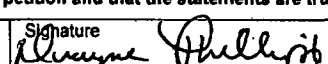


UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 5-RC-240916	Date Filed 5/6/19

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 North American Security		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1325 East-West Highway, Silver Spring, MD 20910	
3a. Employer Representative - Name and Title Karen Savino, Human Resources Manager		3b. Address (if same as 2b - state same) 550 E Carson Plaza Dr. Ste 222, Carson, CA 90746	
3c. Tel. No. 323-634-1911	3d. Cell No.	3e. Fax No. 323-517-2006	3f. E-Mail Address k.savino@nasecurityinc.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SECURITY AGENCY		4b. Principal product or service SECURITY	5a. City and State where unit is located: Silver Spring, MD
6b. Description of Unit Involved Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED SECURITY OFFICERS, LIEUTENANTS, SARGENTS AND CAPTAINS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, EMPLOYED BY NORTH AMERICAN SECURITY @ 1325 EAST-WEST HWY, SILVER SPRING, MD 20910 Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT.			6a. No. of Employees in Unit: 65 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"/>
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (if no reply received, so state). no <input type="checkbox"/> 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). National League of Justice and Security		8b. Address PO Box 129, Dover, PA	
8c. Tel No. 855-838-4135	8d. Cell No.	8e. Fax No.	8f. E-Mail Address president@nljsp.us
8g. Affiliation, if any		8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 7/31/19	
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: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): 5/22/19		11c. Election Time(s): 5:00 am -7:00 am & 1:00 pm - 3:00 pm	
11d. Election Location(s): Break Room			
12a. Full Name of Petitioner (including local name and number) International Union, Security, Police and Fire Professionals of America (SPFPA)		12b. Address (street and number, city, state, and ZIP code) 25510 Kelly Road, Roseville, MI 48066	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union, Security, Police and Fire Professionals of America (SPFPA)			
12d. Tel No. 586-772-7250 X111	12e. Cell No. 586-872-5634	12f. Fax No. 586-772-9644	12g. E-Mail Address organize@spfpa.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Gordon Gregory, General Counsel		13b. Address (street and number, city, state, and ZIP code) 65 Cadillac Square, Suite 3727, Detroit, MI 48226	
13c. Tel No. 313-964-5600	13d. Cell No.	13e. Fax No. 313-964-2125	13f. E-Mail Address Gordon@UnionLaw.net
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Dwayne Phillips	Signature 	Title (U) Organizing Director	Date 5/3/19

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 will cause the NLRB to decline to invoke its processes.

REC
5/13/19

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 5-RC-241176	Date Filed 5/10/19

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: PSEG Keys Energy Center, LLC	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 101 N Keys Rd, Brandywine, MD 20613
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3a. Employer Representative - Name and Title: Bill Clancy--Plant Manager	3b. Address (if same as 2b - state same): SAME
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3c. Tel. No. 3017822501	3d. Cell No. 5185986722	3e. Fax No.	3f. E-Mail Address william.clancy@pseg.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Power Plant	4b. Principal Product or Service Electricity	5a. City and State where unit is located: Brandywine, MD
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5b. Description of Unit Involved: Included: See attachment Excluded: See attachment	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) _____ 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? _____ (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)

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:** On site election at facility 2 days to accommodate all shift workers with morning and afternoon voting Manual Mail Mixed Manual/Mail

11b. Election Date(s): May 30 and 31, 2019	11c. Election Time(s): 5:15AM to 6:15AM and 5:15PM to 6:15PM	11d. Election Location(s): Training Trailer
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12a. Full Name of Petitioner (including local name and number): International Brotherhood of Electrical Workers Local 1900	12b. Address (street and number, city, State and ZIP code): 1400 Mercantile Lane, Suite 256 Largo MD, 20774
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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 Electrical Workers

12d. Tel. No. 3013226030	12e. Cell No. 3014566608	12f. Fax No. 3013226181	12g. E-Mail Address jimgriffin@ibew1900.org
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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: Dale McCray, Lead Organizer	13b. Address (street and number, city, State and ZIP code): 25049 Veterans Mem Hwy, Terra Alta, WV 26764
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13c. Tel. No.	13d. Cell No. 3048412140	13e. Fax No.	13f. E-Mail Address dale_mccray@ibew.org
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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) Dale McCray	Signature 	Title Lead Organizer	Date 05/10/2019
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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

Solidification 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.

5b. Description of Unit Involved:

Included:

All full-time technicians, operators, warehouse, and maintenance employees.

