

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 16-RC-242776	Date Filed 6/5/2019

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 Randalls Food and Drug, LP	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 743 Henrietta Creek Road TX Roanoke 76262-
---	---

3a. Employer Representative - Name and Title Joe Patterson	3b. Address (If same as 2b - state same) 743 Henrietta Creek Road TX Roanoke 76262-
--	--

3c. Tel. No. (817) 490-8154	3d. Cell No.	3e. Fax No.	3f. E-Mail Address joe.patterson@albertsons.com
---------------------------------------	---------------------	--------------------	---

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transportation	4b. Principal product or service Distribution Center for Grocery Store Chain	5a. City and State where unit is located: Roanoke, TX
--	--	---

5b. Description of Unit Involved Included: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 67
--	--

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"/>
---	---

Check One: **7a.** Request for recognition as Bargaining Representative was made on (Date) 06/04/2019 and Employer declined recognition on or about _____ (Date) (If no reply received, so state). No reply received

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

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

8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
---------------------	---------------------	--------------------	---------------------------

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

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____.

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

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

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.	11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
--	--

11b. Election Date(s): June 26, 2019	11c. Election Time(s): 6 am to 10 am; noon to 4 pm.	11d. Election Location(s): Office in Dispatch Department.
--	---	---

12a. Full Name of Petitioner (including local name and number) Carlos Mendez Teamsters Local Union 745	12b. Address (street and number, city, state, and ZIP code) 1007 Jonelle Street TX Dallas 75217-
---	---

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

12d. Tel. No. (214) 398-0661	12e. Cell No. (214) 675-4899	12f. Fax No. (214) 398-3216	12g. E-Mail Address camendez745@gmail.com
--	--	---------------------------------------	---

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.	
13a. Name and Title David Watsky Attorney Lyon, Gorsky & Gilbert, L.L.P.	13b. Address (street and number, city, state, and ZIP code) 12001 North Central Expressway Suite 650 TX Dallas 75243-

13c. Tel. No. (214) 965-0090	13d. Cell No. (214) 415-7913	13e. Fax No. (214) 965-0097	13f. E-Mail Address dwatsky@lyongorsky.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) David Watsky	Signature David K. Watsky	Title Attorney	Date 06/5/2019 15:18:33
-------------------------------------	-------------------------------------	--------------------------	-----------------------------------

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 16-RC-242776	Date Filed 6/5/2019

Employees Included
Drivers

Employees Excluded
Spotters, Dispatchers, Mechanics, Supervisors, Managers, Warehousemen, Human Resources, Guards, and Watchmen

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 16-RC-242871	Date Filed 6/6/2019

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:
Management and Training Corp.

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
Willacy County Detention Center 1601 Buffalo Drive. Raymondville, TX, 78580

3a. Employer Representative - Name and Title:
Martha Amundsen,
Labor & Employment Counsel

3b. Address (if same as 2b - state same):
500 N. Marketplace Drive, Centerville, UT 84014

3c. Tel. No.: 801-693-2600

3d. Cell No.:

3e. Fax No.:

3f. E-Mail Address: Martha.Amundsen@mtctrains.com

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

4b. Principal Product or Service:
Medical Services

5a. City and State where unit is located:
Raymondville, TX

5b. Description of Unit Involved:
Included: See attachment
Excluded: See attachment

6a. Number of Employees in Unit:
13

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) 6/6/2019 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:

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.:

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: **As soon as possible**

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

11b. Election Date(s): TBD

11c. Election Time(s): TBD

11d. Election Location(s): TBD

12a. Full Name of Petitioner (including local name and number):
Consolidated Commercial Workers of America, Local 528

12b. Address (street and number, city, State and ZIP code):
148-06 Hillside Ave, Jamaica, NY 11435

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
National Organization of Industrial Trade Unions - IUJAT

12d. Tel. No.: 718-291-3434

12e. Cell No.:

12f. Fax No.: 718-526-2920

12g. E-Mail Address: awilliams@noitu.org

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

13a. Name and Title:
Andre Williams, In-House Counsel

13b. Address (street and number, city, State and ZIP code):
148-06 Hillside Ave, Jamaica, NY 11435

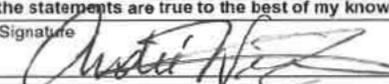
13c. Tel. No.: 718-291-3434

13d. Cell No.:

13e. Fax No.: 718-526-2920

13f. E-Mail Address: awilliams@noitu.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) **Andre Williams** Signature  Title **In-House Counsel** Date **6/6/2019**

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

attachment: MTC Management and Training Corp.

