

Case No.
27-RC-249350

Date Filed
10/3/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Knight Facilities Management, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 5360 Hampton Place Saginaw, MI 48604	
3a. Employer Representative - Name and Title: Dennis Argyle- VP and CFO		3b. Address (if same as 2b - state same): Same	

3c. Tel. No. 989-793-8820	3d. Cell No.	3e. Fax No.	3f. E-Mail Address dennis.argyle@knightfm.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Service Provider	4b. Principal Product or Service Facilities Management	5a. City and State where unit is located: Windsor, CO
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5b. Description of Unit Involved: Included: Plant Operators, Electricians and Maintenance Personnel Excluded: Management and Supervisors as defined in the Act		6a. Number of Employees in Unit: 11
		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 10/3/19 and Employer declined recognition on or about (Date) no reply (If no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None	8b. Address:
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8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any:	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of Labor Organization) _____, has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state)
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: Representatives of the Baigaining Unit
11a. Election Type: Manual Mail Mixed Manual/Mail

11b. Election Date(s): 10/24/19	11c. Election Time(s): 12 Noon- 1pm	11d. Election Location(s): At nearby Public Library
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12a. Full Name of Petitioner (including local name and number): International Union of Operating Engineers, Local 1	12b. Address (street and number, city, State and ZIP code): 2200 E. 104th Ave. Suite 206 Thornton, CO 80233
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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):
AFL-CIO

12d. Tel. No. 303-433-2100	12e. Cell No.	12f. Fax No.	12g. E-Mail Address info@coafcio.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.	
13a. Name and Title: John Sutton-Organizer	13b. Address (street and number, city, State and ZIP code): 2200 E. 104th Ave. Suite 206 Thornton, CO

13c. Tel. No. 303-433-8482	13d. Cell No. 720-272-8221	13e. Fax No. 303-433-4108	13f. E-Mail Address john@iuoelocal1.org
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) John Sutton	Signature 	Title Organizer	Date 10/3/19
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 27-RC-249648	Date Filed 10/09/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer Safeway, Inc. - Cheyenne, WY	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 700 South Greeley Way WY Cheyenne 82007-
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3a. Employer Representative - Name and Title Kyle Bristol	3b. Address (If same as 2b - state same) 700 South Greeley Way WY Cheyenne 82007-
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3c. Tel. No. (307) 635-7827	3d. Cell No.	3e. Fax No.	3f. E-Mail Address s2267c90@safeway.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Retail (Grocery)	4b. Principal product or service Groceries	5a. City and State where unit is located: Cheyenne, WY
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 3	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).	8b. Address
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8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

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

11a. Election Type: Manual Mail Mixed Manual/Mail

11b. Election Date(s): 10/23/19	11c. Election Time(s): 8:00-9:30am; 12:30-2:00pm	11d. Election Location(s): Break Room at Safeway - Cheyenne
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12a. Full Name of Petitioner (including local name and number) Randy Tiffey United Food and Commercial Workers International Union AFL/CIO Local 7	12b. Address (street and number, city, state, and ZIP code) 7760 West 38th Avenue Suite 400 CO Wheat Ridge 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 Todd McNamara General Counsel United Food and Commercial Workers International Union AFL/CIO Local 7	13b. Address (street and number, city, state, and ZIP code) 7760 West 38th Avenue Suite 400 CO Wheat Ridge 80033-
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13c. Tel No. (303) 425-0897	13d. Cell No.	13e. Fax No.	13f. E-Mail Address tmcnamara@ufcw7.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) Todd McNamara	Signature Todd McNamara	Title General Counsel	Date 10/9/2019 08:30:23
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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

Employees Included

All full-time and part-time Pharmacy Technicians in a self-determination (Armour-Globe) election to determine whether such employees wish to be included within the existing Bargaining Unit presently represented by Petitioner.

Employees Excluded

All supervisors (including Managers, Work Group Managers, and Interim Managers), guards, salaried, office clerical, confidential, professional, temporary, and contracted employees, as defined in the Act.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 27-RC-250367 Date Filed 10/22/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: Public Service Company of Colorado		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1800 Larimer St., Ste. 900, Denver, CO 80202	
3a. Employer Representative - Name and Title: Bruce Anderson, Director, Workforce Relations		3b. Address (if same as 2b - state same): SAME	

3c. Tel. No. 303-571-7673	3d. Cell No.	3e. Fax No. 303-571-7290	3f. E-Mail Address Bruce.R.Anderson@xcelenergy.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Energy Supply	4b. Principal Product or Service Production/Dist Electricity & Gas	5a. City and State where unit is located: Arvada, CO
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5b. Description of Unit Involved: Included: All Service Connection Processors at the Arvada Service Center. *Note: See Attached Excluded: Professional, confidential & managerial employees & supvrs as defined under the Act	6a. Number of Employees in Unit: 1	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Check One. 7a. Request for recognition as Bargaining Representative was made on (Date) 10/02/19 and Employer declined recognition on or about (Date) 10/02/19 (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: N/A
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8c. Tel. No. N/A	8d. Cell No. N/A	8e. Fax No. N/A	8f. E-Mail Address N/A
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8g. Affiliation, if any: N/A	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) N/A, has picketed the Employer since (Month, Day, Year) N/A

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

11. Election Details: if the NLRB conducts and election in this matter, state your position with respect to any such election: Manual Mail Mixed Manual/Mail

11b. Election Date(s): November 18th, 2019	11c. Election Time(s): 3:30 p.m.	11d. Election Location(s): 5460 W 60th Ave, Arvada, CO 80003
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12a. Full Name of Petitioner (including local name and number): International Brotherhood of Electrical Workers, Local 111	12b. Address (street and number, city, State and ZIP code): 5965 E. 39th Ave., Denver, CO 80207
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
International Brotherhood of Electrical Workers, Local 111

12d. Tel. No.	12e. Cell No. 720-595-0337	12f. Fax No. 303-744-0339	12g. E-Mail Address cry@ibew111.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.	
13a. Name and Title: Naomi Y. Perera, Attorney for Local 111	13b. Address (street and number, city, State and ZIP code): 600 Grant Street, Ste. 825, Denver, CO 80203

13c. Tel. No. 303-333-7751	13d. Cell No. 303-859-9931	13e. Fax No. 303-333-7758	13f. E-Mail Address nperera@laborlawdenver.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) Naomi Perera	Signature 	Title Attorney for Local 111	Date 10/22/19
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT

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Attachment to RC Petition

*5b. INCLUDED: Note: Petitioner seeks an "Armour Globe" election to include into a larger O&M bargaining unit.