UNITED STATES GOVERNMENT				DO NOT WRITE IN THIS SPACE			
	DR RELATIONS BO			Case No. 5-	-RC-259860	Date	Filed 5/1/20
INSTRUCTIONS: Unless e-Filed			ww nlrb a	ov submit a	on original of this	Petition to a	n NI RB office in the Region
in which the employer concerne							
of service showing service on t							
(Form NLRB-505); and (3) Desc							
with the NLRB and should not k					12 1012). 1110 0	in the second second	ereet eneura enily se mea
1. PURPOSE OF THIS PETITION: RC					of employees wish to	o be represented	d for purposes of collective
bargaining by Petitioner and Petition							
requests that the National Labor R 2a. Name of Employer	elations Board pro				t(s) involved (Street a		
Inside Higher Ed Inc.					NW Suite 400,		
3a. Employer Representative – Name	and Title				s 2b – state same)		
Mark Belles, CEO			Same	•			
3c. Tel. No.	3d. Cell No.	0.0747M	3e. Fax M	No.		3f. E-Mail Add	ress
202-659-9208	202-262-39	42					s@insidehighered.com
4a. Type of Establishment (Factory, min	e, wholesaler, etc)	4b. Principal pro	oduct or serv	vice			and State where unit is located:
News Organization		Digital news				Washin	igton, D.C.
5b. Description of Unit Involved	a		3 22	8	0 00 0	222 12	6a. No. of Employees in Unit:
Included: All full-time and regu	ilar part-time e	ditorial and tecl	hnology e	employees e	employed by the	e Employer	12 6b. Do a substantial number (30%
Excluded:						88 X38 138 X	or more) of the employees in the
All other employee	s, including all	managers, gu	uards, an	nd supervise	ors as defined	by the Act.	unit wish to be represented by the
					14/0000		Petitioner? Yes 🗸 No
	- Contraction of the second	rgaining Representa (If no reply receive			$\frac{1}{2020}$ ar	a Employer dec	lined recognition on or about
					certification under the	e Act	
8a. Name of Recognized or Certified	Bargaining Agent	If none, so state).	tepresentati	8b. Address			
None 8c. Tel No.	8d Cell No.	12 AU	8e. Fax M	No		8f. E-Mail Add	ress
			oo.run				
8g. Affiliation, if any			8h. Date of	f Recognition or	r Certification		Date of Current or Most Recent y (Month, Day, Year)
						Contract, if an	y (Monul, Day, Year)
9. Is there now a strike or picketing at the	e Employer's estab	lishment(s) involved	1? No	If so, approx	imately how many er	nployees are pa	rticipating?
(Name of labor organization)							
10. Organizations or individuals other th							d other organizations and individuals
known to have a representative interest							
None	405 4	d des es l			40- T-L N-		
10a. Name	10D. A	ddress			10c. Tel. No.		10d. Cell No.
					10e. Fax No.		10f. E-Mail Address
11. Election Details: If the NLRB cond	ucts an election in t	his matter, state you	ur position w	ith respect to	11a. Election Type	: Manual	✓ Mail Mixed Manual/Mail
any such election. 11b. Election Date(s):	11c.	Election Time(s):			11d. Election Loca	tion(s):	50Pa-
May 15							
12a. Full Name of Petitioner (includin Washington-Baltimore News Guild	g local name and i	number)			12b. Address (stre 1225 Eye Street, N		city, state, and ZIP code) on, D.C. 20005
12c. Full name of national or internation The NewsGuild-Communications Work			r is an affilia	te or cons ituent	t (if none, so state)		
12d. Tel No. (202) 785-3650, ext. 13	12e. Cell No.		12f. Fax	No.		12g. E-Mail Ac preilly@wbng.	
13. Representative of the Petitioner v	ho will accept ser	vice of all papers f	for purpose	s of the repres	entation proceedin	g.	
^{13a. Name and Title} Michael N	lelick attor	nev	13b. Add	Iress (street and	d number, city, state,	and ZIP code)	
		пеу	1025 Conr	necticut Ave., Suite	e 1000, Washington, D.C		
13c. Tel No. (202) 293-9222	13d. Cell No. (443) 682-386	7	13e. Fax	No.		13f. E-Mail Ad mmelick@bar	
I declare that I have read the above p			ue to the be	est of my know	ledge and belief.	minelick@ball	camens.com
Name (Print)	Signature		Title			Date	
Michael Melick	/s/ Michael Melick		Attorney			5/1/2020	
WILLFUL FALSE STATE		ETITION CAN BE		BY FINE AND	IMPRISONMENT (U	S CODE TITI	E 18. SECTION 1001)

