UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE									
NATIONAL LABOR RELATIONS BOARDCase No.Date FiledFirst Amended RC PETITION05-RC-24559708/02/2019									
INSTRUCTIONS: Unless e-Filed				nit an original of thi	s Petition to a	n NLRB office in the Region			
in which the employer concern									
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 F									
2a. Name of Employer		2b. A	ddress(es) of Establish	ment(s) involved (Street	and number, city	, State, ZIP code)			
Sysco Hampton Roads , Inc.		7000		llevard, Suffolk, VA	23435				
3a. Employer Representative – Name	e and Title			ne as 2b – state same)					
Scott Thibodeau			SAME AS ABO	VE					
President 3c. Tel. No.	3d. Cell No.		3e. Fax No.	· · ·	3f. E-Mail Add	rass			
(757) 673-4000	Su. Cen No.		(757) 673-4148			cott@shr.sysco.com			
4a. Type of Establishment (Factory, mi	ne, wholesaler, etc.)	4b. Principal pr				and State where unit is located:			
food service delivery		food			Suffolk				
5b. Description of Unit Involved						6a. No. of Employees in Unit:			
Included: Included: All route driv	vers, shuttle driver	s, van drivers, s	hip drivers, night dr	ivers, and all drivers	employed at	86			
by the Employer at its Suffolk fac	ility and at the fol	lowing satellite	yards: 1) Richmond	VA, 5436 Jefferson	Davis Hwy.;	6b. Do a substantial number (30% or more) of the employees in the			
2) Virginia Beach VA, 2044 Land						unit wish to be represented by the			
Driftwood Dr.; 5) Maple (Curritu				C., 660 Old U.S. Hwy	y 17-S	Petitioner? Yes [x] No []			
Excluded: All other employees an									
Check One: 7a. Request f				te) a	nd Employer dec	lined recognition on or about			
		(If no reply receive				Ì			
				ires certification under th	e Act.				
8a. Name of Recognized or Certified	Bargaining Agent (i	f none, so state).	8b. Addres	5S					
None 8c. Tel No.	8d Cell No.		8e. Fax No.		8f. E-Mail Add	ress			
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? x Nonc If so, approximately how many employees are participating?									
(Name of labor organization)		has pick	eted the Employer sinc	e (Month, Day, Year)		·			
10. Organizations or individuals other to known to have a representative interes None					presentatives and	d other organizations and individuals			
10a. Name	10b. Ac	Idress		10c. Tel. No.		10d. Cell No.			
None									
				10e. Fax No.		10f. E-Mail Address			
11. Election Details: If the NLRB cond any such election.	ducts an election in th	is matter, state yo	ur position with respect	to 11a Election Type	e: <u>x</u> Manual	Mail Mixed Manual/Mail			
11b. Election Date(s):	11c. E	lection Time(s):		11d. Election Loca	ation(s):				
Thursday August 15th 2019	Suffoll	< facility		Suffolk Main Site,					
		o 6am, o 9pm ,/		7000 Harbour Vie All satellite yards		/A 23435,			
		ite yards				Davis Hwy, (2) Virginia Beach VA,			
		n to 5:30am,				Villiamsburg VA, 1570 Penniman			
	3pm t	o 6pm				bod Dr; (5) Maple (Currituck) N.C / N.C, 660 Old U.S Hwy 17-S			
				2047 inport roud,					
12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Teamsters Local 822 5718 Bartee Street, Norfolk, VA 23502									
Teamsters Local 822 5718 Bartee Street, Norfolk, VA 23502 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)									
International Brotherhood of Tear		of which i cluone							
12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address									
(630) 202-3688 raul_05@comcast.net									
13. Representative of the Petitioner	who will accept serv	ice of all papers		· ·	+				
13a. Name and Title13b. Address (street and number, city, state, and ZIP code)Raul Alfaro5718 Bartee Street, Norfolk, VA 23502									
13c. Tel No.	13d. Cell No.		13e. Fax No.		13f. E-Mail Ad				
(630) 202-3688	757-647-835		757-459-2570		raul_05@co	mcast.net			
I declare that I have read the above p	petition and that the	statements are ti	ue to the best of my k	nowledge and belief.					
Name (Print)	Signature		Title		Date				
Raul Alfaro									

CO.014 41 00 CO. (CO.)								DO NOT WRITE IN THIS SPACE				
FORM NLRB-502 (RC) (2-18)	NATIONAL	UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION			Case No. Date Filed 05-RC-246021 08-05-2019							
INSTRUCTIONS: Unless e-Filed a employer concerned is located. the employer and all other partie Case Procedures (Form NLRB 4	The petition r s named in ti	nust be acc he petition (comp <mark>anied</mark> (of: (1) the p	by both a si atition; (2) S	nowing of interest (s Statement of Positio	see 6b In forn	below) and n (Form NLI	a certificat RB-805); ani	e of service show 1 (3) Description (ing service on of Representation		
1. PURPOSE OF THIS PETITION: bargaining by Patilioner and Pati requests that the National Lab	tioner desires	to be certifi	ed as repres	sentative of t	he employees, The P	Petition	ner alleges i	hat the follo	wing circumstan	ces exist and		
2a. Name of Employer:			2b. Ad	dress(es) of	Establishment(s) Inv	olved ((Street and n	umber, City	State, ZIP code):			
Raytheon			NSA	Northw	est Annex, Bu	ildin	g 344, R	elay Roa	d, Chesapeak	e VA 23322		
3a. Employer Representative - Na	me and Title:		3b. Ad	dress (if san	ne as 2b - stete same	9):				<u> </u>		
Tim Dotson, Project Mar	nager		r	Northw 23322	est Annex, Bu	ildin	g 310, 12	298 Olyn	npic Avenue,	Chesapeake		
3c. Tel. No.	3d. Cell No.			3e. Fax N	0.		3f. E-Mail A					
(757) 421-8428	L <u>.</u>						Dotson(Raythe				
4a. Type of Establishment (Factory,	mine, wholes	aler, elc.)			al Product or Service	e		5a, Cily an Chesapea	d State where unit	is located:		
military contractor				Treemica	a services				r of Employees in	Linit:		
Included: All Engineering Technic	ians and E	lleatroni	o Techni	cione				60	r or Employees in s			
Excluded:		JOGGUUII	e rechin	w10113				6b, Do a su	ubstantial number (30% or more)		
All others, including man	nagers, sur	nervisor	s. profes	sionals, c	office clericals.	and	guards	f of the e	mployees in the ur	hit wish to be ner? 🗷 Yes 🔲 No		
Check One: [x] 7a, Request for re									leclined recognition			
on or about (Date)) pet, serve	s as req.	(If no reply	race)ved, so	state).				•	i		
7b. Petitioner is co 8a, Name of Recognized or Certifi							der the Act.	····				
None	ee Gargonni	A vReur (u	10/18, 30 Su		JUI 835.							
Bc. Tel. No.	8d. Cell No.			8e. Fax N	0.		8f. E-Mail A	ddress				
8g. Affiliation, if any:		<u> </u>		8h. Date of R	lecognition or Certific	ation			irrent or Most (Month, Døy, Yeer)	······································		
9. Is there now a strike or picketing	et the Employ	er's establis	hment(s) im	volved? No	If so, appr	oximat	ely how man	y employee	s are participating?			
(Name of Labor Organization)						.1	has pickeled	the Employ	er since (Month, Di	ay, Year)		
10. Organizations or individuals oth Individuals known to have a repr	er than Petitio resentative Int	ner and tho erest in any	se named in employees	ilems 8 and in the unit de	9, which have claims ascribed in item 5b al	ed reco	ognition as re (If none, so s	presentative tate)	es and other organ	izations and		
None				,								
10a. Name		10b, Addres	35				10c. Tel. No	.	10d. Cell No.			
•							10e, Fax No	o,	10f. E-Mall Addre	58		
11. Election Details: If the NLRB o	onducts and e	lection in th	is matter, st	ate your pos	ition with respect to a	iny suc	h election:	11a. Electio	n Type:	·····		
	-							🔀 Manua		Mixed Manual/Mail		
11b. Election Date(s):		11c. Electio						n Location(•			
August 20, 2019 5:30am-6:30am & 5:30pm-6:30pm 12a, Full Name of Petitioner (Including local name and number): 12b. Address (street a				Building 344 Conference Room								
International Association	-		•	bace					iboro, MD 2	0772		
Workers						1//						
12c. Full name of national or interna						а (и по	ne, so statej					
International Association			d Aerosi	121 Fax N			12g. E-Mail	Addrose				
12d. Tel. No. (301) 967-4510	12e. Cell N	D .		IZI. FOX	¥D.		-	@iamaw	org			
13. Representative of the Petition	er who will a	ccept servi	ce of all pa	pers for pur	poses of the repres	entati						
13a. Name and Title:					ess (street and numi							
William H. Haller, Associa	te General	Counsel		9000 N	lachinists Place,	Upp	er Marlbo	oro, MD	20772			
13c, Tel. No. (301) 967-4510	13d. Cell N	0.		13e. Fax	No.		13f. E-Mail whaller	Address @iamaw	org	·		
i declare that I have read the abo	l	d that the	statements	are true to I	he best of my know	viedae						
Name (Print)			neture	75	INN	्र Tस	0			Date		
William H. Haller			WS	OKH	all_	A	ssociate	General	Counsel	8/5/2019		