5b. Description of Unit Involved:

Included: All full time and regular part time LVN nurses, medical assistants, and all other employees performing medical services in the Willacy County Detention Center in Raymondville, TX, and employed by the employer on its contract with the US Marshalls.

Excluded: All office clerical employees, guards and supervisors, as defined in the National Labor Relations Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 16-RC-243011	Date Filed 6/10/19

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

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

2a. Name of Employer Strategic Resources, Inc. (SRI)	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 3060 Stanley Rd., Bldg. 2797. JBSA-Fort Sam Houston, TX 78234
--	---

3a. Employer Representative - Name and Title Kirby Collins Senior Human Resources Manager	3b. Address (If same as 2b - state same) 7927 Jones Branch Drive, Suite 600W McLean, VA 22102-3329
---	--

3c. Tel. No. (703) 749-3040	3d. Cell No.	3e. Fax No. (703) 749-3046	3f. E-Mail Address kcollins@sri-hq.com
---------------------------------------	---------------------	--------------------------------------	--

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Military Contractor	4b. Principal product or service Military Support	5a. City and State where unit is located: Fort Sam Houston, TX
---	---	--

5b. Description of Unit Involved Included: All full-time and regular part-time Military Family Life Counselors (MFLC) working for the MFLC Program, which is based out of Joint Base San Antonio - Fort Sam Houston. Excluded: All other employees, managers, office clericals, guards, and supervisors as defined by the Act.	6a. No. of Employees in Unit: 9 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
---	--

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

8a. Name of Recognized or Certified Bargaining Agent (if none, so state).	8b. Address
--	--------------------

8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
--------------------	---------------------	--------------------	---------------------------

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

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

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

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

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

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	11b. Election Date(s): Wednesday 6/19/2019	11c. Election Time(s): 12:30 pm - 1:30 pm	11d. Election Location(s): Tobin Library at Oakwell 4134 Harry Wurzbach Rd, San Antonio, TX 78209
--	--	---	---

12a. Full Name of Petitioner (including local name and number) International Association of Machinists and Aerospace Workers, Local Lodge 47	12b. Address (street and number, city, state, and ZIP code) 5621 Bowen Ct., Commerce City, CO 80022
--	---

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Association of Machinists and Aerospace Workers, AFL-CIO

12d. Tel No. (916) 985-8101	12e. Cell No. (916) 597-6100	12f. Fax No. (916) 985-8121	12g. E-Mail Address mward@iamaw.org
---------------------------------------	--	---------------------------------------	---

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

13a. Name and Title David W. M. Fujimoto, Attorney	13b. Address (street and number, city, state, and ZIP code) Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501
--	---

13c. Tel No. 510-337-1001	13d. Cell No.	13e. Fax No. 510-337-1023	13f. E-Mail Address dfujimoto@unioncounsel.net
-------------------------------------	----------------------	-------------------------------------	--

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

Name (Print) David W. M. Fujimoto	Signature 	Title Attorney	Date June 10, 2019
---	---	--------------------------	------------------------------

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

PRIVACY ACT STATEMENT

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

(b) (6), (b) (7) (C)

FORM NLRB-502 (RC) (4-15)

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE Case No. 16-RC-243093 Date Filed 6/11/19

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located.

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.

2a. Name of Employer Allied Universal Security Services 2b. Address(es) of Establishment(s) involved 3911 S. Walton Walker Blvd Dallas, Tx 75236

3a. Employer Representative - Name and Title Ronald Garcia 3b. Address (if same as 2b - state same) 3911 S. Walton Walker Blvd Dallas, Tx 75236

3c. Tel. No. Office 214-312-4243 3d. Cell No. Cell 214-732-1250 3e. Fax No. NA 3f. E-Mail Address garcia.ronald@aus.com roland.k.garcia@aus.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Army Airforce Exchange Service HQ 4b. Principal product or service Security 5a. City and State where unit is located: Dallas TX

6a. No. of Employees in Unit: 32 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes [X] No []

7a. Request for recognition as Bargaining Representative was made on (Date) NA and Employer declined recognition on or about NA (Date) (if no reply received, so state). NA 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). NA 8b. Address NA

8c. Tel. No. NA 8d. Cell No. NA 8e. Fax No. NA 8f. E-Mail Address NA

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

9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA (if so, approximately how many employees are participating? NA (Name of labor organization) NA, has picketed the Employer since (Month, Day, Year) NA

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) NA

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

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

11b. Election Date(s): first available 11c. Election Time(s): times to cover all shifts 11d. Election Location(s): AAFES HQ auditorium, or a location near work site

12a. Full Name of Petitioner (including local name and number) United Government Security Officers of America and Its Local 318 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Government Security Officers of America International Union

12d. Tel. No. 617-620-7225 12e. Cell No. 617-620-7225 12f. Fax No. NA 12g. E-Mail Address Mleblanc@ugsoa.com

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

13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538

13c. Tel. No. 617-620-7225 13d. Cell No. 617-620-7225 13e. Fax No. NA 13f. E-Mail Address Mleblanc@ugsoa.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) Mike LeBlanc Signature Title DHS Vice President UGSOA International Union Date 6/11/19

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

PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation.

