# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No. 5-RC-230274	Date Filed 11/1/18				

INSTRUCTIONS: Unless e-Filed us employer concerned is located. Ti the employer and all other parties Case Procedures (Form NLRB 481	he petition must i named in the pe	e accompanie ition of: (1) the	ed by bo e petitio	th a sh n; (2) S	nowing of interest (se statement of Position	ee 6b belov form (For	w) and m NLR	a certificat RB-505); an	e of sen d (3) Des	vice s script	showing s tion of Re	ervice on presentation
PURPOSE OF THIS PETITION: For bargaining by Petitioner and Petitioner and Petitioner states that the National Laboratory	ioner desires to be	certified as rep	resentat	ive of th	ne employees. The Pe	etitioner all	leges t	hat the foll	owing ci	ircum	nstances	
2a. Name of Employer: 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):												
Concrete Pipe and Precast, LLC 3801 Cook Blvd., Chesapeake, VA 23323												
3a. Employer Representative - Nam	ne and Title:	3b.	Address	(if sam	ne as 2b - state same):	:						
John Brabble												
3c. Tel. No. 800-999-2278	3d. Cell No.			Fax No.	7-2992	3f. E-	Mail A	ddress				
4a. Type of Establishment (Factory, r.	mine, wholesaler, e	etc.)			al Product or Service			5a. City an	d State v	vhere	unit is loc	ated:
Batch Plant			Pr	e-cas	st concrete prod	ucts		Chesapea	ike, VA	L		
5b. Description of Unit Involved: Included:								6a. Numbe	r of Emp	loyee	es in Unit:	
Full- and regular part-time	e operators, f	oreman, qu	iality (	contr	ol & production	emplo	yees					
Excluded: Office clericals, managers									mployee inted by	s in the P	he unit wis etitioner?	or more) sh to be  Yes No
Check One: 7a. Request for rec							and	Employer	declined	recog	Inition	
on or about (Date)  7b. Petitioner is cur		(If no rep as Bargaining R				n under the	Act.					
8a. Name of Recognized or Certifie					dress:							
NONE												
8c. Tel. No.	8d. Cell No.		8e. Fax No. 8f. E-Mail Address									
8g. Affiliation, if any:  8h. Date of Recognition or Certification Recent Contract, if any (Month, Day, Year)												
Is there now a strike or picketing at (Name of Labor Organization)	t the Employer's e	stablishment(s)	involved	?	▼ If so, approx	•		y employee			· —	earl
10. Organizations or individuals other	r than Petitioner ar	d those named	in items	8 and	9. which have claimed							
individuals known to have a repre						_		•			.gaaaa	
10a. Name	10b. A	Address				10c.	10c. Tel. No. 10d. Cell No.					
NONE												
							10e. Fax No. 10f. E-Mail Address					
11. Election Details: If the NLRB con	nducts and election	n in this matter,	state yo	ur posit	tion with respect to any	y such elec	tion:					
44h Eleation Data (a)	laa. r	"I4  <b>T</b>  (-)				laa i i		× Manua		laıl	Mixed	d Manual/Mail
11b. Election Date(s): November 30, 2018		Election Time(s) $80 \text{ a.m. to } 2$		<b></b>			ak ro	n Location(s	s):			
12a. Full Name of Petitioner (includ			2.00 p	111	12b. Address (street				7ID code	١٠		
Public Service Employees					5627 Allentow						s, MD 2	20746
12c. Full name of national or international Ur Laborers' International Ur	_		Petitioner	is an a	I affiliate or constituent (	(if none, so	state):					
12d. Tel. No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 301.316.4888												
13. Representative of the Petitione	r who will accent	service of all r	naners f	or nurr	noses of the represe	ntation nro	reedi	20				
13a. Name and Title:	wiio wiii accept	service of all p			ess (street and number			_				
Brian Petruska, Counsel					reedom Drive., I	-		-	0190			
13c. Tel. No.	13d. Cell No.		136	13e. Fax No.			13f. E-Mail Address					
703-860-4194   703-860-1865   bpetruska@maliuna.org												
I declare that I have read the above	petition and tha		ts are tr	ue to th	ne best of my knowle		elief.	<del></del> _			<del></del> _	
Name (Print)		Signature	Date	also		Counc	ol.					Date 11/1/19
Brian Petruska /s/Brian J. Petruska				Counsel			11/1/18					