1

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1081) PRIVACY ACT STATEMENT Solicitation of the information on this form is authorized by the National Lebor Relations Act (NLRA), 29 U.S.C. § 151 et see. The principal use of the information is to assist the National Lebor Relations Board (NLRB) in processing representation and related proceedings or liligation. 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 (urther 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 STATE	ES GOVERNMENT				DO NOT	WRITE IN THE	S SPACE	
NATIONAL LABOR RELATIONS BOARD Case No. 0.5 D.0.6 Case No. 0.5 D.0.6 Filed								
RC PE	TITION			05	-RC-246277		08-09-2019	
INSTRUCTIONS: Unless e-Filed u	sing the Agenc	y's website, ww	w.nlrb.gov,	submit a	n original of this	Petition to a	n NLRB office in the Region	
in which the employer concerned								
of service showing service on the								
(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 PETITION: RC-C	ERTIFICATION OF	REPRESENTATIV	E - A substant	ial number	of employees wish to	be represented	d for purposes of collective	
bargaining by Petitioner and Petitioner	desires to be certifi	ed as representative	e of the employ	ees. The F	Petitioner alleges the	at the followin	g 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)								
Transdev Services, Inc.		420	31 Loudoun C	enter Place				
3a. Employer Representative - Name an	nd Title	¥Ą	Leesburg 201 3b. Address		2b - state same)			
Brian Van Hine			42031 L	oudoun Ce sburg 2017	enter Place			
3c. Tel. No.	3d. Cell No.		3e. Fax No.	Cours Lorr	• <u> </u>	3f. E-Mail Add	ress	
(571) 258-3809	, (571) 581-4095					brian.vanhine@	transdev.com	
4a. Type of Establishment (Factory, mine,	wholesaler, etc.)	4b. Principal prod			_	5a. City	and State where unit is located:	
Transportation			Passenger	Transporta	tion		Leesburg, VA	
5b. Description of Unit Involved							6a. No. of Employees in Unit: 12	
Included: See Attached Page 2 for additu	onal details						6b. Do a substantial number (30%	
		· · · · · · ·		,			or more) of the employees in the	
Excluded: See Attached Page 2 for additi	onal details						unit wish to be represented by the	
				(Deta)		- Caralana da	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). 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.								
8a. Name of Recognized or Certified Bargaining Agent (<i>if none, so state</i>). 8b. Address								
8c, Tel No. 8e, Fax No. 8f. E-Mail Address								
8g. Affiliation, if any		٤	8h. Date of Rec	cognition or	Certification		Date of Current or Most Recent y (Month, Day, Year)	
9. Is there now a strike or picketing at the								
(Name of labor organization)		, has picke	ted the Employ	yer since (A	Nonth, Day, Year)			
10. Organizations or individuals other than								
known to have a representative interest in	any employees in	the unit described in	item 5b above	e. (If none,	so state)			
10a. Name	10b. Ad	tress	······	1	10c. Tel. No.		10d. Cell No.	
roe. Name	100.70				100. 101. 110.			
					10e. Fax No.		10f. E-Mail Address	
11. Election Details: If the NLRB conduct		mottor cloto	position with a	annact to		F 7 N		
any such election.	ts an election in thi	s matter, state your	position with re	espectio	11a. Election Type:	<u> / </u> Manual]	Mail Mixed Manual/Mail	
11b. Election Date(s): August 30, 2019		ection Time(s):			11d. Election Locati	on(s):		
		.m. to 2:00 p.m.			Training Room	t and number	city state and 7IP code)	
12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Javier M. Perez Jr. 10000 New Hampshire Avenue Amalgamated Transit Union Local 1764 MD Silver Spring 20803								
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) Amalgamated Transit Union								
12d. Tel No. 12e. Cell No. 12f. Fax No. 12d. E-Mail Address								
(301) 431-7100 gatu.org								
13a. Name and Title [13b. Address (street and number, city, state, and ZIP code)								
Daniel B. Smith Assistant General Counsel 10000 New Hampshire Avenue								
Amalgamated Transit Union MD Silver Spring 20903								
(301) 431-7100	(202) 714-4219					dsmith@atu.o	rġ	
I declare that I have read the above peti	ition and that the s	statements are true	e to the best o	f my know	ledge and belief.			
Name (Print) S	I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title Date							
	Signature Daniel B. Smith		Assistant Gen	anal Course	al	08/9/2019		

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

1

Date Filed 08-09-2019

Employees Included

All full-time and regular part-time dispatch/supervisors, road supervisors, lead mechanics, foremen and parts clerks employed by the Employer at its facility currently located in Leesburg, Virginia. The Petitioner is seeking an Armour-Globe election.