FORM NLRB-502 (RC)
(4-15)UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.

16-RC-243166

Date Filed

6/12/2019

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 5b 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 Union Tank car company		2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) 2801 Nash Thompson Lane Texarkana, Arkansas 71854	
3a. Employer Representative - Name and Title Brent Bonvillain Plant Manager		3b. Address (if same as 2b - state same) same	
3c. Tel. No. (870) 773-2082	3d. Cell No.	3e. Fax No.	3f. E-Mail Address Brent.bonvillain@utlx.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) factory	4b. Principal product or service transportation and engineered products		4c. City and State where unit is located. Texarkana, Arkansas
5b. Description of Unit involved Included: All full-time and part-time production and Maintenance employees, including loads, shipping and warehouse employees, employed by Union Tank car company at its 2801 Nash Thompson Lane Texarkana, Ar. Excluded: Office clericals and professional employees, Supervisors, Quality Control, employees and all others as defined by the Act.			5a. No. of Employees in Unit: 105 5b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) By petition and Employer declined recognition on or about _____ (Date) (if no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state).		8b. Address	
8c. Tel No	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any none		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____ (Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state)			
10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): June 28, 2019		11c. Election Time(s): 3:00 P.M. to 4:00 P.M. and 10 P.M. to 11 P.M.	
11d. Election Location(s): Employees Break Room			
12a. Full Name of Petitioner (including local name and number) United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industry and Service Workers International Union AFL-CIO		12b. Address (street and number, city, state, and ZIP code) 80 Boulevard of the Allies, Pittsburgh, PA 15222	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industry and Service Workers International Union AFL-CIO			
12d. Tel No.	12e. Cell No.	12f. Fax No.	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Dionisio Gonzalez USW Rep.		13b. Address (street and number, city, state, and ZIP code) 1305 Rillingbrook Dr. Baytown, TX 77521	
13c. Tel No.	13d. Cell No. (323)283-1812	13e. Fax No.	13f. E-Mail Address dgonzalez@usw.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)
Dionisio GonzalezSignature
Title
USW Rep.Date
June 12, 2019

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

PRIVACY ACT STATEMENT

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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 16-RC-243349	Date Filed 6/14/2019

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

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

2a. Name of Employer JCS Military Support Services, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 2797 Stanley Rd, San Antonio, TX 78234	
3a. Employer Representative - Name and Title Heather DeWar, Program Manager		3b. Address (If same as 2b - state same) 950 Haverford Road, Suite 200, Bryn Mawr, Pennsylvania 19010	
3c. Tel. No. 267-295-2229	3d. Cell No.	3e. Fax No.	3f. E-Mail Address hdewar@jcsmilitary.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Military Contractor		4b. Principal product or service Military Support	5a. City and State where unit is located: San Antonio, TX

5b. Description of Unit Involved
Included: All regular full time and part time MFLC counselors working for the MFLC program at the Joint Base San Antonio.
Excluded: All supervisors, guards, office clerical, and all other employees.

6a. No. of Employees in Unit: 21
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).		8b. Address	
8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ 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): 6/19/2019	11c. Election Time(s): 10:00 am - 12 pm	11d. Election Location(s): Tobin Library at Oakwell 4134 Harry Wurzbach Rd, San Antonio, TX 78209
--	---	---

12a. Full Name of Petitioner (including local name and number)
International Association of Machinists and Aerospace Workers, Local Lodge 47

12b. Address (street and number, city, state, and ZIP code)
5621 Bowen Ct., Commerce City, CO 80022

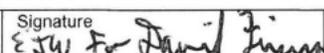
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Association of Machinists and Aerospace Workers, AFL-CIO

12d. Tel No. (916) 985-8101	12e. Cell No. (916) 597-6100	12f. Fax No. (916) 985-8121	12g. E-Mail Address mward@iamaw.org
---------------------------------------	--	---------------------------------------	---

