

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 27-RC-257267	Date Filed 3/2/2020

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 HMS Host, Inc. **2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)** Denver International Airport / 8500 Peña Blvd / Denver, CO 80249

3a. Employer Representative - Name and Title Ronald Cool, Director of Operations HMS Host Denver
Darryl L. Franklin, Associate General Counsel **3b. Address (if same as 2b - state same)** 6905 Rockledge Dr., Bethesda, MD 20817

3c. Tel. No. 240-274-4304 **3d. Cell No.** **3e. Fax No.** **3f. E-Mail Address** ronald.cool@hmshost.com; Darryl.franklin@hmshost.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Concessionaire **4b. Principal product or service** Food & Beverage **5a. City and State where unit is located:** Denver, CO

5b. Description of Unit Involved
Included: SEE ATTACHMENT A
Excluded:
6a. No. of Employees in Unit: Abt. 245
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)** 2/21/2020 **and Employer declined recognition on or about** no reply **(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). N/A **8b. Address** N/A

8c. Tel No. N/A **8d Cell No.** N/A **8e. Fax No.** N/A **8f. E-Mail Address** N/A

8g. Affiliation, if any N/A **8h. Date of Recognition or Certification** N/A **8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)** N/A

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

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

11b. Election Date(s): As Soon As Possible **11c. Election Time(s):** TBD **11d. Election Location(s):** Denver Airport

12a. Full Name of Petitioner (including local name and number) UNITE HERE Local 23 **12b. Address (street and number, city, state, and ZIP code)** 12015 East 46th Ave. Suite 415, Denver, CO 80239

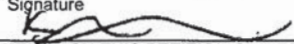
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) UNITE HERE International Union

12d. Tel No. **12e. Cell No.** (603) 801-9768 **12f. Fax No.** **12g. E-Mail Address** sgeaney-moore@unitehere.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.
13a. Name and Title Kristin Martin, Attorney **13b. Address (street and number, city, state, and ZIP code)** McCracken, Stemerma & Holsberry, LLP / 595 Market Street, Suite 800 / San Francisco, CA 94105

13c. Tel No. 415-597-7200 **13d. Cell No.** **13e. Fax No.** 415-597-7201 **13f. E-Mail Address** klm@msh.law

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) Kristin L. Martin **Signature**  **Title** Attorney **Date** 2/28/2020

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. 27-RC-257404	Date Filed 3/4/2020

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
Idaho Statesman

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
1200 North Curtis Road, Boise, Idaho, 83706

3a. Employer Representative - Name and Title
Rusty Dodge, Publisher

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

3c. Tel. No.
(208) 377-6301

3d. Cell No.

3e. Fax No.
(208) 377-6224

3f. E-Mail Address
rdodge@mcclatchy.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Printing & Publishing

4b. Principal product or service
Newspaper & Community Reporting

5a. City and State where unit is located:
Boise, Idaho

5b. Description of Unit Involved
Included: All newsroom employees
Excluded: Office, Clerical, Guards, 2(11) Supervisors, Confidential & Managerial Employees

6a. No. 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? Yes No

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 3/02/2020 and Employer declined recognition on or about No reply (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):
3/20/2020

11c. Election Time(s):
1:00-3:00PM

11d. Election Location(s):
Idaho Statesman

12a. Full Name of Petitioner (including local name and number)
The News Guild-Communications Workers of America Local 37082

12b. Address (street and number, city, state, and ZIP code)
2800 First Avenue, Room 312, Seattle, WA, 98121

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

12d. Tel No.
(206) 328-1190

12e. Cell No.

12f. Fax No.

12g. E-Mail Address
guild37082@gmail.com

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

13a. Name and Title **William R. Reinken, Attorney**

13b. Address (street and number, city, state, and ZIP code)
8085 East Prentice Avenue, Greenwood Village, CO 80111

13c. Tel No.
(303) 721-7399


13d. Cell No.

13e. Fax No.

13f. E-Mail Address
wreinken@cwa-union.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)
William R. Reinken

Signature


Title
Attorney

Date
3-3-2020

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. 27-RC-257463	Date Filed 3/4/2020

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
Triple Canopy, Inc.