Employees Excluded

All other employees, office clerical employees, guards, managers and supervisors as defined in the Act.

	UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE								
NATIONAL LABOR RELATIONS BOARD Case No. Date Filed RC PETITION 05-246531 8/14/2019									
INSTRUCTIONS: Unless e-Filed us		v's website, wy	w nirb gov, submit a	on 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) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed									
With the NLRB and should not be s	with the NLRB and should <u>not</u> 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 d	esires to be certifi	ed as representa in	ve of the employees The	Petitioner alleges the	at the followi	ng 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) 401 West Pratt Street 101 West Pratt Street									
Hilton Management, LLC d/b/a Hilton Baltimore 401 West Pratt Street MD Baltimore 21201-									
3a. Employer Representative – Name and	1 Title		3b. Address (If same as						
Trudy Bauer			401 West Pratt St MD Baltimore 212	ol-					
3c. Tel. No.	3d. Cell No.		3e. Fax No.		3f. E-Mail Ad				
(443) 573-8709	(410) 365-9588	-			Trudy Bauer@	Hilton.com			
4a. Type of Establishment (Factory, mine, w	vholesaler, etc)	4b. Principal proc			5a. City	and State where unit is located:			
Hotels & Motels			Food, Beverage, and Lo	odging		Baltimore, MD			
5b. Description of Unit Involved						6a. No. of Employees in Unit:			
Included: See Attached Page 2 for addition	nal details					8 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	ecognition as Barg	gaining Representat	tive was made on (Date)	and	d Employer de	clined recognition on or about			
l <u> </u>		(If no reply received							
			epresentative 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. 8e. Fax No. 8f. E-Mail Address									
8g. Affiliation, if any			8h. Date of Recognition or	r Certification		Date of Current or Most Recent ny (Month, Day, Year)			
					Contract, if a	ny (month, Duy, Teur)			
9. Is there now a strike or picketing at the E	mplover's establis	shment(s) involved	? If so, approx	imately how many em	plovees are p	articipating?			
(Name of labor organization)									
 Organizations or individuals other than known to have a representative interest in a 	Petitioner and tho	se named in items	8 and 9, which have claim in item 5h above (If none	ed recognition as repr	resentatives ar	nd other organizations and individuals			
known to have a representative interest in e	iny employees in	the unit described i	in item ob above. (in none,	oo olaley					
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.			
				10e. Fax No.		10f. E-Mail Address			
 Election Details: If the NLRB conducts any such election. 	s an election in th	is matter, state you	r position with respect to	11a. Election Type:	<u> </u> ✓ Manual	Mail Mixed Manual/Mail			
11b. Election Date(s):	11c. E	lection Time(s):		11d. Election Loca	ion(s):				
August 28th 7:30am-8:30am Hilton Baltimore									
12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Alberta Elizabeth Palmer 1800 N, Charles Street Suite 500 Unite Here Local 7 and IUOE Local 37 (together jointly the Union) MD Baltimore 2201-									
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (<i>if none, so state</i>) Unite Here International Union, AFL-CIO and International Union of Operating Engineers									
12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address									
(860) 338-9437 (443) 438-5702 Apälmer@unitehere.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)									
13c. Tel No.	13d. Cell No.		13e. Fax No.		13f. E-Mail A	ddress			
I declare that I have read the above petit	ion and that the	statements are tru	l le to the best of my know	ledge and belief.					
	gnature		Title		Date				
	berta E. Palmer		Union Organizer			9 13:12:15			
WILLFUL FALSE STATEME	NTS ON THIS PE	TITION CAN BE P	UNISHED BY FINE AND	IMPRISONMENT (U.	S. CODE. TIT	E 18. SECTION 1001)			

PRIVACY ACT STATEMENT

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

	DO NOT WRITE	IN THIS SPACE
Case		Date Filed

Attachment

Date Filed

Employees Included

All Full-time and regular Part-time housekeeping Leads, room coordinators and Inspectors/Inspectresses employed by the Employer at the Hilton Baltimore

Employees Excluded

All other employees, guards, managers and supervisors as defined by the NLRA.

UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE								
NATIONAL LABOR RELATIONS BOARD Case No. Date Filed RCPETITION 05-RC-246684 August 16, 2019						Filed August 16, 2019		
INSTRUCTIONS: Unless e-Filed us		v's website. w						
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	erved on the	employer or an	y 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 representa ive of the employees. The Petitioner alleges that the following circumstances exist and petitioner that the hold the National Labor Pacific Pacifi								
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)								
Prosegur Command Security Corporation (CSC) 512 Herndon Parkway VA Herndon 20170-								
3a. Employer Representative – Name and	Title		3b. Address (If same as					
Richard Klein			512 Herndon Park VA Herndon 2017	way suite A				
3c. Tel. No.	3d. Cell No.		3e. Fax No.		f. E-Mail Add			
(703) 464-4735	(678) 463-5485	-	(703) 543-0631	r	klein@comman	-		
4a. Type of Establishment (Factory, mine, w Security Systems & Services		4b. Principal proc	Contract Security	,	Sa. City a	and State where unit is located: Baltimore, MD		
5b. Description of Unit Involved			Contract Security			6a. No. of Employees in Unit:		
Included: See Attached Page 2 for addition	alicteb le					10		
						6b. Do a substantial number (30%		
Excluded: See Attached Page 2 for addition	alictob lo					or more) of the employees in he unit wish to be represented by the		
- See Allached Fage 2 for addition	la uctails					Petitioner? Yes [V No []		
Check One: 7a. Request for re	cognition as Barg	gaining Representat	tive was made on (Date)	and E	mployer decl	ined recognition on or about		
			epresentative and desires	certification under the A	ct.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address NONE NONE								
8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address								
8g. Affiliation, if any 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent								
-3			jj			(Month, Day, Year)		
						1-1-1-0		
9. Is there now a strike or picketing at the Er								
(Name of labor organization)								
 Organizations or individuals other than F known to have a representative interest in a 					entatives and	I other organizations and individuals		
known to have a representative interest in a	iny employees in	the unit described i	initeni ob above. (ii none,	So state)				
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.		
				10o Fox No		10f E Moil Address		
				10e. Fax No.		10f. E-Mail Address		
11. Election Details: If the NLRB conducts any such election.	an election in th	is matter, state you	r position with respect to	11a. Election Type: [_ Manual _	Mail Mixed Manual/Mail		
11b. Election Date(s):		lection Time(s):		11d. Election Loca ior	i(s) :			
Mail Mail 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code)								
Ronald A. Mikell 305 Mt Zion Rd Ronald A. Mikell 122. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (<i>if none</i> , so state)								
PA								
12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address (503) 544-3257 (503) 544-3257 President@nijsp.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)								
same as above								
13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address								
I declare that I have read the above petiti	on and that the	statements are tru	e to the best of my know	ledge and belief.				
	Inature		Title		Date			
Nonula A. Million	nald A. Mikell		President		08/14/2019			
WILLFUL FALSE STATEME	NTS ON THIS PE	ETITION CAN BE P	UNISHED BY FINE AND	IMPRISONMENT (U.S.	CODE, TITL	E 18, SECTION 1001)		