UNITED STATE	S GOVERNMENT	-		DO NOT WRITE IN THIS SPACE				
NATIONAL LABOR		ARD	Case No.	JIIZU				
	TITION			260086				
INSTRUCTIONS: Unless e-Filed us	ing the Agenc	y's website, <mark>ww</mark>	<u>w.nlrb.gov</u> , submit a	an original of this	Petition to a	n NLRB office in the Region		
in which the employer concerned	is located. Th	e petition must	be accompanied by	both a showing of	interest (se	e 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-CE								
bargaining by Petitioner and Petitioner d requests that the National Labor Rela								
2a. Name of Employer	tions board proc		dress(es) of Establishmen					
Airbus Americas Customer Services, Inc.		21 VA	780 Filigree Court Ashburn 20147-					
3a. Employer Representative - Name and	d Title		Address (If same as					
Michael Young			2550 Wasser Terr VA Herndon 2017	ace Suite 9100				
3c. Tel. No.	3d. Cell No.		3e. Fax No.		3f. E-Mail Add			
(703) 929-8771			4. m		michael.young@			
4a. Type of Establishment (Factory, mine,	wholesaler, etc)	4b. Principal prod			5a. City	and State where unit is located:		
Aerospace & Defense		air	craft parts warehouse and	inspection		Ashburn, VA		
5b. Description of Unit Involved						6a. No. of Employees in Unit: 14		
Included: See Attached Page 2 for addition	nal details					6b. Do a substantial number (30%		
						or more) of the employees in the		
Excluded: See Attached Page 2 for addition	nal details					unit wish to be represented by the		
	Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition on or about							
Check One: 7a. Request for re	and the second			and	Employer dec	lined recognition on or about		
The Petitioner is a		(If no reply received	presentative and desires	certification under the	Act			
8a. Name of Recognized or Certified Bar			8b. Address					
8c. Tel No.	8d Cell No.		8e. Fax No.		8f. E-Mail Add	2291		
Subtro sopre servers	ou commo.							
8g. Affiliation, if any		1	8h. Date of Recognition of	r Certification		Date of Current or Most Recent y (Month, Day, Year)		
					Conduct, il dif	y (month, buy, rear)		
9. Is there now a strike or picketing at the E	mployer's establis	shment(s) involved?	If so, approx	kimately how many em	ployees are pa	rticipating?		
(Name of labor organization)		has picke	eted the Employer since (Month Day Year)				
10. Organizations or individuals other than			5 P					
known to have a representative interest in a					Cochiany Co and	other organizations and individuals		
220			27.532 263					
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.		
				10e. Fax No.		10f. E-Mail Address		
 Election Details: If the NLRB conduct any such election. 	s an election in th	is matter, state your	r position with respect to	11a. Election Type:	Manual	Mail Mixed Manual/Mail		
11b. Election Date(s):	11c. E	lection Time(s):		11d. Election Locati	on(s):			
May 27, 2020	1:30 - 2	2:30 p.m.		conference room ne	ar front of facili	ty NOTE: Petitioner is willing to pro-		
12a. Full Name of Petitioner (including lo William H. Haller International Association of Machinists and Aerospa	ocal name and nu ace Workers	umber)		12b. Address (stree 9000 Machinists Plac MD Upper Mariboro	t and number, o	city, state, and ZIP code)		
12c. Full name of national or international la International Association of Machinists and	abor organization		is an affiliate or cons ituen	it (if none, so state)				
12d. Tel No.	12e. Cell No.	D1215	12f. Fax No.		12g. E-Mail Ad	idress		
(301) 967-4510	(202) 286-5040				whaller@iama	w.org		
13. Representative of the Petitioner who	will accept servi	ice of all papers fo	r purposes of the repres	sentation proceeding				
13a. Name and Title William H. Haller Associate General Counse			13b. Address (street and	d number, city, state, a	and ZIP code)			
IAMAW Legal Department	827V		9000 Machinists Place MD Upper Marlboro 207	772-				
13c. Tel No. (301) 967-4510	13d. Cell No.		13e. Fax No.		13f. E-Mail Ad whaller@iama			
I declare that I have read the above petit	(202) 286-5040		e to the best of my know	5	Contraction (Security	3		
			Title		Date			
	gnature /illiam H. Haller		Associate General Coun	isel	05/7/2020	14-12-04		
WILLFUL FALSE STATEME		TITION CAN BE P	UNISHED BY FINE AND	IMPRISONMENT (U.S				

