UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO N	IOT WRITE IN THIS SPACE
Case No.	Date Filed
31-RC-223789	7-13-2018

RC PETITION

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

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

2a. Name of Employer

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)

SEE ATTACHMENT

requests that the National Labor Rela	tions Board proc	eed under its pr	oper autno	rity pursuant t	o Section 9 of the Na	ationai	Labor Ke	elations Act.
2a. Name of Employer Dignity Health Medical Foundation	n of Ventura				nt(s) involved (Street a	and nur	mber, city,	State, ZIP code)
3a. Employer Representative – Name and Judy S. Coffin, V.P. & Associate		nsel	ACCUSATION 10 ACCUS		s 2b – state same) Suite 300 San F	ranci	sco, CA	94107
3c. Tel. No. (415) 438-5755	3d. Cell No.		3e. Fax (415) 4	No. 138-5726			Mail Addr	ess Odignityhealth.org
4a. Type of Establishment (Factory, mine, v Health Care Facility	wholesaler, etc.)	4b. Principal pro	oduct or ser	vice			5a. City a	and State where unit is located:
5b. Description of Unit Involved								6a. No. of Employees in Unit:
Included: MA, MOR and LV	N							65
Excluded: All other classifications, including the Act.		ed to guards, ma	anagers, co	onfidential emp	loyees and superviso	ors as	defined	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No
	ecognition as Baro	aining Represent	ative was m	ade on (Date)	by this petition and	d Empl	over decli	ned recognition on or about
H	(Date)	(If no reply receive	ed, so state,).	certification under the		0,0, 000,	noo rooogiiiion on or about
8a. Name of Recognized or Certified Bar				8b. Address	certification under the	Aut.		
None								
8c. Tel No.	8d Cell No.		8e. Fax	No.		8f. E-	Mail Addre	ess
8g. Affiliation, if any 8h. Date of				of Recognition o	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)			
Is there now a strike or picketing at the E (Name of labor organization)	mployer's establis				kimately how many em Month, Day, Year)	nployee	es are par	licipating?
Organizations or individuals other than I known to have a representative interest in a None						resenta	itives and	other organizations and individuals
10a. Name	10b. Add	dress			10c. Tel. No.			10d. Cell No.
					10e. Fax No.			10f. E-Mail Address
 Election Details: If the NLRB conducts any such election. 			ur position v	with respect to	11a. Election Type:	_	Manual	MailMixed Manual/Mail
11b. Election Date(s): Wed. July 25, 2018		ection Time(s): - 9:30am; 12pm	-1:30pm: 2	pm-3:30pm	11d. Election Locati Break Room at each		itv	
12a. Full Name of Petitioner (including lo Service Employees International Union, U			,		12b. Address (stree 5480 Ferguson Driv			ty, state, and ZIP code)
12c. Full name of national or international la Service Employees International Union, U			r is an affilia	te or constituen	t (if none, so state)			
12d. Tel No. (323) 734-8399	12e. Cell No.		12f. Fax (323) 72			12g. E	-Mail Add	dress
13. Representative of the Petitioner who	will accept service	ce of all papers f	or purpose	s of the repres	entation proceeding	1.		
13a. Name and Title Xochitl A. Lo	ppez				d number, city, state, a ay, Suite 200, Alameda, C		,	
13c. Tel No. (510) 337-1001	13d. Cell No.		13e. Fax (510) 33				-Mail Add @unionc	ress ounsel.net
I declare that I have read the above petition	on and that the s	tatements are tre	ue to the be	est of my know	vledge and belief.			71
Name (Print) Sig	nature		Title			Da	ate	
Xochitl A. Lopez	VIII	1	Attorney			Jul	v 13. 201	8

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 TO UNFAIR LABOR PRACTICE CHARGE

2(b): Address(es) of Establishment(s) involved (Street and number, city, State ZIP code)

- 1. 1700 N. Rose Avenue, Suite 220 Oxnard, CA 93030
- 2. 2415 Antonio Avenue Camarillo, CA 93010
- 5051 Verdugo Way, Suite100 & 110 Camarillo, CA 93012
- 2901 N. Ventura Road, Suite 100 Oxnard, CA 93036
- 5. 550 St Charles Drive, #200 Thousand Oaks, CA 91360
- 6. 64 East Daily Drive, Camarillo, CA 93010
- 7. 2486 Ponderosa Dr. Suite D Camarillo, CA 93010

5(a): City and State where unit is located

- 1. Camarillo, CA
- 2. Oxnard, CA
- 3. Thousand Oaks, CA

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

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRIT	E IN THIS SPACE
Case No.	Date Filed
31-RC-224348	7/26/18

