Mail Address nicole.koesling@vw.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Automobile Manufacturer	4b. Principal product or service Automobiles	5a. City and State where unit is located: Chattanooga, TN
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5b. Description of Unit Involved Included: See attachment Excluded: See attachment	6a. No. of Employees in Unit: Approx. 1790	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 4/9/19 and Employer declined recognition on or about 4/16/19 (Date) (If no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None	8b. Address
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8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. **Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: Manual Mail Mixed Manual/Mail

11b. Election Date(s): See attachment	11c. Election Time(s): See attachment	11d. Election Location(s): Conference Center
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12a. Full Name of Petitioner (including local name and number) International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (UAW)	12b. Address (street and number, city, state, and ZIP code) 8000 East Jefferson Avenue, Detroit, MI 48214
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

12d. Tel No.	12e. Cell No.	12f. Fax No.	12g. E-Mail Address
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title Michael B. Schoenfeld, Attorney	13b. Address (street and number, city, state, and ZIP code) Stanford Fagan LLC, 2540 Lakewood Ave SW, Atlanta, GA 30315
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13c. Tel No. 404-622-0521, ext. 2244	13d. Cell No.	13e. Fax No.	13f. E-Mail Address michaels@sfglawyers.com
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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) Michael B. Schoenfeld	Signature s/ Michael B. Schoenfeld	Title Attorney	Date May 22, 2019
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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.

ATTACHMENT

5b. All full-time and regular part-time production and maintenance employees employed by Volkswagen Group of America Chattanooga Operations, LLC, at its facility located at 8001 Volkswagen Drive, Chattanooga, TN 37421, including Production Team Members, Skilled Team Members, Production Team Leaders and Skilled Team Leaders but excluding all Specialists, Technicians, plant clerical employees, office clerical employees, engineers, purchasing and inventory employees, all temporary and casual employees, all employees employed by contractors, employee leasing companies, and/or temporary agencies, all professional employees, and all guards, managers and supervisors as defined in the Act.

11b. June 12, 13, and 14, 2019

11c. June 12: 4:45 am – 9 am
 3:30 pm – 8 pm
 11:30 pm – 1 am

June 13: 4:45 am – 9 am
 3:30 pm – 8 pm

June 14: 6 pm – 8:30 pm

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RC-242273	Date Filed May 29, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.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: Adams Oldcastle	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 351 Haileys Ferry Road Lilesville, NC28091
3a. Employer Representative - Name and Title: Tim Little, Production Manager	3b. Address (if same as 2b - state same): same

3c. Tel. No. 704-848-4141	3d. Cell No.	3e. Fax No.	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Construction-raw Materials	4b. Principal Product or Service concrete supplies	5a. City and State where unit is located: Lilesville, NC
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5b. Description of Unit Involved: Included: All full and Part-time drivers Excluded: Plant employees, mechanics, and managers	6a. Number of Employees in Unit: 15	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about (Date) _____ (if no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None	8b. Address:
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8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any:	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: Manual Mail Mixed Manual/Mail

11b. Election Date(s): June 25, 2019	11c. Election Time(s): 6:00 -8:00 AM 6:00 to 8:00 PM	11d. Election Location(s): 351 Haileys Ferry Road, Lilesville NC 28091
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12a. Full Name of Petitioner (including local name and number): Teamsters Local Union No. 71	12b. Address (street and number, city, State and ZIP code): 2529 Beltway Blvd. Charlotte, NC 28214
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
International Brotherhood of Teamsters

12d. Tel. No. 704-596-2475	12e. Cell No. 704-363-6493	12f. Fax No. 704-597-1520	12g. E-Mail Address ctylerspapa@aol.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.	
13a. Name and Title: Ernest Wrenn, Secretary-Treasurer	13b. Address (street and number, city, State and ZIP code): 2529 Beltway Blvd, Charlotte, NC 28214

13c. Tel. No. 704-596-2475	13d. Cell No. 704-363-6493	13e. Fax No. 704-597-1520	13f. E-Mail Address ctylerspapa@aol.com
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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) Ernest K. Wrenn	Signature 	Title Secretary-Treasurer	Date 05/28/2019
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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 OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RD PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RD-242375	Date Filed May 30, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, [redacted], submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 7 below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RD-DECERTIFICATION (REMOVAL OF REPRESENTATIVE) - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer The Brier		2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) 979 Rocky Hill rd Ronceverte WV 24970	
3a. Employer Representative - Name and Title Nathan Hanshew CEO		3b. Address (if same as 2b - state same) same	
3c. Tel. No. 304-645-7270	3d. Fax No. 304-645-7284	3e. Cell No. 704-840-9966	3f. E-Mail Address nhanshew@thebrierwv.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) nursing home-		4b. Principal product or service short/long term care and therapy	
5a. Description of Unit Involved Included: bargaining units: dietary aides/cooks, laundry, housekeeping, CNA's Excluded: management, maintenance, activities, nurses, PRN employees, travel agency employees			5b. City and State where unit is located:
6. No. of Employees in Unit 40	7. Do a substantial number (30% or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
8a. Name of Recognized or Certified Bargaining Agent Leigh Ann Day		8b. Affiliation, if any	
8c. Address 1217 Adams ave Huntington WV 25704		8d. Tel. No. 866-419-7348	8e. Cell No. 304-634-8720
		8f. Fax No. 304-522-2885	8g. E-Mail Address laday@seiul199.org
9. Date of Recognition or Certification:		10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) April 1, 2019	
11a. Is there now a strike or picketing at the Employer's establishment(s) involved? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		11b. If so, approximately how many employees are participating?	
11c. The Employer has been picketed by or on behalf of (Insert Name) (Insert Address)		a labor organization, of since (Month, Day, Year)	
12. Organizations or individuals other than those named in Items 8 and 11c, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in Item 5 above. (If none, so state)			
12a. Name	12b. Address	12c. Tel. No.	12d. Fax No.
		12e. Cell No.	12f. E-Mail Address
13. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		13a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
13b. Election Date(s) 6-10-19	13c. Election Time(s) 7a-3p 4p-11p	13d. Election Location(s) conference room at the brier	
14. Full Name of Defendant (b) (6), (b) (7)(C)			
14a. Address (Street and number, city, state, ZIP code) (b) (6), (b) (7)(C)		14b. Tel. No.	14c. Cell No. (b) (6), (b) (7)(C)
		14d. Fax No.	14e. E-Mail Address (b) (6), (b) (7)(C)
14f. Affiliation, if any			
15. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. (b) (6), (b) (7)(C)			
15c. Address (Street and number, city, state, ZIP code) (b) (6), (b) (7)(C)		15d. Tel. No.	15e. Fax No.
		15f. Cell No. (b) (6), (b) (7)(C)	15g. E-Mail Address (b) (6), (b) (7)(C)
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) (b) (6), (b) (7)(C)	Sig (b) (6), (b) (7)(C)	Title (b) (6), (b) (7)(C)	Date Filed 5-28-19

WILLFUL FALSE STATEMENTS ON THIS PETITION OR FAILURE TO SIGN AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)