Excluded:

All confidential employees, office clerical employees, professional employees, guards and supervisors as defined in the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 5-RC-241262	Date Filed 5/10/19
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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 A las Copco Rental, LLC	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1 Oak Road NJ Fairfield 07004-
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3a. Employer Representative - Name and Title Chris Peters	3b. Address (if same as 2b - state same) 1 Oak Road NJ Fairfield 07004-
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3c. Tel. No. (973) 227-0122	3d. Cell No. (862) 400-3857	3e. Fax No. (973) 227-4510	3f. E-Mail Address chris.peters@us.atlascopco.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Rental & Leasing	4b. Principal product or service Construction Equipment	5a. City and State where unit is located: Elkton, MD
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 2	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) _____ 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).	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)

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: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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11b. Election Date(s): 5/31/19	11c. Election Time(s): 7:30 a.m.-8:00 a.m.	11d. Election Location(s): Shop area at Employer's facility at 1593 B E Old Philadelphia Rd, Elkton, MD Baltimore 21222-
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12a. Full Name of Petitioner (including local name and number) Robert A. Holsey Jr. International Union of Operating Engineers, Local 37	12b. Address (street and number, city, state, and ZIP code) 3615 North Point Blvd, Suite A MD Baltimore 21222-
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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 Union of Operating Engineers

12d. Tel No. (410) 254-2030	12e. Cell No.	12f. Fax No. (410) 319-9197	12g. E-Mail Address BobHolsey@IUOE37.ORG
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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 David Gray Wright Kahn, Smith & Collins, P.A.	13b. Address (street and number, city, state, and ZIP code) 201 N. Charles St. 10th floor MD Baltimore 21201-

13c. Tel No. (410) 244-1010	13d. Cell No.	13e. Fax No. (410) 244-8001	13f. E-Mail Address wright@kahnsmith.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) David Gray Wright	Signature David Gray Wright, Esq.	Title	Date 05/10/2019 11:50:09
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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

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All full-time and regular part-time Field Service Technicians employed by the Employer at its 1593 B E Old Philadelphia Rd, Elkton facility.

Employees Excluded

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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 5-RC-241391	Date Filed 5/13/19

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 First Coast Security Inc.	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 14100 Parke Long Court Suite J VA Chantilly 20151-
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3a. Employer Representative - Name and Title Paul Larson	3b. Address (If same as 2b - state same) 4041 Powder Mill Rd MD Beltsville 20705-
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3c. Tel. No. (703) 592-6106	3d. Cell No.	3e. Fax No.	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Security Systems & Services	4b. Principal product or service Armed security services at government site	5a. City and State where unit is located: Beltsville, MD
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 24	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) 03/29/2019 and Employer declined recognition on or about _____ (Date) (If no reply received, so state). No reply received
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).	8b. Address
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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? _____ 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)

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: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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11b. Election Date(s): June 10 & 11	11c. Election Time(s): 5-8AM (both days); 1-4PM (both days)	11d. Election Location(s): Somewhere near work site (the facility itself does not likely have space for)
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12a. Full Name of Petitioner (including local name and number) Chrissandra Jones Protective Service Officers United	12b. Address (street and number, city, state, and ZIP code) 8004 Neville Pla MD Ft. Washington 20744-
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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)
n/a

12d. Tel No. (202) 262-1047	12e. Cell No. (202) 262-1047	12f. Fax No. (410) 649-5286	12g. E-Mail Address chrissandrajones@psosunited.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 Justin P Keating Attorney for Petitioner Beins, Axelrod, P.C.	13b. Address (street and number, city, state, and ZIP code) 1717 K St. NW Suite 1120 DC Washington 20006-
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13c. Tel No. (202) 328-7222	13d. Cell No. (703) 966-3193	13e. Fax No. (202) 328-7030	13f. E-Mail Address jkeating@beinsaxelrod.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) Justin P Keating	Signature Justin P. Keating	Title Attorney for Petitioner	Date 05/13/2019 11:28:19
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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

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

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All full-time and regular part-time security guards employed by the Employer at the FDA facility located at the 4041 Powder Mill Road site

Employees Excluded

Office clerical employees, professional employees, managerial employees, Project Managers, Assistant Project Managers, and other supervisors as defined by the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 5-RC-241394	Date Filed 5/14/19

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
SecTek Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
1930 Isaac Newton Square, Suite 100, Reston, VA 20190

3a. Employer Representative - Name and Title
Deborah Leahy

3b. Address (if same as 2b - state same)
SAME

3c. Tel. No.
703-435-0970

3d. Cell No.