(2-18)

7574409434

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD HRDC

PAGE

02

DO NOT WRITE IN THIS SPACE

Case No. Date Filed

**RC PETITION** 5-RC-230425 INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nitb.gov/, submit an original of this Patition 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. 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): ITS Technology & Logistics, LLC d/b/a ITS 1710 Atlantic Ave., Chesapeake, VA 23324 ConGlobal 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): Authory Lee, Terminal Manager (same as above) 3c. Tel. No. 757-275-1274 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 708-688-1048 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service 5a. City and State where unit is located: railroad terminal load & offload intermodal units Chesapeake, Virginia 5b. Description of Unit Involved: 8a. Number of Employees in Unit. Included: All terminal operators, gate clerks, and container/chassis mechanics 6b. Do a substantial number (30% or more) All office, watchmen, guards, professional employees & supervisors as defined by Act of the employees in the unit wish to be represented by the Petitioner? 🗵 Yes Check One: X 7a. Request for recognition as Bargaining Representative was made on (Date) October 3, 2018 and Employer declined recognition (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 8c. Tel. No. 8d. Cell No. Se. Fax No. 8f. E-Mall 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?  $N_{O}$ 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 NLAB conducts and election in this matter, state your position with respect to any such election; [11a. Election Type: 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s) a Monday in November 2018 men's break room at work site 8 a.m. to 10 a.m. 12a. Full Name of Petitioner (including local name and number): 12b. Address (street and number, city, State and ZIP code): ILA Local 1970 3300 East Princess Anne Road, Norfolk, VA 23502 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Longshoremen's Association 12d. Tel. No. 12e. Cell No. 12f. Fax No. 757-852-9304 757-348-3657 kevbasnight@yahoo.com 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, State and ZIP code). 13a. Name and Title: 3300 Fast Princess Anne Road, Norfolk, VA 23502 Kevin Basnight, President, ILA Local 1970 13f. E-Mail Address 13c. Tel. No 13d. Cell No. 13e. Fax No. 757-852-9304 757-348-3657 kevbasnight@yahoo.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) Signature President, ILA Local 1970 Kevin Basnight

## UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE							
Case No.	Date Filed 11/5/18						
5-RC-230507	11/3/10						

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 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 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 7900 Cinder Bed Rd VA Lorton 22079-1005 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 7900 Cinder Bed Rd VA Lorton 22079-1005 Terence Thompson 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address terence.thompson@transdev.com (804) 305-7458 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Transportation **Public Transit Service** Lorton, VA 5b. Description of Unit Involved 6a. No. of Employees in Unit: 60 Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in he Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V 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 curren ly 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 8q. 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 Mail \_\_\_\_ Mixed Manual/Mail 11a. Election Type: Manual any such election. 11b. Election Date(s): 11c. Election Time(s): 11d. Election Loca ion(s): November 28, 2018 6:00 a.m. to 9:00 a.m. **Training Room** 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Daniel B. Smith Amalgamated Transit Union 10000 New Hampshire Ave 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)

Amalgamated Transit Union 12g. E-Mail Address dsmith@atu.org 12d. Tel No. 12e, Cell No. 12f. Fax No. (202) 714-4219 (301) 431-7116 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) Daniel B. Smith Assistant General Counsel AMALGAMATED TRANSIT UNION 10000 New Hampshire Ave MD Silver Spring 20903-1790 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address dsmith@atu.org (301) 431-7100 (202) 714-4219 (301) 431-7116 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Date Assistant General Counsel Daniel B. Smith 11/5/2018 15:10:15 Daniel B. Smith

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					
5-RC-230507	11/5/18					

### **Employees Included**

All full-time and regular part-time operators, safety supervisors, trainers, mechanics, paint and body technicians, utility workers, fuelers, bus washers, janitor/custodians, parts clerks, and dispatchers employed by the Employer at its Lorton, VA facility

### **Employees Excluded**

All other employees, road supervisors, office clerical employees, managers, guards, professional employees and supervisors as defined by the Act.