DO NOT WRITE IN THIS SPACE

Case

Attachment

Date Filed

Employees Included Certified Specialists/Inspectors

Employees Excluded All other employees

FORM NLRB-502 (RC) UNITED STATES OF AN			AMERIC	MERICA		DO NOT WRITE IN THIS SPACE				
(2-18)	NATION	ATIONAL LABOR RELATIONS RC PETITION)	Case 5	-RC-260	109	Date	Filed 5/8/20
INSTRUCTIONS: Unless e-Filed employer concerned is located. the employer and all other partie Case Procedures (Form NLRB 4	The petitions and a second sec	n must be accom n the petition of: (howing of interes	panied 1) the p t shou	by bo betition Id only	th a showing of interest (s n; (2) Statement of Position y be filed with the NLRB and	see 6b on forn nd sho	b below) and a m (Form NLRE ould not be se	a certificate o 3-505); and (erved on the	of service showing 3) Description of I employer or any o	r service on Representation other party.
1. PURPOSE OF THIS PETITION: bargaining by Petitioner and Pet requests that the National Lab	itioner desir	es to be certified a	s repre	sentati	ve of the employees. The F	Petition	ner alleges th	at the follow	ing circumstance	collective s exist and
2a. Name of Employer:			2b. Ac	ddress((es) of Establishment(s) inv	olved ((Street and nur	mber, City, Si	tate, ZIP code):	
Vicinity Energy					lgely Street, Baltim		MD 2123	0		
3a. Employer Representative - Na	me and Titl	e:	3b. Ac	dress	(if same as 2b - state same	ə):				
Matt Ware, Vice Presider	nt of Op		Sam		Fax No.		3f. E-Mail Add	1		
(410) 649-2464	Su. Cell N	10,		Se. 1	Fax NO.				icinityEnergy	.us
4a. Type of Establishment (Factory, District Energy Distributi		esaler, etc.)			Principal Product or Service Stribution	9	5 I	ia. City and S Baltimor	e, MD	ocated:
5b. Description of Unit Involved: Included:									f Employees in Unit	:
See Attachment							4	16		
Excluded: See Attachment							6	of the emp	tantial number (30% loyees in the unit w d by the Petitioner	ish to be
Check One: 7a. Request for re- on or about (Date)	N	I/A (If no	o reply	receive	ed, so state).	N/A	*		lined recognition	
8a. Name of Recognized or Certific					ative and desires certification 8b. Address:	on una	ier the Act.			121
Nono					NT/A					
None 8c. Tel. No.	8d. Cell N				N/A Fax No.		05 5 11-11 4 11			
oc. Tel. NO.	ou. Cell N	υ.		oe. r	ax no.	ſ	8f. E-Mail Add	ress		
8g. Affiliation, if any:			8	8h. Date of Recognition or Certification 8i. Expiration Date of Recent Contract, if an						
9. Is there now a strike or picketing a	t the Emplo	yer's establishmen	nt(s) inv	olved?	No If so, approx				e participating?	
(Name of Labor Organization)			N/A			10. 10.			ince (Month, Day,)	Contraction and the second
10. Organizations or individuals othe individuals known to have a repre None	r than Petiti esentative ir	oner and those nai iterest in any empl	med in oyees i	items 8 in the u	3 and 9, which have claimed init described in item 5b abo	d recog ove. (If	gnition as repre f none, so state	esentatives a e)	nd other organizati	ons and
10a. Name		10b. Address				1	10c. Tel. No.	100	d. Cell No.	
N/A		N/A					10e. Fax No.	10	10f. E-Mail Address	
							100.1 02.100.			
11. Election Details: If the NLRB co	nducts and	election in this mat	ter, sta	te your	position with respect to an	ly such	n election: 11a	a. Election Ty] Manual [d Manual/Mail
11b. Election Date(s): 05/28/2020		11c. Election Time N/A	e(s):		a		11d. Election L N/A	ocation(s):		
12a. Full Name of Petitioner (includ	ing local na	me and number):			12b. Address (street	and nu	umber, city, St	ate and ZIP o	code):	
Plumbers and Pipefitters I	local 48	6			8100 Sandpipe	er Ciı	rcle, Suite	200, Not	tingham, MD	21236
12c. Full name of national or internati United Association of Jou	onal labor c rneymer	rganization of which and Appren	ch Petit tices	ioner is of th	s an affiliate or constituent (e Plumbing and Pip	<i>(if none</i> pe Fi	e, so state): itting Indu:	stry of th	e U.S. and Ca	nada
12d. Tel. No. (410) 866-4380	12e. Cell N	0.		12f. F	ax No.	1	12g. E-Mail Address			
13. Representative of the Petitioner 13a. Name and Title:	r who will a	ccept service of a	all pape	13b. A	Address (street and number	r, city,	State and ZIP	code):		
Keith R. Bolek, Attorney				O'Donoghue & O'Donoghu 5301 Wisconsin Avenue, N			hue LLP, NW, Suite 800 Washington, D.C. 20015			
13c. Tel. No. (202) 362-0041	13d. Cell N (202) 36	55-4764			Fax No.	k	13f. E-Mail Address kbolek@odonoghuelaw.com			
I declare that I have read the above Name (Print)	petition ar	id that the statem Signature	ents a	re true	to the best of my knowle	dge ar Title	nd belief.			Date
Keith R. Bolek		Keit	te	kn	Collecture .		orney			05/08/20