3e. Fax No.
703-834-0124

3f. E-Mail Address
dleahy@sectek.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Security Contractor

4b. Principal product or service
Security Services

5a. City and State where unit is located:
Washington, DC

5b. Description of Unit Involved

Included: All full time and regular part time security officers employed by the employer and assigned to the Adas Israel Congregation located at 2850 Quebec St. NW, Washington, DC 20008

Excluded: All clerical employees, professional employees, managerial employees and supervisors as defined in the Act.

6a. No. of Employees in Unit:
10

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the 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 (if none, so state).
None

8b. Address

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? 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):
May 28, 2019

11c. Election Time(s):
Any

11d. Election Location(s):
N/A

12a. Full Name of Petitioner (including local name and number)
United Security & Police Officers of America

12b. Address (street and number, city, state, and ZIP code)
5620 St. Barnabas Rd. Suite 390, Oxon Hill, MD 20745

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
None

12d. Tel No.
301-377-9860

12e. Cell No.
301-377-9860

12f. Fax No.

12g. E-Mail Address
ishun.richards.uspoa@gmail.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title
Ishun Richards, National Vice President

13b. Address (street and number, city, state, and ZIP code)
5620 St. Barnabas Rd. Suite 314, Oxon Hill, MD 20745

13c. Tel No.
301-377-9860


13d. Cell No.
301-377-9860

13e. Fax No.

13f. E-Mail Address
ishun.richards.uspoa@gmail.com

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)
Ishun J. Richards

Signature


Title
USPOA National Vice President

Date
May 14, 2019

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.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 05-RC-241434	Date Filed 05-14-2019

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 Paragon Systems Inc.	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 13655 Dulles Technology Drive, Suite 100, Herndon, VA 20171
---	---

3a. Employer Representative - Name and Title Laura Hagan	3b. Address (if same as 2b - state same) SAME
--	---

3c. Tel. No. 865-266-0383	3d. Cell No. 865-266-0383	3e. Fax No. 703-579-1576	3f. E-Mail Address lhagan@parasys.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Security Contractor	4b. Principal product or service Security Services	5a. City and State where unit is located:
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5b. Description of Unit Involved Included: All full time and regular part time security officers employed by the Employer and assigned to the Department of Education and Housing and Urban development Facility located at 550 12th St. SW, Washington, DC 20024 Excluded: All clerical employees, professional employees, managerial employees and supervisors as defined in the Act.	6a. No. of Employees in Unit: Approx 30 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"/>
--	--

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) Fraternity of American Protective Officers	8b. Address 14903 Dennington Drive, Bowie, MD 20721
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8c. Tel No. 240-486-7905	8d. Cell No. 240-486-7905	8e. Fax No.	8f. E-Mail Address fapounion@gmail.com
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8g. Affiliation, if any none	8h. Date of Recognition or Certification May 10, 2018	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: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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11b. Election Date(s) May 14, 2019	11c. Election Time(s) Any	11d. Election Location(s) N/A
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12a. Full Name of Petitioner (including local name and number) United Security & Police Officers of America	12b. Address (street and number, city, state, and ZIP code) 5620 St. Barnabas Rd. Suite 390, Oxon Hill, MD 20745
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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)
None


12d. Tel No. 301-377-9860	12e. Cell No. 301-377-9860	12f. Fax No.	12g. E-Mail Address ishun.richards.uspoa@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 Ishun Richards, National Vice President	13b. Address (street and number, city, state, and ZIP code) 5620 St. Barnabas Rd. Suite 314, Oxon Hill, MD 20745
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13c. Tel No. 301-377-9860	13d. Cell No. 301-377-9860	13e. Fax No.	13f. E-Mail Address ishun.richards.uspoa@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) Ishun J. Richards	Signature 	Title USPOA National Vice President	Date May 14, 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.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 5-RC-241632	Date Filed 5/16/19

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nrb.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: BlueLabs	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 700 14th Street NW, Second Floor, Washington, DC 20005
--	---

3a. Employer Representative - Name and Title: Thomas Gensemer, CEO	3b. Address (if same as 2b - state same): (same)
--	--

3c. Tel. No. 202-580-8885	3d. Cell No. 310-801-9211	3e. Fax No. 202-899-3315	3f. E-Mail Address Thomas.Gensemer@bluelabs.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) provides data science services and products	4b. Principal Product or Service data science services and products	5a. City and State where unit is located: Washington, DC
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5b. Description of Unit Involved: Included: All full- and part-time employees Excluded: supervisors, managers, confidential employees and guards as defined in the Act	6a. Number of Employees in Unit: 41	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) 5/16/19 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)	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)