FORM NLRB-502 (RC)

## UNITED STATES OF AMERICA

DO NOT WRITE IN THIS SPACE NATIONAL LABOR RELATIONS BOARD (2-18)Case No. Date Filed RC PETITION 5-RC-230513 11/5/18 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: 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): Alutiig Pacific, LLC. 4114 Legato Road, Suite 380, Fairfax, VA 22033 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): David Hoover, HR Manager 1009 Bankton Circle, Hanahan, SC 29410 3c. Tel. No. 3d. Cell No. 843-377-1772 843-819-8260 DHOOVER@ALUTIIQ.COM 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service 5a. City and State where unit is located: Security Systems & Services Security Protection Fort Meade, Maryland 5b. Description of Unit Involved: 6a. Number of Employees in Unit: Included: See attached page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes Excluded: See attached page 2 for additional details 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: NONE 8c. Tel. No. 8d. Cell No. 8e. Fax No. 8f. E-Mail Address 8g. Affiliation, if any: 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? (Name of Labor Organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10a. Name 10h Address 10c. Tel. No. 10d. Cell No. 10e. Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: 11a. Election Type:

Manual Mail Mixed Manual/Mail 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): TBD TBD Mail Ballots 12a. Full Name of Petitioner (including local name and number): 12b. Address (street and number, city, State and ZIP code): Federal Contract Guards of America 445 Park Ave, New York, NY 10022 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. 12f. Fax No. 12e. Cell No. 12g. E-Mail Address 212-541-3753 917-322-2105 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): Guy James, President 445 Park Ave, New York, NY 10022 13c. Tel. No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address 212-541-3753 631-983-7972 917-322-2105 gfjames@fcgoa.com I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Signature WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

## RC Petition - Alutiiq Pacific, LLC.

5b.

### Included:

All full-time and regular part-time Security Officers performing guard duties, as defined by Section 9(b)(3) of the National Labor Relations Act, as amended, employed by the Employer and assigned to Fort Meade, Maryland, on the Employer's contract with the Defense Information Systems Agency.

### Excluded:

All other employees, including administrative, clerical, supervisors, and non-guards, as defined by the National Labor Relations Act.

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE						
Case No.	Date Filed					
5-RC-230666	11/8/18					