PRIVACY ACT STATEMENT

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

DO NOT WRITE	IN THIS SPACE
Case	Date Filed

Attachment

Employees Included

All regular part-time and fulltime Security employees providing Security Services on Employer's USPS contract in the City of Baltimore MD

Employees Excluded

all managerial ,confidential, clerical and Supervisory employees as defined in the National Labor Relations Act

UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE									
NATIONAL LABOR RELATIONS BOARD Case No. 5-RC-246747 Date Filed RC PETITION 8/16/19									
INSTRUCTIONS: Unless e-Filed us	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 i									
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 s				10 4012j. The of	ioning of in	lereor onound only be med			
1. PURPOSE OF THIS PETITION: RC-CE	RTIFICATION OF	REPRESENTATI	VE - A substantial number	of employees wish to	be represente	d for purposes of collective			
bargaining by Petitioner and Petitioner de	esires to be certifi	ied as representa iv	ve of the employees. The	Petitioner alleges th	at the followin	g circumstances exist and			
requests that the National Labor Relat	ions Board proc	eed under its pro	per authority pursuant to	Section 9 of the Na	tional Labor R	elations Act.			
2a. Name of Employer			dress(es) of Establishmen 00 Rockville Pike Suite 20		ind number, city	, State, ZIP code)			
BTI Security	Title	Ň	D Rockville 20852-						
3a. Employer Representative – Name and Title 3b. Address (If same as 2b – state same) Donna Wesley 1700 Rockville Pike Suite 200 MD Rockville 20852-									
Donna Wesley 3c. Tel. No.	3d. Cell No.		MD Rockville 2085 3e, Fax No.	52-	3f. E-Mail Add	Iroco			
	30. Cell NO.		Je. Fax NO.		dwesley@btised				
(301) 562-9201 4a. Type of Establishment (Factory, mine, w	(holosalar ato)	4b. Principal pro	duct or service			and State where unit is located:			
Security Systems & Services	noiesaier, eic j	4b. Filicipal pro	Security		Ja. Ony	Arrington, VA			
5b. Description of Unit Involved			Security			6a. No. of Employees in Unit:			
l						6			
Included: See Attached Page 2 for addition	iai detalis					6b. Do a substantial number (30%			
Evolution						or more) of the employees in he			
Excluded: See Attached Page 2 for addition	al details					unit wish to be represented by the Petitioner? Yes [🖌 No []			
	cognition on Par	aining Depresents	tivo was mado on (Dato)	20					
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 curren ly recognized as Bargaining Representative and desires certification under the Act.									
8a. Name of Recognized or Certified Bar			8b. Address						
International Union, Security, Police & Fire P			vid L Hick 25510 Kell MI Rosevil	y Road					
8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address									
(586) 709-9563 (586) 709-9563 dhickey01@aol.com									
8g. Affiliation, if any			8h. Date of Recognition or	Certification		Date of Current or Most Recent y (Month, Day, Year)			
					Contract, il un	y (wonth, Duy, reur)			
9. Is there now a strike or picketing at the E	mplover's establis	shment(s) involved	? If so, approx	imately how many en	nplovees are pa	articipating?			
(Name of labor organization)									
 Organizations or individuals other than I known to have a representative interest in a 					resentatives an	d other organizations and individuals			
······	.,			,					
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.			
				10e. Fax No.		10f. E-Mail Address			
44 Election Detailer If the NILDD conductor	an election in thi	a matter state you	- position with soon of to						
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.									
11b. Election Date(s): 11c. Election Time(s): 11d. Election Loca ion(s):									
9/12/19 5:45 am to 6:15 am 251 18th Street South, Arlington, VA									
12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Steve Maritas 1155 F STREET NW #1050 Law Endorcement Officers Security Unions LEOSU-DC DC Washington DC 20004-									
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent <i>(if none, so state)</i> Law Enforcement Officers Security & Police Benevolent Association LEOS-PBA									
12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address (202) 595-3510 (202) 486-8558 (202) 595-3510 LEOSUDC@GMAIL.COM									
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)									
13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address									
I declare that I have read the above petiti	on and that the	statements are tru	e to the best of my know	ledge and belief.					
Name (Print) Sig									
Steve Maritas Ste	eve Maritas					9 13:16:52			
WILLFUL FALSE STATEME	NTS ON THIS PE	TITION CAN BE F	UNISHED BY FINE AND	IMPRISONMENT (U					

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 Case Date Filed 5-RC-246747 8/16/19		DO NOT WRITE	IN THIS SPACE
	Attachment		

Employees Included

All full-time and regular part-time Armed security officers performing guard duties as defined in Section 9(b)(3) of the Act @ its location noted in 11d

Employees Excluded

All professional employees, managers, and supervisors as defined in the Act, and all other employees.

	11017					<u> </u>		DO NOT W	RITE IN THIS S	PACE
FORM NLRB-502 (RC) (2-18)		ED STATES OF A LABOR RELAT	IONS BO			Case		C-24676	1	Date Filed 8/19/19
INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nkrb.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 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. Add	ress(es) of	Establishment(s) invo	olved (Street and	number, City	State, ZIP code	ə):
United for Respect			3578	Grand	Avenue, Oakla	and, (CA 946	10	241	4
3a. Employer Representative - Nar	ne and Title	:	3b. Add	ress (il sam	e as 2b - state same) :			12/12/03	DATE AND THE PARTY OF THE
Evelyn Rangel-Medina,	Mging D	irector	(san	ne)						
3c. Tel. No.	3d. Cell No).		3e. Fax No			3f. E-Mail /	Address		
702-534-9115						- 1	evelyn(a)united4	respect.org	
4a. Type of Establishment (Factory,	mine, whole	saler, etc.)			al Product or Service			5a. City an	d State where u	nit is located:
non-profit advocacy of	rganizat	ion		advoca	cy on worker r	rights	5	(nation	wide)	
5b. Description of Unit Involved:								6a. Numbe	r of Employees	in Unit:
[See Attached]								16		
Excluded:								6b. Do a si	bstantial number	ar (30% or more)
[See Attached]								of the e	mployees in the	tioner? Yes
Check One: X 7a. Request for red	cognition as	Bargaining Repre	sentative	was made	on (Date) 8/1	9/201	9 an		leclined recogni	
on or about (Date)	Non	reply (If n	o reply re	eceived, so	state).					
7b. Petitioner is cu		the second se				on und	er the Act.			
8a. Name of Recognized or Certifie	ed Bargalni	ng Agent (If non	e, so stat	e) 8b. Ad	dress:					
8c. Tel. No. 8d. Cell No. 8e. Fax No. 8f. E-Mail Address										
8g. Affiliation, if any:	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 a	t the Emplo	yer's establishme	nt(s) invo	lved? No	If so, appro	oximate	ely how ma	ny employee	s are participatin	g?
(Name of Labor Organization)		-				. 1	as pickete	the Employ	er since (Month,	Day, Year)
10. Organizations or individuals othe	r than Dotiti	mar and those of	mad in I	ame 8 and 1	which have claime	-	· · ·			
individuals known to have a repre-									sound only	
10a. Name		10b. Address		19 - 24 -			10c. Tel. N	0.	10d Cell No	l.
						ł	10e. Fax N	0.	10f. E-Mail Add	ress
11. Election Details: If the NLRB co	nducts and	election in this ma	atter, stat	e your posit	ion with respect to a	ny sud	h election:	11a. Election		Mixed Manual/Mail
11b. Election Date(s):		11c. Election Tir	ne(s):				11d. Electi	on Location(s):	
September 18, 2019		(mail bal	lot nat	tionwide)		(mail	ballot nat	ionwide)	
12a. Full Name of Petitioner (including local name and number): 12b. Address (street and number, city, State and ZIP code):										
Washington-Baltimore Newspaper Guild, Local 32035 1225 Eye Street NW, Suite 300, Washington, DC 20005										
12c. Full name of national or internal							ne, so state)	k:		
The News Guild - Comm	12e. Cell N		of Am	12f. Fax No			12g. E-Mai	Admes		
202-785-3650 x ^{b)(6)}	128. Can I				5-3659			(b) (7)(C)		
13. Representative of the Petitione	r who will a	accept service of	f all pape	ers for purp	oses of the represe					
13a. Name and Title: 13b. Address (street and number, city, State and ZIP code): Robert E. Paul, Attorney 1025 Connecticut Avenue NW, Suite 712, Washington, DC 20036										
13c. Tel. No.										
202-857-5000					3-8417			zwerdllin	g.com	
I declare that I have read the abov	e petition a			re true to th	e best of my knowl					[Dut
Name (Print) Robert E. Paul		Signature	Ro	nR.V	21	Title		,		Date 8/19/19
Robert E. Paul			100	KIC.	and		Attorney			0/19/19