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.

ATTACHMENT

5b. Description of the Unit Involved

Included:

All full-time and regular part-time maintenance employees employed by the Employer out of its facility located at 1400 Ridgely Street, Baltimore, MD 21230.

Excluded:

All other employees, office clerical employees, guards, managerial employees, supervisors as defined by the Act.

FORM NLRB-502 (RC)				DO NOT WRITE IN THIS SPACE					
(2-18)		TIONS BO	ARD		Case No.	5-RC-260	109	Date File 5/1	ed 8/20
INSTRUCTIONS: Unless e-Filed us employer concerned is located. Ti the employer and all other parties Case Procedures (Form NLRB 48	he petition must be accon named in the petition of:	npanied by (1) the pet	both a sh ition; (2) S	owing of interest (s tatement of Position	ee 6b below) a n form (Form N	nd a certifica ILRB-505); an	e of service she d (3) Descriptio	owing se n of Rep	rvice on resentation
1. PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Labo	ioner desires to be certified	as represe	ntative of th	e employees. The P	etitioner allege	s that the foll	owing circumst	ances ex	
2a. Name of Employer:		2b. Addr	ess(es) of l	Establishment(s) invo	olved (Street an	d number, City	, State, ZIP code	<i>):</i>	1. 1. 1. 1. 1.
See Attachment		1400	Ridgely	Street, Baltim	ore, MD 21	230			
3a. Employer Representative - Nan	ne and Title:	3b. Addr	ress (if sam	e as 2b - state same,):				
Matt Ware, Vice Presiden	-	Same			La: =				
3c. Tel. No. (410) 649-2464	3d. Cell No.		3e. Fax No		3f. E-Mai Matthe	Address	VicinityEn	ergy.u	s
4a. Type of Establishment (Factory,) District Energy Distribution	l mine, wholesaler, etc.) 011		4b. Princip Distribu	al Product or Service		5a. City an	d State where up ore, MD		the second se
5b. Description of Unit Involved:							er of Employees	in Unit:	
See Attachment						46			
Excluded: See Attachment						of the e	ubstantial numbe employees in the ented by the Peti	unit wish	tobe
Check One: 7a. Request for rec on or about (Date)			was made ceived, so		N/A a	and Employer	declined recognit	tion	
7b. Petitioner is cu	rrently recognized as Barga	ining Repre	sentative a	ind desires certification	on under the Ac	t.			1000
8a. Name of Recognized or Certific	ed Bargaining Agent (If no	ne, so state	e) 8b. Ad	dress:					
None			N/A						
8c. Tel. No.	8d. Cell No.		8e. Fax No).	8f. E-Mai	Address			
8g. Affiliation, if any:		8h				tion Date of C contract, if any	urrent or Most (Month, Day, Ye	ar)	
9. Is there now a strike or picketing a	t the Employer's establishm	nent(s) invo	lved? No	If so, appro	ximately how n	any employee	s are participatin	g?	
(Name of Labor Organization)		N/A			, has picket	ed the Employ	er since (Month,	Day, Ye	ar)
10. Organizations or individuals othe individuals known to have a representation None							es and other org	anization	s and
10a. Name	10b. Address	- Andrewski			10c. Tel.	No.	10d. Cell No.		
N/A	N/A				10e. Fax		10f. E-Mail Address		
		121.2							
11. Election Details: If the NLRB co	onducts and election in this r	matter, state	e your posit	tion with respect to a	ny such election	11a. Election		Mixed	Manual/Mail
11b. Election Date(s): 05/28/2020	11c. Election T N/A	Time(s):			11d. Elec N/A	tion Location(s):		
12a. Full Name of Petitioner (includ	ding local name and number	r):		12b. Address (stree	and number, o	city, State and	ZIP code):		
Plumbers and Pipefitters	Local 486			8100 Sandpip	er Circle, S	Suite 200,	Nottingham	, MD	21236
	12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): United Association of Journeymen and Apprentices of the Plumbing and Pipe Fitting Industry of the U.S. and Canada								
12d. Tel. No. (410) 866-4380	12e. Cell No.		12f. Fax N	0.	12g. E-N	lail Address			
13. Representative of the Petitione 13a. Name and Title:	er who will accept service	of all pape	13b. Addre O'Dono	ess (street and numb ghue & O'Donog	er, city, State a ghue LLP,	nd ZIP code):			
Keith R. Bolek, Attorney		1	Show and the second state	isconsin Avenue			ington, D.C.	20015	100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100
13c. Tel. No. (202) 362-0041	13d. Cell No. (202) 365-4764		13e. Fax N	NO.		ail Address	huelaw.con	n	
I declare that I have read the abov		tements ar	e true to th	he best of my know				-	
Name (Print) Keith R. Bolek	Signatu	ine	Ken		Attorney				Date 05/16/20
WILLFUL FALSE STA	TEMENTS ON THIS PETIT	TION CAN		HED BY FINE AND I	MPRISONMEN	T (U.S. CODE	TITLE 18. SEC	TION 10	11)