INSTRUCTIONS: Unless e-Filed u. employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48	he petition must named in the	t be accomp etition of: (1	anied b	y both a si tition; (2) :	howing of interest (se Statement of Position	ee 6b n form	below) and (Form NL	i a certificat RB-505); ani	e of service s d (3) Descript	howing s ion of Re	ervice on presentation
PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petit requests that the National Laboratory	oner desires to	oo certified as	represe	entative of t	he employees. The Po	etition	ier alleges	that the follo	owing circum	stances e	
2a, Name of Employer. Center for Public Integri	ty		2b, Add 910	ress(es) of 17th Str	Establishment(s) invo eet NW, Suite 7	olved ( 700,	Street and i Washing	gton, DC	State, ZIP co. 20006	de):	
3a. Employer Representative - Nan Joseph Dunbar, CEO	ne and Title:		3b, Add (san		ne as 2b - state same)	J.					1
3c. Tel. No. 202-466-1240	3d. Cell No.			3e. Fax N	0.		3f, E-Mail A		ntegrity.or	re	
4a. Type of Establishment (Factory, a investigative news organ		etc.)		4b. Princip	pal Product or Service	_		5a. City an	d State where nington, I	unit is loc	sled:
5b. Description of Unit Involved: included: all full-time and regular p	art-time em	ployees						21	r of Employee		/
Excluded: supervisors, managers and	l confidenti	al employ	ees as	define	d in the Act			of the e	ibstantial num inployees in the nted by the Pe	e unit wis	h to be
Check One:	none	(If no	reply re	eceived, so	state).	/8/201 on und		d Employer o	eclined recogn	nition	
7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.  8a. Name of Recognized or Certified Bargaining Agent (If nane, so state)  8b. Address:											
Sc. Tel. No.	8c. Tel. No. 8d. Cell No. 8e. Fax No. 8f. E-					8f. E-Mail A	Bf. E-Mail Address				
8g. Affiliation, if any: 8h. Date of Recog				Recognition or Certifica	ation 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)						
9. Is there now a strike or picketing a	t the Employer's	establishmer	nt(s) invo	lved? No	If so, appro		•		are participat	_	
(Name of Labor Organization)  10. Organizations or individuals other						d reco	gnition as n	epresentative	er since (Monti		-
individuals known to have a repre	sentative intere	it in any empl	layees in	the unit de	escribed in item 5b abo	ove. (/	f none, so s	state)			
10a. Name	108	. Address					10c. Tel. No	0.	10d, Cell No.		
						Ī	10e, Fax No. 10f. E-Ma			ail Address	
11. Election Details: If the NLRB co	nducts and elec	ion in this ma	itter, stat	e your posi	tion with respect to an	ny suci	h election:	11a. Election		Mixed	Manual/Mail
11b. Election Date(s): November 28, 2018		Election Tim		pm				ection Location(s): ge conference room			
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 internat The News Guild - Comm					affiliate or constituent	(if non	e, so state)				
12d. Tel. No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address b.corneljett@gmail.com											
13. Representative of the Petitioner who will accept service of all pape 13a. Name and Title: Robert E. Paul, Attorney				apers for purposes of the representation proceeding.  13b. Address (street and number, city, State and ZIP code).  1025 Connecticut Ave. NW, Suite 712  Washington, DC 20036							
13c, Tel. No. 202-857-5000	13d, Cell No.			13e. Fax I 202-22			13f. E-Mail rpaul@2	Address zwerdling	,.com		
I declare that I have read the above	petition and t										Date
Name (Print) Robert E. Paul		Signature	KO	he.	Rand	Title	ttorney				11/8/2018

PRIVACY ACT STATEMENT

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

FORM NLRB-502 (RC)

## UNITED STATES OF AMERICA

DO NOT WRITE IN THIS SPACE Date Filed 5-RC-230817 11/9/18

(2-18)NATIONAL LABOR RELATIONS BOARD Case No. RC PETITION 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: 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): CW Resources, Inc. Defense Intelligence Agency, Anacostia Bolling 6000, Washington DC 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): Ronald Buccilli 200 Myrtle St., New Britain, CT 06053 3c, Tel, No. 3d, Cell No. 3e, Fax No. 3f, E-Mail Address 860-229-7700 860-229-6847 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service 5a, City and State where unit is located: Government office building Cleaning Services Washington DC 5b. Description of Unit Involved: 6a. Number of Employees in Unit: Included: All cleaners, including janitors, floor techs, lead and utility workers Excluded: 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? X Yes office clericals, managerial employees, guards, and supervisors 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 8c. Tel. No. 8d. Cell No. 8e, Fax No. 8f, E-Mail Address 8g. Affiliation, if any: 8h. Date of Recognition or Certification 8i, Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 9. Is there now a strike or picketing at the Employer's establishment(s) involved? If so, approximately how many employees are participating? (Name of Labor Organization) , has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NONE 10a. Name 10b. Address 10c. Tel. No. 10d, Cell No.

			11						
0	1		10e. Fax No.	10f, E-Mail Address					
			,	2000 CONTROL OF CONTRO					
11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: 11a. Election Type:									
			Manua	al Mail Mixed Manual/Mail					
11b. Election Date(s):	11c. Election Time(s):		11d. Election Location(s	3):					
December 7, 2018	1:30 pm to 3:30 pm		Break Room, DI	A Building					
12a, Full Name of Petitioner (including local na	ame and number):	12b. Address (street and	number, city, State and	ZIP code):					

12f. Fax No.

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

Public Service Employees Local Union 572

12e. Cell No.

12d. Tel. No.