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.

UNITED FOR RESPECT

Unit Description

Included:

All employees in the Field, Digital & Communications, Workit/020, Infrastructure, Operations, and Corporate Accountability & Policy Campaign departments

Excluded:

Managerial employees, confidential employees, guards and supervisors as defined by the National Labor Relations Act

DURING STATES GOVERNMENT ATTIONAL LOSS COVER ALTONS BOUND ATTIONAL LOSS COVER ALTONS BOUND ALTONAL LOSS COVER ALTONS BOUND ALTONAL LOSS ALTONS COVER ALTONS BOUND ALTONAL LOSS ALTONS ALTONS ALTONS ALTONAL LOSS ALTONS ALTONAL STATES ALTONS ALTONAL LOSS ALTONS ALTONAL LOSS ALTONS ALTONAL ALTO			-	······································						
INSTRUCTIONS: Unless e-Filed using the Agency's website, <u>www.nib.agv.submit</u> an odjinal of this Petition to an INLR8 office in the Region of service showing service on the employer and all other parties named in the petition of (1) the petition; (2) filed petition; (2) file						WRITE IN THE				
INSTRUCTIONS: Unless e-Filed using the Agency's website, <u>www.nib.agv.submit</u> an odjinal of this Petition to an INLR8 office in the Region of service showing service on the employer and all other parties named in the petition of (1) the petition; (2) filed petition; (2) file	RC PETITION Case No. 5- RC - 247244 Date Filed 81						Filed 8/27/19			
in which the employer accorecreted is located. The petition must be accompanied by both a showing of Interest (see bblow) and a certificate of service showing service on the employer and and in the petition of (f) the petition of (f) the petition (f) Statement of Position form of Statement of Position for P	INSTRUCTIONS: Unless e-Filed us	ing the Agenc	v's website, wy				n NLRB office in the Region			
of service showing service on the employer and all other parties named in the petition of (1) the petition (2) Statement of Position form (FGR 955) and (3) Description of Representation Case Procedures (Fam NLRB 437). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. PURPOSE THE NETHON: CASE CENTRICATION OF REPRESENTATION THE AUGUMENT A substant and interest should all period be called as representative of the employees. The Petitioner and Petitone desires to be called as representative of the employees. The Petitoner alleges that the following circumstances data and requests that the state of the state										
If Corm NLRB 505; and (3) Description of Representation Case Procedures (Form NLRB 4512). The showing of Interest should only be filed with the VLRB and should poly be served on the employer any other party. IF VERDSE OF NIE PETITION: RC-ERTIFICATION OF REPRESENTATIVE - A substantial number of employers with to be represented for purposes of collective braganities by receiver a be extinded in the employer of any other party. IF VERDSE OF NIE PETITION: RC-ERTIFICATION OF REPRESENTATIVE - A substantial number of employers with to be represented for purposes of collective braganities proceed under its proger authority pursuant to Section 4 of the National Labor Relations Board proceed under its proger authority pursuant to Section 4 of the National Labor Relations Board proceed under its proger authority pursuant to Section 4 of the National Labor Relations Board proceed under its proger authority pursuant to Section 4 of the National Labor Relations Action 5 and State Relations Action Facilities Actions 1 and 7 an										
with the NLRB and should not be served on the employer or any other party. PURPOSE OF NIPSETTION. ReCERTIFICATION OF REPRESENTATION: A substantian number of employees with to be representative of the employees. The Petitioner alleges that the biolowing discusses and all the imployees and write in program. It is the substant Laker Refares to be defined as proprieted under its program. The Petitioner alleges that the following discusses and the imployees are publicly assisted to be defined as program. The Petitioner alleges that the following discusses are publicly assisted to be defined as program. The Petitioner alleges that the following discusses are publicly assisted to be defined as program. West Virginia 26501 Section Facilities Management, Inc 115 Malone Drive. Morgandrown. West Virginia 26501 Section Facilities Management, Inc 30. Addies (1990) Section Facilities Management, Inc 115 Malone Drive. Morgandrown. West Virginia 26501 Section Assistent Mereau Mile Kacked. 30. Addies (1990) Action Facilities Addies and the program and the Drive. Morgandrown. West Virginia 26501 31. Education and Petitoner and Petiton										
1: PURPOSE OF NIJS PETTION: RC-CERTIFICATION OF REPRESENTATIVE - A subsamilin number of employees with to be repropersed of callective braganing by realized and the following circumstances exist and requests that the following circumstances exists and requests that the following circumstances exists and requests that the following circumstance exists and requests that the environment of the following following circumstance exists and requests that the environment of the following circumstance exists and requests that the environment of the requesters in the following circumstance exists and requests and					RB 4612). The si	nowing of int	erest should only be filed			
beganize by Petitioner ad Petitioner desires to be definited as representative of the employees. The Petitioner alleges that the National Laber Relations Board proceed and the Tis program allowing provider (Stinkel and much the National Laber Relations Act. Za. Name all Employer Za. Kame all Employer Action Facilities Management, Inc. 115 Malone Dirve, Morgantown, West Virginia 26501 Data Levis Actions, President & CEO 38. Address (Tissing and Tissing and	with the NLRB and should <u>not</u> be served on the employer or any other party.									
2a. Name of Employer [2b. Address(2) of Establishmen(1) involved (Stret and number, city, State, 2/P code) 3a. Employer Representative - Name and Tule [3b. Address(1) ease to Virginia 26501 3a. Employer Representative - Name and Tule [3b. Address(1] ease to Xirginia 26501 3a. Employer Representative - Name and Tule [3b. Address(1] ease to Xirginia 26501 3c. Tel No [3d. Cell No.] [3d. Cell No.] 3d. 4593-6850 [dif Evalia] Address [dif Evalia] Address 4a. Type of Establishment (Paciny, mine, wholesaire, etc.) [A Principal product or sovice [dif Evalia] Address 6d. To Address (I' core Base, MD [Bac Maintenance [Bac No. dif Evalia] Address 5b. Description of Unit Involved [Bac No. dif Evalia] Address [Bac No. dif Evalia] Address Ab Description of Unit Involved [Bac No. dif Evalia] Address [Bac No. dif Evalia] Address Ab Description of Unit Involved [Bac No dif Evalia] [Bac No dif Evalia] Ab Description of Unit Involved [Bac No dif Evalia] [Bac No dif Evalia] Check One: [Ab Reploy: Core Not	bargaining by Petitioner and Petitioner d	bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and								