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

13a. Name and Title David W. M. Fujimoto, Attorney		13b. Address (street and number, city, state, and ZIP code) Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501	
13c. Tel No. 510-337-1001	13d. Cell No.	13e. Fax No. 510-337-1023	13f. E-Mail Address nlrbnotices@unioncounsel.net dfujimoto@unioncounsel.net

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

Name (Print) David W. M. Fujimoto	Signature 	Title Attorney	Date June 14, 2019
---	---	--------------------------	------------------------------

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

PRIVACY ACT STATEMENT

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

(b) (6), (b) (7)(C)

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 16-RC-243431	Date Filed 6/17/2019

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
Sable Electric, LLC.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
4170 County Road 279, Leander, TX 78641

3a. Employer Representative - Name and Title
Shaun McConathy, Owner

3b. Address (If same as 2b - state same)
same

3c. Tel. No.
(512) 651-1025

3d. Cell No.
(512) 748-4576

3e. Fax No.

3f. E-Mail Address
shaun@sableelectric.com

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

4b. Principal product or service
Electrical Installation

5a. City and State where unit is located:
Leander, Texas

5b. Description of Unit Involved
Included: see attachment "A"
Excluded: see attachment "A"

6a. No. of Employees in Unit:
14

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

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

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

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

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

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____ (Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

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

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

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

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

11b. Election Date(s):

11c. Election Time(s):

11d. Election Location(s):

12a. Full Name of Petitioner (including local name and number)
International Brotherhood of Electrical Workers Local Union 520

12b. Address (street and number, city, state, and ZIP code)
4818 East Ben White Blvd. Ste. 300 Austin, TX 78741

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

12d. Tel No.
(512) 326-9540

12e. Cell No.
(512) 783-7882

12f. Fax No.
(512) 326-9596

12g. E-Mail Address
nicole_stasek@ibew520.org

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

13a. Name and Title
Nicole Stasek, Organizer

13b. Address (street and number, city, state, and ZIP code)
4818 East Ben White Blvd. Ste. 300 Austin, TX 78741

13c. Tel No.
(512) 326-9540

13d. Cell No.
(512) 783-7882

13e. Fax No.
(512) 326-9596

13f. E-Mail Address
nicole_stasek@ibew520.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)
Nicole Stasek

Signature


Title
Organizer

Date
6/17/2019

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

PRIVACY ACT STATEMENT

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

Attachment "A"

Included: All journeyman, apprentice and helper electricians employed by the employer within the following counties: Travis, Brown, Concad, Kimbal, Menard, McCulloch, Runnels, Tom Green, Mason, Bastrop, Hayes, Blanco, Burnet, Williamson, Lee, Llano, San Saba, Burleson, Caldwell, Fayette and parts of Coryell and Bell counties to include the part of Ft. Hood in Coryell county south of Cow House Creek, and not to extend more than two miles into Bell county from the southeast boundary line of Coryell county, Gray Field, and the City of Killeen, and parts of Lampasas, Bell and Milam counties, which are nearer to Austin than Waco, in the State of Texas.

Excluded: All other crafts such as plumbers, pipefitters, sheetmetal workers, carpenters, painters, iron workers, glaziers, brick layers, masons, sheetrockers, HVAC technicians, elevator constructors, farm and ranch hands, repairmen, shop hands, along with all other employees such as clerical employees, guards, and supervisors within the meaning of the Act.

AMENDED

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 16-RC-243431	Date Filed 6/18/19
---------------------------------	------------------------------

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

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

2a. Name of Employer Sable Electric, LLC	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 4170 County Road 279 Leander, TX 78641
--	--

3a. Employer Representative - Name and Title Shaun McConathy, Owner	3b. Address (If same as 2b - state same) same
---	---

3c. Tel. No. (512) 651-1025	3d. Cell No. (512) 748-4576	3e. Fax No.	3f. E-Mail Address shaun@sableelectric.com
---------------------------------------	---------------------------------------	--------------------	--

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electrical Contractor	4b. Principal product or service Electrical Construction	5a. City and State where unit is located: Leander, Texas
---	--	--

5b. Description of Unit Involved Included: see attachment "A" Excluded: see attachment "A"	6a. No. of Employees in Unit: 8
	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

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

8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
--------------------	---------------------	--------------------	---------------------------

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

9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____ (Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____

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

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

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.	11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
--	--

11b. Election Date(s): 7/1/2019	11c. Election Time(s): 4:30pm-6:30pm	11d. Election Location(s): Cepeda Branch, Austin Public Library 651 N Pleasant Valley Rd, Austin, TX 78702
---	--	--

12a. Full Name of Petitioner (including local name and number) International Brotherhood of Electrical Workers Local Union 520	12b. Address (street and number, city, state, and ZIP code) 4818 East Ben White Blvd. Ste. 300 Austin, TX 78741
--	---