Laborers' International Union of North America

301-316-4888 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): Brian Petruska, Counsel 11951 Freedom Dr. Rm. 310, Reston, VA 20190

13c. Tel. No. 13f. E-Mail Address 13d. Cell No. 13e. Fax No.

703-860-4194 703-860-1865 bpetruska@maliuna.org 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) Brian Petruska Counsel

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

5627 Allentown Rd., Ste. 206, Camp Springs, MD 20746

Date

11-9-18

12g. E-Mail Address

#### **UNITED STATES OF AMERICA** NATIONAL LABOR RELATIONS BOARD RC PETITION

!	DO NOT WRITE IN THIS S	SPACE
	05-RC-230900	Date Filed 11-13-2018

					72.VC			17000	
INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.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:				Establishment(s) involv					
SDAC Facilites Services 1775 Duke Street, Alexandria, VA 22314-3428									
3a. Employer Representative - Nan	ne and Title;	3b. Add	ress (if sam	e as 2b - state same):					
Ryan O'Shea		910 1	Landline	Road, Selma, A	L 36701				
3c. Tel. No.	3d. Cell No.		3e. Fax No	t.	3f. E-Mail A				
571-317-5195	same				roshea@		ilitesservices.con		
4a. Type of Establishment (Factory, Federal Office Building	mine, wholesaler, e	tc.)	, ·	al Product or Service es Maintenance		Alexand	<del></del>	ated:	
5b. Description of Unit Involved:				nur t- t		6a. Numbe	er of Employees in Unit:		
Included: All full-time and regular part-tii	me employees employe	d by the employer and	engaged in fa	cilities maintenance		3			
Excluded: All clerical employees, all manager						of the e	ubstantial number (30% employees in the unit wis ented by the Petitioner?	h to be	
Check One: 🕱 7a. Request for rec		Ing Representative	e was made	on (Date) 11-10	)-2018 an		declined recognition		
on or about (Date)		(If no reply re		state).  nd desires certification	under the Act				
8a. Name of Recognized or Certific					Silver are AUL				
none									
8c. Tel. No.	8d. Cell No.	<del></del>	8e. Fax No	<u></u>	8f. E-Mail /	. E-Mail Address			
8g. Affiliation, if any:		81	h. Date of Re	acognition or Certification			urrent or Most (Month, Day, Year)		
9. Is there now a strike or picketing a	at the Employer's es	tablishment(s) invo	olved? No	If so, approxi	mately how ma	ny employee	s are participating?		
(Name of Labor Organization)		• •			, has picketed	d the Employ	er since (Month, Day, Ye	ear)	
10. Organizations or Individuals othe individuals known to have a representation	er than Petitioner an esentative interest i	d those named in in any employees in	tems 8 and 9 1 the unit de	9, which have claimed of scribed in item 5b above	recognition as r re. (If none, so	'epresentativ state)	es and other organizatio	ns and	
none					- (40 =		1404 C-11N-		
10a. Name	10b. A	ddress			10c. Tel. N		10d. Cell No.		
		<u> </u>			10e. Fax N		10f. E-Mail Address		
11. Election Details: If the NLRB co	inducts and election	in this matter, sta	te your posit	ion with respect to any		X Manua	al Mail Mixe	d Manual/Mail	
11b. Election Date(s):		lection Time(s):				on Location(	•		
12-10-2018		0-100pm		·			eak Room		
12a. Full Name of Petitioner (included International Union of Op	-		19	12b. Address (street a 9315 Largo Dr			ZIP code): arlboro, MD 2077	74	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent <i>(if none, so state)</i> : International Union of Operating Engineers									
12d. Tel. No.	12e. Cell No.		12f. Fax No		12g. E-Ma				
202-253-5440	202-253-544		240-71				elocal99.org		
13. Representative of the Petitions	er who will accept	service of all pap	ers for purp	oses of the represen	tation proceed	ting.			
13a. Name and Title: Eamon Clifford				ess (street and number, argo Drive West, I			20774		
13c. Tel. No.	13d. Cell No.	10	13e. Fax N 240-71		13f. E-Mail		elocal99.org		
202-253-5440 I declare that I have read the abov	202-253-544								
Name (Print)	e herriou and tha	Signature	uue 10 ()		Title	·	<u>·</u>	Date	
Eamon Clifford		Ear	-C-		Lead Orga	nizer		11-13-18	