Action Fracilities Management, Inc 115 Malone Drive, Morgantown, West Virginia 26501 Sa Employer Representative - Name and Taile 3b. Address (frame as 2b - states same) Diana Lewis Jackson, President & CEO 3b. Address (frame as 2b - states same) Sc Tel No. 3d Call No. Sa Employer Representative - Name 3d Call No. Sc Tel No. 3d Call No. Sa Exployer Representative - Name 3d Call No. Sc Tel No. 3d Call No. Sa Exployer Representative - Name Sa Exployer Representative - Name Facilities Management (Factory, mine, wholesaw, net (Factor) Sa Exployer Representative - Name Sc Diagram State Mine and Regular part-time. Maintenance workers employed by the employer at 4475 Virginia Ave. Sa Nor Employers in Unit: Sc Lidded: Andrews Air Force Base, MD Sa Nor Employers in Unit: Check One: Tra. Request for recognition as Bargaining Representative and supervisors as defined by the Act. Sc Tel No. Bd Cell No. Be. Fax No. Sa Address Bo. Address Borne or a state or picketing at the Employer's establishment(s) involved? Moc. Bi. Exploration Date of Current or Most Recant Content or a state or picketing at the Employer's establishment(s) involved? Moc. Bi. Exploration Date of Current or Most Recant Content or a state or pick										
3a. Employer Roresentative - Name and Tale 3b. Address (ff same as 2b - state same) Diana Lewis Jackson, Presidem & CEO 115 Malone Drive, Morgantown, West Virginia 26501 3c. Tal, No. 3a. Fax No. 3d. Fax No. 3f. Exabilities in the work state of the transmost of transmo	Action Facilities Management, Inc				••		,			
Diana Lewis Jackson, President & CEO 115 Malone Drive, Morgantown, West Vrginia 26501 2: Tak No. 30.4-685-6802 30.4-599-6853 diewis@actionfacilities.com 30.4-599-6850 30.4-685-6802 30.4-599-6853 diewis@actionfacilities.com 30.4-599-6850 30.4-685-6802 30.4-599-6853 diewis@actionfacilities.com 30.4-599-6850 Site where unit is located: Facilities Maintenance Site where unit is located: Site of more wait is located: Andrews Air Force Base, MD 50. discription of Uait Involved Included: unit Pulline and Regular part-time , Maintenance workers employed by the employer at 4475 Virginia Ave. Andrews Air Force Base, MD Bite Antenance Check One: 7a. Request for recognition as Bargaining Representative with and excises certification under the Act. No Raply	· · · · · · · · · · · · · · · · · · ·									
304-595-6850 304-695-6853 dewis@dectornfacilities.com 4a. Type of Establishment (#addres), while besider, etc.) 4b. Principal product or service Sa. City and State where Bills, Com 5b. Description of Unit Involved Facilities Maintenance Andrews Air Force Base, MD 5b. Description of Unit Involved Facilities Maintenance Andrews Air Force Base, MD 5b. Description of Unit Involved Andrews Air Force Base, MD Ba. No. of Employees in Unit. 6b. Do a subtaining number (30%) Andrews Air Force Base, MD Ba. No. of Employees in Unit. 6b. Check One:	•••••••••					est Virginia	26501			
4. Type of Establishment (#story, mine, wholesater, etc.) Fab. Principal poduct or service Sa. Chy and State where will is boated: Federal Office Building Facilities Maintenance Andrews Air Force Base, MD Sb. Bascription of Unit Involved Andrews Air Force Base, MD Bb. Description of Unit Involved Sa. D. or Employees in Unit. Bb. Description of Unit Involved Sa. D. or Employees, and Maintenance workers employed by the employer at 4475 Virginia Ave. Air Ceve Air Force Base, MD Sa. D. or Employees, and Maintenance workers employed by the employer at 4475 Virginia Ave. Check One: 7a. Request for recoprition s Bargaining Representative was made on (Date) 8/27/19 and Employer declined recognition or a about Check One: 7a. Request for recognition as Bargaining Representative and dealers certification under the Act. Ba. Name of Recognition of Certified Bargaining Agent (if none, so state). Sa. Rew No. Ba. Attend or picketing at the Employer's establishment(s) involved? Mone Ba. Date of Recognition or Certification Sa. Engresonation and Individuals for the Act. Ba. Attend or picketing at the Employer's establishment(s) involved? Mone Ba. Attend or picketing at the Employer's establishment(s) involved? Mone 10. Organization or certification are representatives and other organizations and Individuals horone a representative interes			92							
Federal Office Building Facilities Maintenance Andrews Air Force Base, MD Sb. Description of Unit Involved Included: All Fultime and Regular part-time, Maintenance workers employed by the employer at 4475 Virginia Ave. Andrews Air Force Base, MD Sb. No of Employees in the Sb. Databased in unit: 3 Sb. Databased in unit:										
Included: All Fullime and Regular part-time, Maintenance workers employed by the employer at 4475 Virginia Ave. Andrews Air Force Base, MD 3 Excluded: All clerical employees, all managers, all guards and supervisors as defined by the Act. 3 Check One: 1 7.a. Request for recognition as Bargaining Representative was made on (Date) 8/27/19 and Employer declined recognition on or about Non Reply		viluiesaier, etc.j	4							
Include: Air Pointine and Regular partimic Maintenance works is injulyed by the entropyed at 447.0 Mighta AVC. Feb. Does substantial number (50% or moci of the employees in the unit wish to be represented by the Petitioner X includes and process in the unit wish to be represented by the Petitioner X includes and process in the unit wish to be represented by the Petitioner X includes and process in the unit wish to be represented by the Petitioner X includes and the regarding Representative and desires certification under the Act. Check One: Image: The Recognition as Bargaining Representative and desires certification under the Act. Ba. Name of Recognited or Certified Bargaining Representative and desires certification under the Act. Ba. Name of Recognited or Certified Bargaining Representative and desires certification under the Act. Ba. Maine of Recognited or Certified Bargaining Representative and desires certification under the Act. Ba. Affiliation, if any Ba. Eak No. Ba. Expresentation: Ba. Fax No. Ba. State or picketing at the Employer's establishment(s) involved? No. If s. expresentative and enter or Most Recent Contract, if any (Month, Day, Year) I. State naw a strike or picketing at the Employer's establishment(s) involved? No. If s. a proximately how many employees are participating? (Name of labor organization)	5b. Description of Unit Involved									
Andrews Air Force Base, MD 66. Do a substration number (30% or more) of the employees in the unit wish to be regresented by the Act. 66. Do a substration number (30% or more) of the employees in the unit wish to be regresented by the Pact. Check One: 7a. Request for recognition as Bargahing Representative was made on (Date) 8/27/19 and Employer declined recognition on or about 7b. Petitioner is currently recognited as Bargahing Representative and desires certification under the Act. 8b. Address 8a. Name of Recognited or Certified Bargahing Agent (If none, so state). 8b. Address 8b. Address 8c. Tel No. 8d Cell No. 8e. Fax No. 8f. E-Mail Address 8g. Affiliation, If any 8b. Date of Recognition or Certification 8f. E-Mail Address 9. to there now a strike or picketing at the Employer's establishment(s) involved? No	Included: All Fulltime and Regular pa	art-time ,Mainte	nance workers e	mployed by the employ	er at 4475 Virginia	Ave.				