2b. Address(es) of Establishment(s) Involved (Street and number, city, State, ZIP code)
1715 West Jefferson Avenue, Suite 1700, Lakewood, CO 80235

3a. Employer Representative - Name and Title
Richard Eaton, Director of Labor Relations

3b. Address (If same as 2b - state same)
9500 Micron Ave. Suite 136 Sacramento, CA 95827

3c. Tel. No. 703-673-4219 **3d. Cell No.** 424-298-0280 **3e. Fax No.** **3f. E-Mail Address** Richard.Eaton@constellis.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Security Service Provider **4b. Principal product or service** Security Services **5a. City and State where unit is located:** Denver, CO

5b. Description of Unit Involved
Included: All full-time and regular part-time security guards performing services for the Employer in Denver, Aurora, Littleton, Centennial, Englewood, Golden, Greenwood Village, Lakewood, Fort Collins, Louisville, Greeley and Boulder (existing bargaining unit)
Excluded: All office clerical employees, professional employees, managers, non-security personnel, lead guards, sergeants, lieutenants, captains, assistant project manager, project manager, applicants, candidates, pre-employment trainees, and supervisors, as defined by the NLRA

6a. No. of Employees in Unit: 212
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) 3/04/2020 and Employer declined recognition on or about No reply (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). United Government Security Officers of America & UGSOA Local 309 **8b. Address** 2879 Cranberry Hwy, East Wareham, MA 02538

8c. Tel No. (774) 678-0936 **8d. Cell No.** **8e. Fax No.** **8f. E-Mail Address** dsullivan@ugsoa.com

8g. Affiliation, if any United Government Security Officers of America **8h. Date of Recognition or Certification** Unknown **8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)** May 31, 2020

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): 3/20/2020 **11c. Election Time(s):** 9:00AM-11:00AM; 3:00PM-5:00PM **11d. Election Location(s):** Region 27 NLRB Office

12a. Full Name of Petitioner (including local name and number) Security Officers Association of America **12b. Address (street and number, city, state, and ZIP code)** 7700 East Academy Boulevard, No. 803, Denver, CO 80230

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

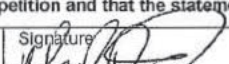
12d. Tel No. (720) 331-3951 **12e. Cell No.** **12f. Fax No.** **12g. E-Mail Address** (b) (6), (b) (7)(C)

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

13a. Name and Title William R. Reinken, Attorney **13b. Address (street and number, city, state, and ZIP code)** 8085 E Prantice Avenue, Greenwood Village, CO 80111

13c. Tel No. (303) 721-7399 **13d. Cell No.** **13e. Fax No.** **13f. E-Mail Address** will@rosenblattgosh.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) William R Reinken **Signature**  **Title** Attorney **Date** 3/04/2020

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

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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 27-RC-257949	Date Filed 3/12/2020

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 King Soopers	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1045 South 1st Street CO Bennett 80102-
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3a. Employer Representative - Name and Title Nicole Bergin	3b. Address (If same as 2b - state same) 65 Tejon Street CO Denver 80223-
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3c. Tel. No.	3d. Cell No.	3e. Fax No.	3f. E-Mail Address Nicole.bergin@kingsoopers.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Retail (Grocery)	4b. Principal product or service Grocery Store	5a. City and State where unit is located: Bennett, CO
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 5
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Excluded: 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 <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) 03/12/2020 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? 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): March 31, 2020	11c. Election Time(s): N/A - Mail ONLY	11d. Election Location(s): N/A - Mail ONLY
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12a. Full Name of Petitioner (including local name and number) Randy Tiffey United Food and Commercial Workers International Union, Local 7	12b. Address (street and number, city, state, and ZIP code) 7760 West 38th Avenue CO Denver 80033-
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
United Food and Commercial Workers International Union, AFL-CIO

12d. Tel No. (303) 425-0897	12e. Cell No.	12f. Fax No.	12g. E-Mail Address rktiffey@ufcw7.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 Mathew Shechter McNamara & Shechter LLP	13b. Address (street and number, city, state, and ZIP code) 1888 Sherman Street Ste 370 Denver 80203-
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13c. Tel No. (303) 333-8700	13d. Cell No. (303) 521-7010	13e. Fax No.	13f. E-Mail Address mss@18thavelaw.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) Randy Tiffey	Signature Randy K Tiffey	Title Organizing Director	Date 03/12/2020 13:45:13
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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

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Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
27-RC-257949	3/12/2020

Employees Included

All full-time and part-time pharmacy technicians, who work one (1) day or more per week, employed in the Bennett, Colorado store owned or operated by the Employer, in a self-determination election to join an existing unit of all employees actively engaged in the handling and selling of merchandise, including part-time workers who work regularly one (1) day or more a week, employed by the Employer in the grocery store or stores owned or operated by the Employer within the metropolitan area of Denver, Colorado

Employees Excluded

All other employees in the Bennett, Colorado store, as well as guards, watchmen, and supervisors as defined by the Act.