Solicitation of the information and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

FORM NLRB-502 (RC)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE						
Case No.	Date Filed					
05-RC-231041	Date Filed 11/15/2018					

(2-10)		RC PETITION				<b>↓</b> α56 11		C-23104	1	11/1	5/2018
INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirh.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.											
PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petiti requests that the National Laboration	ioner desires to be	certified as repre proceed under	sentative Its prope	of the e	employees. The Pe prity pursuant to S	tition e Section	er alleges t n 9 of the l	that the followal La	owing circum bor Relations	stances e Act.	
2a. Name of Employer:  First Coast Security  2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):  14100 Parke Long Court suite J Chantilly, VA 20151											
3a. Employer Representative - Nan Amy Skyles Regional Ma		SA.		same a	s 2b - state same):	:					
3c. Tel. No. 703-592-6107 ext. 130	3d, Cell No.		3e. Fa:	1x No.	6107		of. E-Mail A askyles(	ddress Dfcssfl.c	om		
4a. Type of Establishment (Factory, Government Building	mine, wholesaler, e	tc.)	4b. Pri Secu		Product or Service				d State where IIe MD	unit is loc	ated:
5b. Description of Unit Involved: Included: All armed and unarmed or	fficers and Se	rgeants				-		6a. Numbe 10	er of Employee	s in Unit:	
Excluded: All managers, office person		_	Manag	ger				of the e	ubstantial num employees in the ented by the Po	ne unit wis	h to be
Check One: 🔀 7a. Request for recon on or about (Date)		(If no reply	received,	i, so sta	te).	5/201			teclined recog		
8a. Name of Recognized or Certific				tive and b. Add n		n unde	er the Act.				
8c, Tel. No.	8d, Cell No.	<del></del>	8e. Fa	x No.		e	St. E-Mail A	ddress			
8g, Affiliation, if any:	<del></del>		8h. Date	Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)							
9. Is there now a strike or picketing a	t the Employer's es	tablishment(s) in	volved? 1	no	if so, approx		•		s are participa	·	
(Name of Labor Organization)  10. Organizations or individuals othe individuals known to have a repre						recog	mition as re	presentative	er since (Mont		
10a. Name	10b. A	ddress				11	IOc. Tel. No	<b>)</b> .	10d. Cell No.	· · · · · ·	<u></u>
				10e. Fax N			I0e. Fax No	No. 10f. E-Mail Address		<u>.                                    </u>	
11. Election Details: If the NLRB co	nducts and election	in this matter, s	tate your p	tle your position with respect to any such election			election:	11a. Election		Mixed	Manual/Mail
11b. Election Date(s): 11/29/2018		lection Time(s):  DAY			<u>-</u>		1d. Electio On site	n Location(s	s):	<del></del>	
	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										
12c. Full name of national or internat Governed United Security			titioner is	an affil	ate or constituent (	if none	e, so state):	:			
12d. Tel. No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address k1eme@yahoo.com											
13. Representative of the Petitioner who will accept service of all paper 13a. Name and Title: Kent Emery/ President				apers for purposes of the representation proceeding.  13b. Address (street and number, city, State and ZIP code): 5602 Baltimore National Pike suite 607							
13c, Tel. No. 443-304-2018	13d. Cell No. 443-562-323		443-	ax No. -304-		1		Address yahoo.c	om		
I declare that I have read the above Name (Print)	e petition and that	the statements	are true	to the	best of my knowle	Title					Date
Kent Emery		<u> </u>	ut	5		Pre	sident			_	11/15/201

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

Case No.