Exclude: All clerical employees, all managers, all guards and supervisors as defined by the Act. unit wish to be represented by the Petitioner's Vision Not Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 8/27/19 and Employer declined recognition on ar about. Not Dr. Reply (Date)					-					
Check One: Take Request for recognition as Bargaining Representative was made on (Date) 8/27/10 and Employer declined recognition on or about Take Recognized or Certified Bargaining Representative and desires certification under the Act. Ba. Name of Recognized or Certified Bargaining Agent (if none, so state). Sh. Address Bg. Affiliation, if any Bd. Cell No. Bd. Ce	Excluded:					4. 4.4				
Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 8/27/19 and Employer declined recognition on or about No. Reply	All cierical employee	s, all manaç	gers, all guar	as and supervisor	s as defined o	y the Act.				
No. Recopily (Det) (If no reply meerined, so state). To. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. Ba. Name of Recognized or Certified Bargaining Agent (If none, so state). Bb. Address Sc. Tel No. Bd Cell No. Be. Fax No. Bg. Affiliation, If any Bh. Date of Recognition or Certification Bi. Expiration Date of Current or Most Recent Contract, If any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? (Name of labor organization)		essentios os Par		tive who made on (Date) (107/40	d Employor dos				
7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act. Ba. Name of Recognized or Certified Bargaining Agent (// none, so state). 8b. Address 8c. Tel No. 8c. Tel No. 8l. E-Mail Address 8g. Affiliation, If any 8h. Date of Recognized or Certification 8l. E-Mail Address 8g. Affiliation, If any 8h. Date of Recognition or Certification 8l. E-Mail Address 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 other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals not the value as the error organization or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals nother organizations and individuals nother organizations and individuals not the value as the error organization or individuals of the normal end not the source or individuals of the normal end not the source organization or individuals of the normal end not the source organization or individuals of the normal end not the source organization or individuals of the normal end not the source organization or individuals of the normal end not the source organization or individuals of the normal end not the source organization or individuals of the normal end not the individuals of the normal end not the source organization or individuals of the normal end not the individuals of the normal end not the end the end to end the end t					¥Z//19ar	a Employer dec	aned recognition on or about			
Ba. Name of Recognized or Certified Bargaining Agent (If none, so state). 8b. Address Bc. Tel No. 8d Celi No. 8e. Fax No. 8f. E-Mail Address Bg. Affiliation, if any 8h. Date of Recognized on Certification 8f. 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? Mone If so, approximately how many employees are participating? (Name of labor organization)			• • •	· ·						
None Bd Cell No. Bd Cell No. Be. Fax No. Bf. E-Mail Address Bg. Affiliation, if any Bh. Date of Recognition or Certification Bf. 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? Mo Mo If so, approximately how many employees are participating? (Name of labor organization)					centification under the	aci.	·····			
Bg. Affiliation, if any Bh. Date of Recognition or Certification Bi. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? (Name of labor organization)	None									
9. Is there now a strike or picketing at the Employer's establishment(s) involved? NoIf so, approximately how many employees are participating?	8c. Tel No. 8d Cell No. 8f. E-Mail Address									
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)										
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10b. Address 10c. Tel. No. 10d. Cell No. 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 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): 9/30/19 US Mail US Mail 12a. Full Name of Petitioner (Including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Union of Operating Engineers, Local 99 9315 Largo Drive West, Suite 200 Largo, MD 20774 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 112d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 202-337-0099 Ext. 123 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 202-337-0099 Ext. 123 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 313.	9. Is there now a strike or picketing at the E	mployer's establi	shment(s) involved	? No If so, approv	imately how many er	mployees are pa	rticipating?			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10b. Address 10c. Tel. No. 10d. Cell No. 10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 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): 9/30/19 US Mail US Mail 12a. Full Name of Petitioner (Including local name and number) 12b. Address (street and number, city, state, and ZIP code) International Union of Operating Engineers, Local 99 9315 Largo Drive West, Suite 200 Largo, MD 20774 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 112d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 202-337-0099 Ext. 123 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 202-337-0099 Ext. 123 13d. Cell No. 13b. Address (street and number, city, state, and ZIP code) 313.	(Name of labor organization)		has pick	eted the Employer since (Month. Dav. Year)					
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 11a. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 10c. Tel. 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): 11c. Election Time(s): 11d. Election Location(s): 9/30/19 US Mail US Mail 12c. 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) 12g. E-Mail Address 112d. Tel No. 12d. Tel No. 12f. Fax No. 12g. E-Mail Address 202-337-0099 Ext. 123 202-744-9519 240-716-3956 12g. E-Mail Address 13a. Name and Tille Keith J. Graham, Organizer 13b. Address (street and number, city, stale, and ZIP code) 13f. E-fax No. 13a. Tel No. 13d. Cell No. 13f. E-Fax No. 13f. E-Mail Address 13a. Name and Tille Keith J. Graham, Organizer 13b. Address (street and number, city, stale, and ZIP code)		Potitionos and the				vecentatives an	d other organizations and individuals			
10a. Name 10b. Address 10c. Tel. No. 10d. Cell No. 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): 9/30/19 US Mail 11d. Election Location(s): 9/30/19 US Mail 11d. Election Location(s): 9/30/19 12b. Address (street and number, city, state, and ZIP code) 9/315 Largo Drive West, Suite 200 Largo, MD 20774 12c. Full name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 11d. Election of Operating Engineers, Local 99 12b. Address (street and number, city, state) 11demational Union of Operating Engineers, Local 99 12c. Cell No. 12d. Tel No. 12e. Cell No. 202-337-0099 Ext. 123 12e. Cell No. 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 1315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Tel No. 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 131c. Tel No. 13d. Cell No. 13e. Fax No.	known to have a representative interest in a					resentatives an				