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.

ATTACHMENT

2a. Name of Employer

Vicinity Energy Baltimore Heating LLP and Vicinity Energy Baltimore Cooling LLP, a Single Employer

5b. Description of the Unit Involved

Included:

All full-time and regular part-time mechanics, meter technicians, plant operators, stationary engineers, distribution mechanics, electricians, operations team leads, IM and E specialists, IM and E leads, OAM technician III leads, planners and general maintenance workers employed by Vicinity Energy Baltimore Heating LLP and Vicinity Energy Baltimore Cooling LLP at the facilities located 1400 Ridgely Street, 6 S. Frederick Street, 1500 Leadenhall Street, 201 North Central Avenue, 1 West Pratt Street, 785 Constitution Street, 300 West Preston Street, 641 West Saratoga Street, 1001 Fleet Street, 331 West Saratoga Street, and 2800 Sethlow Road, Baltimore, Maryland

Excluded:

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

UNITED STATES			DO NOT WRITE IN THIS SPACE				
RC PE	Case No. 5-	Case No. 5-RC-260371 Date Filed 5/14/20					
INSTRUCTIONS: Unless e-Filed us		y's website, ww	w.nlrb.gov, submit a	n original of this P	etition to a	n 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	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) Descript				RB 4812). The sho	wing of int	erest should only be filed	
with the NLRB and should <u>not</u> be s	erved on the	employer or any	y other party.				
1. PURPOSE OF THIS PETITION: RC-CE bargaining by Petitioner and Petitioner de requests that the National Labor Relat	esires to be certifi	ied as representa iv	e of the employees. The	Petitioner alleges that	the following	g circumstances exist and	
2a. Name of Employer		2b. Add	dress(es) of Establishment	t(s) involved (Street and			
Prosegur Security Group (f/k/a Command Se			340 Dresden Street Suite Sterling 20166-9337	101.468			
3a. Employer Representative – Name and	Title		3b. Address (If same as 512 Herndon Park	A REAL PROPERTY OF A REA			
Forrest Dane Dodd 3c. Tel. No.	3d. Cell No.		512 Herndon Park VA Herndon 2017 3e, Fax No.		f. E-Mail Add	ress	
(571) 665-3025	(904) 622-6579	9			Dane Dodd@pro		
4a. Type of Establishment (Factory, mine, w	vholesaler, etc)	4b. Principal prod	duct or service		5a. City	and State where unit is located:	
Communications Services		Alan	m Monitoring and Dispatch	h Call Center		Sterling, VA	
5b. Description of Unit Involved						6a. No. of Employees in Unit:	
Included: See Attached Page 2 for addition	nal details					26 6b. Do a substantial number (30%	
						or more) of the employees in the	
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	cognition as Barg	jaining Representat	tive was made on (Date) 0	5/04/2020 and I	Employer dec	lined recognition on or about	
05/13/2020	(Date)	(If no reply received	d, so state). Yes			en solution and here - en en construction de la	
			presentative and desires of	certification under the A	ct.		