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 12, 2019	11c. Election Time(s): 11am-1pm	11d. Election Location(s): Death Star Conference Room
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12a. Full Name of Petitioner (including local name and number): Washington-Baltimore Newspaper Guild, Local 32035	12b. Address (street and number, city, State and ZIP code): 1225 Eye Street NW, Suite 300, Washington, DC 20005
---	---

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
The News Guild - affiliated with Communications Workers of America, AFL-CIO, CLC


12d. Tel. No. 202-785-3650 x 15	12e. Cell No. 703-627-4547	12f. Fax No. 202-785-3659	12g. E-Mail Address b.corneljett@gmail.com
---	--------------------------------------	-------------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title: Robert E. Paul, Attorney	13b. Address (street and number, city, State and ZIP code): 1025 Connecticut Avenue NW, Suite 712, Washington, DC 20036
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13c. Tel. No. 202-857-5000	13d. Cell No.	13e. Fax No. 202-223-8417	13f. E-Mail Address rpaul@zwerdning.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) Robert E. Paul	Signature 	Title Attorney	Date 5/16/19
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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

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
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

5-AC-241822

Date Filed

5/21/19

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:
TIER TECH

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
6201 Woodlawn drive MD 21244

3a. Employer Representative - Name and Title:
Michael Elliott/ Project manager

3b. Address (if same as 2b - state same):

3c. Tel. No. 410-965-4622 3d. Cell No. 443-801-1674 3e. Fax No. 888-508-6342 3f. E-Mail Address

4a. Type of Establishment (Factory, mine, wholesaler, etc.):
Government

4b. Principal Product or Service
Security

5a. City and State where unit is located:
Woodlawn, MD

5b. Description of Unit Involved:
Included:
All Security officers and Sergeants
Excluded:
Lieutenants, Captains, office and non-employees

6a. Number of Employees in Unit:
34

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the 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 (if none, so state)
spfpa local 555

8b. Address:
25510 Kelly road, Rossville Michigan 48066

8c. Tel. No. 586-772-7250 8d. Cell No. 443-827-6873 8e. Fax No. 586-772-9644 8f. E-Mail Address gscott108@gmail.com

8g. Affiliation, if any:

8h. Date of Recognition or Certification

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 08/14/2019

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)

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): 05/30/2019

11c. Election Time(s): ALL DAY

11d. Election Location(s): NLRB

12a. Full Name of Petitioner (including local name and number):
Governed United Security Professionals

12b. Address (street and number, city, State and ZIP code):
5602 Baltimore- National Pike suite 607
Catonsville, MD 21228

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
Governed United Security Professionals

12d. Tel. No. 443-304-2018 12e. Cell No. 443-562-3230 12f. Fax No. 443-304-2855 12g. E-Mail Address klern@yaho.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):
5602 Baltimore- National Pike suite 607
Catonsville, MD 21228

13c. Tel. No. 443-304-2018 13d. Cell No. 443-562-3230 13e. Fax No. 443-304-2855 13f. E-Mail Address klern@yaho.com

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) Kent Emery Signature  Title President Date 05/20/19

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

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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 5-RC-241996	Date Filed 5/22/19

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
Petro Home Service

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
8900 Citation Road, Baltimore, MD 21218

3a. Employer Representative - Name and Title
Steve Millington

3b. Address (if same as 2b - state same)
Same

3c. Tel. No.
410-238-4094

3d. Cell No.

3e. Fax No.
215-968-3975

3f. E-Mail Address
smillington@petroheat.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Home and Oil Delivery Services

4b. Principal product or service
HVAC Home Service/Oil Delivery

5a. City and State where unit is located:
Baltimore, MD

6a. Description of Unit Involved
Included: All full-time/part-time service and installation techs.

Excluded: All other classifications, clerical, management, temporary employees and professional employees as defined by the act.

6a. No. of Employees in Unit:
35

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) **5/22/19** and Employer declined recognition on or about **5/22/19** (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).

8b. Address

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)

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):
June 24, 2019

11c. Election Time(s):
7:30 am to 10:30 am/2:00 pm to 5:00 pm

11d. Election Location(s):
Classroom

12a. Full Name of Petitioner (including local name and number)
Teamster Local 570

12b. Address (street and number, city, state, and ZIP code)
6910 Eastern Avenue, Baltimore, MD 21224

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.
410-284-5081

12e. Cell No.