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

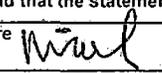
12d. Tel No. (512) 326-9540	12e. Cell No. (512) 783-7682	12f. Fax No. (512) 326-9596	12g. E-Mail Address nicole_stasek@ibew520.org
---------------------------------------	--	---------------------------------------	---

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

13a. Name and Title Nicole Stasek, Organizer	13b. Address (street and number, city, state, and ZIP code) 4818 East Ben White Blvd, Ste. 300 Austin, TX 78741
--	---

13c. Tel No. (512) 326-9540	13d. Cell No. (512) 783-7682	13e. Fax No. (512) 326-9596	13f. E-Mail Address nicole_stasek@ibew520.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) Nicole Stasek	Signature 	Title Organizer	Date 6/18/2019
--------------------------------------	---	---------------------------	--------------------------

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

PRIVACY ACT STATEMENT

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

Attachment "A"

Included: All commercial journeyman, commercial apprentice and helper electricians employed by the employer within the following counties: Travis, Brown, Concad, Kimbal, Menard, McCulloch, Runnels, Tom Green, Mason, Bastrop, Hayes, Blanco, Burnet, Williamson, Lee, Llano, San Saba, Burleson, Caldwell, Fayette and parts of Coryell and Bell counties to include the part of Ft. Hood in Coryell county south of Cow House Creek, and not to extend more than two miles into Bell county from the southeast boundary line of Coryell county, Gray Field, and the City of Killeen, and parts of Lampasas, Bell and Milam counties, which are nearer to Austin than Waco, in the State of Texas.

Excluded: Residential electricians, residential apprentice and helper electricians. All other crafts such as plumbers, pipefitters, sheetmetal workers, carpenters, painters, iron workers, glaziers, brick layers, masons, sheetrockers, HVAC technicians, elevator constructors, farm and ranch hands, repairmen, shop hands, along with all other employees such as clerical employees, guards, and supervisors within the meaning of the Act.

DO NOT WRITE IN THIS SPACE

Case No
16-RC-243700

Date Filed
6/21/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, 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: **Cargill Cook** **2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):** **3709 E 1st St. Ft Worth, Tx 76111**

3a. Employer Representative - Name and Title: **Allen Boelter - Plant Manager** **3b. Address (if same as 2b - state same):** **Same**

3c. Tel. No. **817-838-3442** **3d. Cell No.** **806 240 2158** **3e. Fax No.** **3f. E-Mail Address** **Allen_boelter@cargill.com**

4a. Type of Establishment (Factory mine wholesaler etc) **Processing Plant** **4b. Principal Product or Service** **Meat Products** **5a. City and State where unit is located:** **Fort Worth, TX**

5b. Description of Unit Involved: **Included: All full time and regular part time employees employe at this facility, QA's, group leads, line leads, production, maintenance, shipping, recieving, waste water and refrigeration tech** **6a. Number of Employees in Unit:** **270**

Excluded: All other employees, office clerical, PSSI, guards, R&D, and supervisors as defined in the act **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)** **6/21/2019** **and Employer declined recogni ion on or about (Date)** **N/A** **(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: **f the NLRB conducts and election in this matter state your position with respect to any such election** **2 observers in each voting schedule; with release schedules (as prior election)** **11a. Election Type:** **Manual** **Mail** **Mixed Manual/Mail**

11b. Election Date(s) **7/15/2019** **11c. Election Time(s)** **6:30AM-9:00AM & 3:30PM-6:00PM** **11d. Election Location(s)** **1st Floor, training room (Where injured employees voted prior)**

12a. Full Name of Petitioner (including local name and number): **United Food & Commercial Workers Local 540** **12b. Address (street and number, city, State and ZIP code):** **17780 Preston Rd. Dallas, TX 75252**

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none so state): **United Food & Commercial Workers International Union AFL-CIO, CLC**

12d. Tel. No. **214-328-3515** **12e. Cell No.** **214-519-3709** **12f. Fax No.** **214-327-6614** **12g. E-Mail Address** **Gonzalo@ufcw540.org**

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):**

GonzaloReyes- organizer **17780 Preston Rd. Dallas, TX 75252**

13c. Tel. No. **214-328-3515** **13d. Cell No.** **214-519-3709** **13e. Fax No.** **214-327-6614** **13f. E-Mail Address** **Gonzalo@ufcw540.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)** **Gonzalo Reyes** **Signature**  **Title** **Orgazizer** **Date** **6/20/19**

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