8a. Name of Recognized or Certified Bar	gaining Agent (I	r none, so state).	8b. Address				
8c. Tel No.	8d Cell No.		8e. Fax No.	8	f. E-Mail Add	ress	
8g. Affiliation, if any	I	1	8h. Date of Recognition or	n 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 E	mployer's establis	shment(s) involved?	Nolf so, approx	imately how many emp	loyees are pa	rticipating?	
(Name of labor organization)		, has picke	eted the Employer since (I	Month, Day, Year)			
10. Organizations or individuals other than I	Petitioner and tho	se named in items 8	8 and 9, which have claim	ed recogni ion as repres	sentatives and	d other organizations and individuals	
known to have a representative interest in a	ny employees in	the unit described in	n item 5b above. (If none,	so state)			
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.	
				10e. Fax No.		10f. E-Mail Address	
11. Election Details: If the NLRB conducts any such election.	an election in th	is matter, state your	r position with respect to	11a. Election Type:	Manual 💽	Mail Mixed Manual/Mail	
11b. Election Date(s): 5/22/2020	to characterize a second se	lection Time(s):		11d. Election Location(s):			
12a. Full Name of Petitioner (including lo	10AM-			Mail Ballot	and number	city, state, and ZIP code)	
Alex van Schaick Communications Workers of America				501 3rd St NW 6th Flo DC Washington 20001	or, CWA Legal	Department	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or cons ituent (if none, so state) AFL-CIO							
12d. Tel No. (202) 434-1146							
13. Representative of the Petitioner who	will accept servi	ice of all papers fo	r purposes of the repres	entation proceeding.	1.05	5 (2010)	
13a. Name and Title			13b. Address (street and	d number, city, state, an	d ZIP code)		
Communications Workers of America	Alex van Schaick Counsel 501 3rd St NW 6th Floor, CWA Legal Department Communications Workers of America DC Washington 20001-						
13c. Tel No. (202) 434-1146	13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address						
I declare that I have read the above petiti			e to the best of my know	3		nanezo en 1970, F. F. F. (1970) 2022 202	
	anature		Title		Date		
Alex van Schaick Ale	ex van Schaick		Counsel		05/13/2020		
WILLFUL FALSE STATEME	NTS ON THIS PE	TITION CAN BE P	UNISHED BY FINE AND	IMPRISONMENT (U.S.	CODE, TITL	E 18, SECTION 1001)	

	DO NOT WRITE IN THIS SPACE		
Attachment	Case 5-RC-260371	Date Filed 5/14/20	

Employees Included

All full-time and regular part-time Dispatchers (including level I, level II, level III, Lead Dispatchers, and Dispatchers on Watch Desk Assignment), Alarm Technicians, and Dispatch/Data Analysts employed by Prosegur (formerly known as Command Security Corporation) at the the National Law Enforcement Communication Center located at 22340 Dresden Street, Sterling, VA.

Employees Excluded

Managers, confidential employees, guards, and supervisors as defined in the Act.