5-RC-231621

Date Filed 11/26/18

DO NOT WRITE IN THIS SPACE

INSTRUCTIONS: Unless e-Filed using the Agency's website, | www.nirb.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. 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 2a. Name of Employer: Absolute Contracting Services, Inc. 7709 Delano Road, Clinton MD 20735 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): Russell Dunlap, President same 3c. Tel. No. 3d Cell No. 3f. E-Mail Address 3e. Fax No. 301-877-5200 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 5a. City and State where unit is located: 4b. Principal Product or Service construction contracting company Clinton, MD construction 6a. Number of Employees in Unit: 5b. Description of Unit Involved: All full-time & regular part-time craftsmen, including carpenters, painters, and laborers Excluded: 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? X Yes Office clericals, management employees, guards, and supervisors Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) and Employer declined recognition (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: None 8c. Tel. No. 8d. Cell No. 8e. Fax No. 8f. E-Mail Address 8g. Affiliation, if any: 8h. Date of Recognition or Certification 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 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 10b. Address 10c. Tel. No. 10d. Cell No. 10a. Name 10f. E-Mail Address 10e. Fax No. 11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: 11a. Election Type: Manual Mail Mixed Manual/Mail 11c. Election Time(s): 11d. Election Location(s): 11b. Election Date(s): December 21, 2018 12b. Address (street and number, city, State and ZIP code): 12a. Full Name of Petitioner (including local name and number): 11951 Freedom Drive Construction Workers United, Local 202 Suite 310, Reston. VA 20190 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Laborers' International Union of North America 12f, Fax No. 12e. Cell No. 12g. E-Mail Address 12d. Tel. No. 703-860-1865 703-860-4194 13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13b. Address (street and number, city, State and ZIP code): 13a. Name and Title: Brian Petruska, General Counsel 11951 Freedom Drive Suite 310, Reston, VA 20190 13e. Fax No. 13d. Cell No. 13f. E-Mail Address 13c. Tel. No. 703-860-1865 bpetruska@maliuna.org 703-860-4194 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Date Brian Petruska General Counsel

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 GOVERNMENT NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE							
Case No. 5-RC-231755	Date Filed	11/28/18					

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 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 2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 3325 Toledo Road MD Hvattsville 20782 MV Transportation, Inc. 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) 6505 Belcrest Road MD Hyattsville 20782 John Gray 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address john gray@mvtransit.com (443) 763-1117 (443) 763-1117 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service 5a. City and State where unit is located: Transportation Passenger Transportation Hyattsville, MD 5b. Description of Unit Involved 6a. No. of Employees in Unit: R۸ Included: See Attached Page 2 for additional details 6b. Do a substantial number (30% or more) of the employees in he Excluded: See Attached Page 2 for additional details unit wish to be represented by the Petitioner? Yes V 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 curren ly 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 8q. 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 11a. Election Type: Manual Mail Mixed Manual/Mail any such election. 11b. Élection Date(s): December 28, 2018 (Ballots Mailed Out) 11c. Election Time(s): 11d. Election Loca ion(s): N/A N/A 12a. Full Name of Petitioner (including local name and number) 12b. Address (street and number, city, state, and ZIP code) Daniel B. Smith Amalgamated Transit Union 10000 New Hampshire Ave 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
Amalgamated Transit Union 12g. E-Mail Address dsmith@atu.org 12d. Tel No. 12e, Cell No. 12f. Fax No. (301) 431-7116 (202) 714-4219 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) Daniel B. Smith Assistant General Counsel AMALGAMATED TRANSIT UNION 10000 New Hampshire Ave MD Silver Spring 20903-1790 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address dsmith@atu.org (202) 714-4219 (301) 431-7116 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Date Assistant General Counsel Daniel B. Smith 11/28/2018 10:56:47 Daniel B. Smith

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 WAV drivers employed by the Employer at and out of its Hyattsville, MD facility.

### **Employees Excluded**

All other employees, dispatchers, office clerical employees, managers, guards, professional employees and supervisors as defined by the Act.