12f. Fax No.
410-282-7185

12g. E-Mail Address
Team570@comcast.net

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title
Moses Jackson, Vice President

13b. Address (street and number, city, state, and ZIP code)
6910 Eastern Avenue, Baltimore, MD 21224

13c. Tel No.
410-284-5081

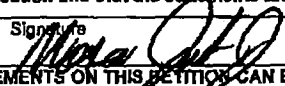
13d. Cell No.

13e. Fax No.
410-282-7185

13f. E-Mail Address
Team570@comcast.net

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Moses Jackson

Signature


Title
Vice President

Date
5/22/19

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

PRIVACY ACT STATEMENT

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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

5-RC-242322

Date Filed

5/28/19

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
Seaford Volunteer Fire Department

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
302 E King St
DE Seaford 19973-

3a. Employer Representative - Name and Title
George Stewart

3b. Address (If same as 2b - state same)
PO Box 87
DE Seaford 19973-

3c. Tel. No.
(302) 629-9355

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
rickstewartcfm@gmail.com

4a. Type of Establishment (Factory, mine, wholesaler, etc)
Others

4b. Principal product or service
Fire and EMS service

5a. City and State where unit is located:
Seaford, DE

5b. Description of Unit Involved

Included: See Attached Page 2 for additional details

Excluded: See Attached Page 2 for additional details

6a. No. of Employees in Unit:
10

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the 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 (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 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? 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)

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):
June 13th

11c. Election Time(s):
Afternoon

11d. Election Location(s):
Seaford Volunteer Fire Department 302 E King St, Seaford, DE 19973

12a. Full Name of Petitioner (including local name and number)
Glenn P Johnson Jr.
Sussex County Uniformed Fire Fighters Association, IAFF Local 5121

12b. Address (street and number, city, state, and ZIP code)
37061 Johnson Rd.
DE Selbyville 19975-

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Association of Firefighters

12d. Tel No.
(302) 381-4830

12e. Cell No.
(302) 381-4830

12f. Fax No.

12g. E-Mail Address
iaff5121Pres@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 petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Glenn P Johnson Jr.

Signature
Glenn P Johnson Jr

Title
Local President

Date
05/29/2019 18:35:53

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

Employees Included
Full Time Firefighter/EMT

Employees Excluded
Part Time

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

FORM NLRB-502 (RD)
(2-19)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RD PETITION

DO NOT WRITE IN THIS SPACE

Case No.
5-AD-241640

Date Filed
5/10/19

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 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: Penske
2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code): 540 Trampton Rd Sandston VA 23150

3a. Employer Representative - Name and Title: Pete Albanese (District Manager)
3b. Address (if same as 2b - state same):

3c. Tel. No.: (804) 737-2155
3d. Fax No.: (804) 737-1260
3e. Cell No.: (804) 762-2228
3f. E-Mail Address: peter.albanese@penske.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.): Truck Leasing
4b. Principal product or service: Truck maintenance & repair

5a. Description of Unit Involved
Included:
Excluded:

6. No. of Employees in Unit: 16
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? Yes No

8a. Name of Recognized or Certified Bargaining Agent: Teamsters Local Union No. 592
8b. Affiliation, if any:

8a. Address: 3705 Carolina Avenue, Richmond, VA 23222
8d. Tel. No.: (804) 329-9530
8e. Cell No.:
8f. Fax No.: (804) 321-4074
8g. E-Mail Address:

9. Date of Recognition or Certification:
10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year): 12/18

11a. Is there now a strike or picketing at the Employer's establishment(s) involved? Yes No
11b. If so, approximately how many employees are participating?

11c. The Employer has been picketed by or on behalf of (Insert Name) a labor organization, of (Insert Address) 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: Manual Mail Mixed Manual/Mail

13b. Election Date(s): May 21, 2019
13c. Election Time(s): various times
13d. Election Location(s): 540 Trampton Rd Sandston VA 23150

14. Full Name of Petitioner: (b) (6), (b) (7)(C)
14b. Tel. No.: (b) (6), (b) (7)(C)
14c. Fax No.:
14d. Cell No.: (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.
15b. Tel. No.: (b) (6), (b) (7)(C)
15d. Tel. No.: (b) (6), (b) (7)(C)
15a. Fax No.: (b) (6), (b) (7)(C)

16. Signature: (b) (6), (b) (7)(C)
Date Filed: 5/9/19

STATEMENTS CAN BE FORNISHED BY FINE AND PENALTY CODE, TITLE 18, SECTION 1001)

Submission 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.