UNITED STATES GOVERNMENT DO NOT WRITE IN THIS SPACE									
NATIONAL LABOR			Case No E	Case No. 5-RC-260494 Date Filed 5/18/20					
RC PE			Case No. 3-	KC-200494	Date	5/18/20			
		wa wahaita wara	unlish gov outmit o	n original of this	Potition to	on NI DD office in the Degion			
INSTRUCTIONS: Unless e-Filed using the Agency's website, <u>www.nlrb.gov</u> , submit an original of this Petition to an NLRB office in the Region									
	in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate								
	of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form								
	(Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed								
with the NLRB and should <u>not</u> be s									
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 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									
Kennedy Krieger Institute			N. Broadway						
3a. Employer Representative - Name and	Title		Baltimore 21205- 3b. Address (If same as	2b - state same)					
Bradley L. Schlaggar			707 N. Broadway MD Baltimore 2120	05					
3c. Tel. No.	3d. Cell No.		3e. Fax No.	00-	3f. E-Mail Ad	dress			
(443) 923-9320					ceo@kennedy	krieger org			
4a. Type of Establishment (Factory, mine, w	holesaler, etc)	4b. Principal produc	ct or service		5a. City	and State where unit is located:			
Services		services for children	n & young adults with de	velopmental disabilit	ies ar	Baltimore, MD			
5b. Description of Unit Involved			, ,	•		6a. No. of Employees in Unit:			
Included: See Attached Page 2 for addition	al dotails					302			
						6b. Do a substantial number (30%			
Excluded: See Attached Page 2 for addition	al details					or more) of the employees in the unit wish to be represented by the			
EXCLUDED: See Attached Page 2 for addition	lai detalis					Petitioner? Yes [No []			
Check One: 7a. Request for re	cognition as Baro	aining Representative	e was made on (Date)	an	d Employer de	clined recognition on or about			
	and the second se	(If no reply received, s							
7b Petitioner is cr			resentative and desires of	certification under the	Act				
8a. Name of Recognized or Certified Barg			8b. Address						
5			a.						
8c. Tel No.	8d Cell No.	٤	8e. Fax No.		8f. E-Mail Ad	dress			
8g. Affiliation, if any		8h	a. Date of Recognition or	Certification		Date of Current or Most Recent ny (Month, Day, Year)			
					Contract, if a	ny (month, buy, reur)			
9. Is there now a strike or picketing at the El	mplover's establis	shment(s) involved?	No If so approxi	imately how many en	nnlovees are n	articipating?			
(Name of labor organization)		8 977		25 372 25.52					
10. Organizations or individuals other than F known to have a representative interest in a	Petitioner and tho	se named in items 8 a	and 9, which have claime	ed recogni ion as repl	resentatives a	nd other organizations and individuals			
known to have a representative interest in a	ity employees in	the unit described in i		SU SIGIE)					
10a. Name	10b. Ad	dress		10c. Tel. No.		10d. Cell No.			
A CONFIDENCIES CONFIDENCIES				Transmission (Transmission)					
				10e. Fax No.		10f. E-Mail Address			
		1. <u>121</u> 132 133	6.01 C.C.S. 2204						
11. Election Details: If the NLRB conducts	an election in th	is matter, state your p	osition with respect to	11a. Election Type:	Manual	Mail Mixed Manual/Mail			
any such election. 11b. Election Date(s):	11c F	lection Time(s):		11d. Election Locat	tion(s):				
Ballots out June 5, vote count approx June 2	C	llot count June 26, 20	20	mail ballot count					
12a. Full Name of Petitioner (including lo	cal name and n	umber)		12b. Address (stree	et and number	, city, state, and ZIP code)			
Christopher Cano Service Employees International Union (SEIU) Local	500, CtW			12 Taft Ct MD Rockville 20850	1				
12c. Full name of national or international la	bor organization	of which Petitioner is	an affiliate or cons ituent	t (if none, so state)					
Service Employees Interna ional Union, CLC									
	12d. Tel No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address (304) 740 7400 (813) 767 5295 (304) 740 7439 canoc@seiu500.org								
(301) 740-7100	(813) 767-5295		301) 740-7139	ontation proceeding	0				
13. Representative of the Petitioner who 13a. Name and Title	will accept servi			35					
Steve A Schwartz Legal Consultant			13b. Address (street and 14616 Country Creek Lr		anu ZIP code)				
Independent consultant	ndependent consultant MD North Potómac 20878-								
13c. Tel No. (301) 385-7873	13d. Cell No.	33	13e. Fax No.		13f. E-Mail A saschwartzla	ddress w@gmail.com			
	on and that the	statements are true t	to the best of my know	ledge and belief		<u> </u>			
			-	leage and bellet.					
Name (Print) Sig	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								
	eve A. Schwartz		egal Consultant			20 12:23:29			

^{Case} 5-RC-260494

Employees Included

All full-time and regular part-time teachers, assistant teachers, and program aides working in the schools program of Kennedy Krieger Institute at the Fairmont campus, the Greenspring campus, Lifeskills & Education for Students with Autism and Pervasive Behavioral Challenges (LEAP), 1750 E. Fairmont Ave., Baltimore, MD 21211; 3825 Greenspring Ave., Baltimore, MD 21211; and Montgomery County campus, 13313 Old Columbia Pike, Silver Spring, MD 20904.