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): 11c. Election Time(s): 11d. Election Location(s): 9/30/19 US Mail US Mail 12a. 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) 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. 12d. Tel No. 12e. Cell No. 12f. Fax No. 202-337-0099 Ext. 123 202-744-9519 240-716-3956 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 9315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Fel No. 13f. E-Mail Address 202-337-0099 Ext. 123 13d. Cell No. 12f. Fax No. 12g. E-Mail Address 202-337-0099 Ext. 123 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 202-337-0099 Ext. 123 13d. Cell No.		10b. Ad	dress		10c. Tel. No.	·····	10d. Cell No.			
11. Election Details: if the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type:Mail _			0.035							
any such election. 11c. Election Time(s): 11d. Election Location(s): 9/30/19 US Mail US Mail 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) 11b. Election Location(s): 9315 Largo Drive West, Suite 200 Largo, MD 20774 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union of Operating Engineers, Local 99 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union of Operating Engineers, Local 99 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union of Operating Engineers, Local 99 12d. Tel No. 12e. Cell No. 202-337-0099 Ext. 123 12e. Cell No. 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 9315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Tel No. 13d. Cell No. 202-337-0099 Ext.123 13d. Cell No. 202-744-9519 13e. Fax No. 202-337-0099 Ext.123 13d. Cell No. <td></td> <td></td> <td></td> <td></td> <td>10e. Fax No.</td> <td></td> <td>10f. E-Mail Address</td>					10e. Fax No.		10f. E-Mail Address			
11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): 9/30/19 US Mail US Mail 12a. Full Name of Petitioner (Including local name and number) 12b. Address (street and number, city, state, and ZIP code) 11c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) 9315 Largo Drive West, Suite 200 Largo, MD 20774 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. 220-744-9519 202-337-0099 Ext. 123 202-744-9519 240-716-3956 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 9315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Tel No. 13c. Tel No. 13d. Cell No. 202-337-0099 Ext. 123 13d. Cell No. 202-744-9519 240-716-3956 9315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Tel No. 13d. Cell No. 202-337-0099 Ext. 123 13d. Cell No. 202-744-9519 240-716-3956 240-716-3956 kgraham@iuoelocal99.org 13c. Tel No. 202-744-9519		s an election in th	is matter, state you	r position with 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) International Union of Operating Engineers, Local 99 9315 Largo Drive West, Suite 200 Largo, MD 20774 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 International Union of Operating Engineers, Local 99 12f. Fax No. 12g. E-Mail Address 12d. Tel No. 12e. Cell No. 202-744-9519 240-716-3956 202-337-0099 Ext. 123 202-744-9519 240-716-3956 kgraham@iuoelocal99.org 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 9315 Largo Drive West, Suite 200 Largo, MD 20774 9315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Tel No. 13d. Cell No. 13e. Fax No. 202-337-0099 Ext.123 13d. Cell No. 13e. Fax No. 202-337-0099 Ext.123 202-744-9519 240-716-3956 13c. Tel No. 13d. Cell No. 13e. Fax No. 202-337-0099 Ext.123 13d. Cell No. 13e. Fax No. 202-744-9519 240-716-3956 kgraham@iuoelocal99.org I declare that I have read the above petition and that the statements are true to	11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s):									
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (<i>if none, so state</i>) International Union of Operating Engineers, Local 99 12d. Tel No. 12e. Cell No. 202-337-0099 Ext. 123 202-744-9519 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) 13c. Tel No. 13d. Cell No. 13e. Fax No. 13c. Tel No. 13d. Cell No. 13e. Fax No. 202-337-0099 Ext.123 13d. Cell No. 13e. Fax No. 13c. Tel No. 13d. Cell No. 13e. Fax No. 202-337-0099 Ext.123 202-744-9519 240-716-3956 I declare that I have read the above petition and that the statements are true to the best of my knowledge and bellef. Date Name (Print) Signatute Title Date Keith J. Graham Signatute Title Date										
International Union of Operating Engineers, Local 99 12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 202-337-0099 Ext. 123 202-744-9519 240-716-3956 kgraham@iuoelocal99.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 202-337-0099 Ext.123 202-744-9519 240-716-3956 kgraham@iuoelocal99.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and bellef. Name (Print) Signatute Title Date Name (Print) Signatute Title Organizer 8/27/19 Date	International Union of Operating Engineers, Local 99 9315 Largo Drive West, Suite 200 Largo, MD 20774									
202-337-0099 Ext. 123 202-744-9519 240-716-3956 kgraham@iuoelocal99.org 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, state, and ZIP code) 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 13c. Tel No. 13d. Cell No. 13e. Fax No. 202-337-0099 Ext.123 202-744-9519 240-716-3956 I declare that I have read the above petition and that the statements are true to the best of my knowledge and bellef. 13te Name (Print) Signature Title Date Keith J. Graham Organizer 13te	International Union of Operating Engineers, Local 99									
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 9315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Tel No. 13d. Cell No. 202-337-0099 Ext.123 13d. Cell No. 1 declare that I have read the above petition and that the statements are true to the best of my knowledge and bellef. Name (Print) Signature Keith J. Graham Title Organizer Date 8/27/19										
13a. Name and Title Keith J. Graham, Organizer 13b. Address (street and number, city, state, and ZIP code) 9315 Largo Drive West, Suite 200 Largo, MD 20774 13c. Tel No. 202-337-0099 Ext.123 13d. Ceil No. 202-744-9519 13e. Fax No. 240-716-3956 13f. E-Mail Address kgraham@iuoelocal99.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and bellef. Date 8/27/19			ice of all namers fo		entation proceedin	<u> </u>				
13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 202-337-0099 Ext.123 202-744-9519 240-716-3956 kgraham@iuoelocal99.org I declare that I have read the above petition and that the statements are true to the best of my knowledge and bellef. Name (Print) Signature Name (Print) Signature Title Date Keith J. Graham 0rganizer 8/27/19	13a. Name and Title Keith J Graham Organizer 13b. Address (street and number, city, state, 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 bellef. Name (Print) Signature Keith J. Graham Title Date 8/27/19	13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address									
Name (Print) Signature Title Date Keith J. Graham Organizer 8/27/19			statements are tru		vledge and bellef.	kgranam@iuo	elocalaa.old			
Keith J. Graham Organizer 8/27/19			A			Detc	~ <u>, </u>			
			har and the second s							
		NTSON THIS PI	ETITION CAN BE		IMPRISONMENT (E 18. SECTION 1001)			

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