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE									
Case No.	Date Filed								
5-RC-231765	11/28/18								

	100 - 110 - 1										
INSTRUCTIONS: Unless e-Filed us employer concerned is located. Ti the employer and all other parties Case Procedures (Form NLRB 481	he petition mus named in the p	t be accompi etition of: (1)	anled by the pet	both a sh ition; (2) S	owing of interest (see tatement of Position fo	6b below) and orm (Form NL	d a certificat RB-505); an	e of service s d (3) Descript	tion of Rep	ervice on presentation	
PURPOSE OF THIS PETITION: R     bargaining by Petitioner and Petiti     requests that the National Labo	ioner desires to t	e certified as	represe	ntative of th	e employees. The Petit	ioner alleges	that the follow	owing circum	istances e		
28. Name of Employer: 101 Delaware Ave. Operations, LLC, DBA Delmar Nursing & Rehabilitation Center			2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 101 Delaware Avenue, Delmar, DE 19940								
3a. Employer Representative - Nan			3b. Address (if same as 2b - state same):								
Suzanne Krassler, Admini			Same	N		Los C Man	- dan a			——————————————————————————————————————	
3c. Tel, No. 302-846-3077	3d. Cell No. n/a						all Address sler@delmarrehab.com				
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Nursing Home			4b. Principal Product or Service Nursing & Rehabilitation			n	5a. City and State where unit is located: Delmar, DE				
5b. Description of Unit Involved: Included: All regularly sche		time and	d part	time f	Registered Nurs	es &	6a. Numbe	r of Employee	es in Unit:		
Excluded: Licensed Practical Nurses. Guards & supervisors as defined by the Act.							6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? [X] Yes  No				
Check One: 7a. Request for reconnor about (Date) 7b. Petitioner is cur	No reply rece	ived. (If no	reply re	ceived, so	on (Date) 11/28 state). and desires certification is		d Employer o	sectined recog	inition		
8a. Name of Recognized or Certifie	d Bargaining A	gent (If none,	so state	9) 8b. Ad n/a	dress;						
none				1							
8c. Tel. No. n/a				8e. Fax No. n/a		8f. E-Mail / n/a	8f. E-Mail Address n/a				
8g. Affiliation, if any: n/a	8h. t n/a						on Date of Current or Most htract, if any <i>(Month, Day, Year)</i> 11/a				
9. Is there now a strike or picketing a	t the Employer's	establishmen	t(s) invol	ved? No	If so, approxin	nately how ma	ny employee	s are participa	ting?		
(Name of Labor Organization)			n/a			· · · · · · · · · · · · · · · · · · ·		er since (Mont			
<ol> <li>Organizations or individuals other individuals known to have a repre none</li> </ol>	r than Petitioner assentative interes	and those nar it in any empl	med in ito oyees in	ems 8 and the unit de	9, which have claimed re scribed in item 5b above	e. (If none, so	representative state)	es and other o	rganization	is and	
10a. Name n/a	10b n/a	Address					10c. Tel. No. n/a		10d. Cell No.		
ii) a			106			10e. Fax N	Fax No. 10f. E-Mail Address				
11. Election Details: If the NLRB co	nducts and elect	ion in this mat	tter, state	your posi	lion with respect to any a	such election:	11a, Election		Mixed	Manual/Mail	
11b. Election Date(s): 11c. Election Time(s): 6:30am - 8:30am				em Emplo			tion Location(s): yers location - Activities Room				
12a. Full Name of Petitioner (Includ United Food & Commerc	ial Workers	Union, L			12b. Address (street at 21 West Road, S	Suite 200,	Towson,	MD 2120	)4		
12c. Full name of national or internat United Food & Commerci	ial Workers	ization of whi Internation	ch Petitional U	nion							
12d. Tel. No. 410-337-3700 12e. Cell No. 302-632-4530						ufcw27.o	rg				
13. Representative of the Petitioner who will accept service of a 13a. Name and Title: Nelson L. Hill, Assistant to the President			- 1	I papers for purposes of the representation proceeding.   13b. Address (street and number, city, State and ZIP code):   21 West Road, Suite 200, Towson, MD 21204							
13c. Tel. No. 410-337-2700	13d. Cell No. 302-632-4			13e. Fax 1 410-30	7-1799		ufcw27.o	rg			
I declare that I have read the above Name (Print)	e petition and ti	Signature	nents ar	e true to t	Τ	itle				Date	
Nelson L. Hill		1			Assistant to the President 11/28				11/28/18		