Employees Excluded

All other employees, including confidential employees, supervisors, and managers

p.1

						DO NOT WRITE IN THIS SPACE				
FORM NLRB-502 (RC) (2-48)	NATIONAL LABOR RE RC PETI	UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION				Sase No. 5-RC-260605 [23] Date Filed 5/20/20				
employer concerned is loca the employer and all other Case Procedures (Form NL	Filed using the Agency's web ated. The petition must be ac parties named in the petition RB 4812), The showing of int	of: (1) the peterest should	itition; (2) i only be fil	nowing of interest (Statement of Position led with the NLRB a	and should	form NLJ I not be	certrical certrical served on t	d (3) Descrip the employe	ntion of Representation or any other party.	
bargaining by Petitioner and requests that the Nation	MON: RC-CERTIFICATION Of Ind Petitioner desires to be certi- al Labor Relations Board pro	fied as repres	entative of i is proper a	the employees. The uthority pursuant t	Petitioner o Section	9 of the	that the fol National La	bor Relation	nstances exist and is Act	
2a. Name of Employer: TIER TECH		^{2b. Ad} 6201	Woodla	Establishment(s) in awn drive MD	volved (Str) 21244	eet and n	iumber, Cilj	r, State, ZIP o	10 0 (e):	
3a. Employer Representativ Michael Elliott/ Proj		3b. Ad	dress (il sau	ne as 2b - state sam	e):					
3c. Tel. No. 410-965-4622		3e. Fax N 888-50	6342	36	E-Mail A					
4a. Type of Establishment (F. Government	actory, mine, wholesater, etc.)		4b. Princi Securit	pal Product or Servic	æ			awn, M	re unit is located: D	
5b. Description of Unit Invo Included: All Security officers			1		and a second	14 - B	6a. Numb 34	er of Employe	ees in Unit:	
the state of the s	s, office and non-emp	No. of Lot Lot Lot and the second		///			of the repres	employees in ented by the	mber (30% or mote) the unit wish to be Petitioner? I Yes D No	
on or about	t for recognillon as Bargaining (Date) er is cultently recognized as Be	(If no reply a	ebeived, so	state).	tion under		d Employer	declined reco	ignition	
8a. Name of Recognized or spfpa local 555	Certified Bargaining Agent ()	fnona, so sta	(15) 8b. A 255	ddress: 10 Kelly road,	Rossvi	ille Mi	chigan 4	8066	(c)	
8c. Tel. No. 586-772-7250	(b) (6), (b) (7)(C)		Be Fax N 586-77	n. 12-9644	(b) (6).	(b) (7)	(C)	······································	
8g. Athiliation, if any:		8		Recognition or Certifi	cation Bi.	Explicatio	n Date of C		r Year) 08/14/20	
9. Is there now a strike or pid (Name of Labor Organization	keting at the Employer's establi	shment(s) inv	olved? N() Ifso, app				es are panticip er since (Mo	ating? nth, Day, Year)	
10. Organizations or individus individuals known to have	ils other than Pelitioner and the a representative interest in any	se named in remployees i	items 8 and n the unit d	9, which have claim escribed in item 5b a	ied recogni bove. (If n	illion es re one, so s	epresentativ tale)	es and other	organizations and	
10a. Name	10b. Addre	55	-		10	c. Tel. No).	10d Cell No	a.	
	1				10	e. Fax No) .	101. E-Mail	Address	
11. Election Details: If the N	LRB canducts and election in th	ils matter, sta	le your pos	ilion with respect to a	any such e	lection:			Mixed Manual/Mail	
116. Election Date(s): 05/30/20	ALL D	A.Y		1984 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2		d, Electio	n Location (
12a. Full Name of Petitioner Governed United Sec	(including local name and num curity Professionals	iber):		12b. Address (stre 5602 Baltimo Catonsville, 1	ore-Nat	tional	State and Pike sui	zif code): te 607		
12c. Full name of national or I Governed United Sec	ntemational labor organization	of which Petil	ioner is an	afhliate or constituen	t (il none, .	so stale):				
12d. Tel. No. 443-304-2018	12e. Cell No. 443-562-3230			4-2855			(b) (7)	(C)	*,*: *. /* ****.	
13. Representative of the Pe 13a. Name and Title:	Olioner who will accept servi	ice of all pap	13b. Adds 5602 B	poses of the repres ess (street end num) altimore-Nation ville, MD 21228	ber, city, St ral Pike	tate and i	ZIP code):		444.400	
13c. Tel. No. 443-304-2018	13d. Cell No. 443-562-3230		ALL TALLET A	4-2855			(b) (7)	(C)		
Name (Print)	e above petition and that the Sign	statements a nature /	ne true to t	he best of my know	Title	d beliet.	10951050		Date	
Kent Emery		Ken	大之	·	Presi	dent			05/20/20	

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