MIATELIATIONS II I							
						n NLRB office in the Region	
in which the employer concerne							
of service showing service on the							
(Form NLRB-505); and (3) Descr			•	RB 4812). The sho	owing of inte	erest should only be filed	
with the NLRB and should not b	e served on the	employer or an	y other party.			for the second	
bargaining by Petitioner and Petitione requests that the National Labor Re	r desires to be certif	ied as representativ	e of the employees. The l	Petitioner alleges that	t the following	g circumstances exist and	
2a. Name of Employer	indons isola a pro-		dress(es) of Establishment				
AIRGAS USA, LLC		1885	N. VENTURA AVE. 1	VENTURA, CA. 9	3001		
3a. Employer Representative – Name JUAN PADILLA-OPERATIONS			3b. Address (If same as SAME	2b - state same)			
3c. Tel. No. 805-804-7658	3d. Cell No. 805-804-76	58	3e. Fax No. 805-643-6693		3f. E-Mail Addı UAN PADI	ess LLA@AIRGAS.COM	
4a. Type of Establishment (Factory, mini SUPPLIER	e, wholesaler, etc.)	4b. Principal prod MEDICAL AN	duct or service ID SPECIALTY GAS	ES		and State where unit is located:	
5b. Description of Unit Involved		L				6a. No. of Employees in Unit:	
Included: ALL FULL-TIME AND REGULAR PLUCENSES, LOADERS, FILLERS, YA	ART-TIME DISTRIBUTION	DRIVERS, ROUTE DRIV	ERS, DISPATCHERS, WITH COMM	MERCIAL DRIVER	GATED AT	16	
1895 N. VENTURA AVE. VENTURA Excluded: ALL OTHER EMPLOYEES, OF	CA, 93001					6b. Oo a substantial number (30% or more) of the employees in the	
CONFIDENTIAL EMPLOYEES	AND SUPERVISORS	AS DEFINED BY THE	E ACT.			unit wish to be represented by the Petitioner? Yes . No	
Check One: 7a. Request to		gaining Representa (If no reply received	tive was made on (Date) d, so state).	and	Employer deci	lined recognition on or about	
7b. Petitioner i			epresentative and desires	certification under the A	Act.		
8a. Name of Recognized or Certified E NONE	Bargaining Agent (I	f none, so state).	8b. Address				
8c. Tel No.	8d Cell No.		8e. Fax No.	{	Bf. E-Mail Add	ress	
8g. Affiliation, if any			8h. Date of Recognition or		8I. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)		
9. Is there now a strike or picketing at the	e Employer's establi		.,.	mately how many emp	loyees are pa	rticipating?	
(Name of labor organization)			eted the Employer since (A				
Organizations or individuals other the known to have a representative interest NONE	an Petitioner and the in any employees in	se named in items the unit described	8 and 9, which have claims in item 5b above. (If none.	ed recognition as repre	sentatives and	other organizations and individuals.	
10a. Name	10b, Ad		, , , , , , , , , , , , , , , , , , , ,				
	100.750	dress		10c. Tel. No.		10d. Cell No.	
	100.750	dress				10d. Ceil No. 10f. E-Mail Address	
11. Election Details: If the NLRB condi	:			10c. Tel. No.	✓ Manual		
11. Election Details: If the NLRB condi- any such election. 11b. Election Date(s): AUGUST 13, 2018	ucts an election in th			10c. Tel. No. 10e. Fax No.	n(s):	10f. E-Mail Address	
any such election. 11b. Election Date(s): AUGUST 13, 2018 12a. Full Name of Petitioner (including wholesale delivery dravers, general truck drawn and the sale delivery dravers.	ucts an election in th 11c, E 5:00Ah g local name and n	is matter, state you lection Time(s): //-7:00AM umber) . INDUSTRIAL AND ALLIED	r position with respect to	10c. Tel. No. 10e. Fax No. 11a. Election Type: 11d. Election Location CONFERENCE ROG 12b. Address (street) 3888 CHERRY AVE	n(s): OM and number, o	10f. E-Mail Address Mall Mixed Manual/Mall city, state, and ZIP code)	
any such election. 11b. Election Date(s): AUGUST 13, 2018 12a. Full Name of Petitioner (including	ucts an election in the 11c. E 5:00Ah g local name and meres, CHAUFFEURS, SALES at labor organization	is matter, state you lection Time(s): //-7:00AM umber) . INDUSTRIAL AND ALLIED	r position with respect to workers TEAMSTERS LOCAL 848 Is an affiliate or constituen	10c. Tel. No. 10e. Fax No. 11a. Election Type: 11d. Election Location CONFERENCE ROG 12b. Address (street 3888 CHERRY AVE	on(s): OM and number, LONG BEA	10f. E-Mail Address Mail Mixed Manual/Mail city. state, and ZIP code} CH, CA, 90807	
any such election. 11b. Election Date(s): AUGUST 13, 2018 12a. Full Name of Petitioner (including wholesale believery drivers, General Truck provided in the	11c. E 5:00AN g local name and n rests, CHAUFFEURS, SALES al labor organization F TEAMSTERS 12e. Cell No. 202-528-5788	is matter, state you lection Time(s): A-7:00AM umber) INDUSTRIAL AND ALLED of which Petitioner	WORKERS TEAMSTERS LOCAL 848 is an affiliate or constituen 12f. Fax No. 562-595-1896	10c. Tet. No. 10e. Fax No. 11a. Election Type: 11d. Election Locatio CONFERENCE ROC 12b. Address (street 3888 CHERRY AVE (if none, so state)	on(s): OM and number, o . LONG BEAC	10f. E-Mail Address Mail Mixed Manual/Mail city, state, and ZIP code) CH, CA, 90807	
any such election. 11b. Election Date(s): AUGUST 13, 2018 12a. Full Name of Petitioner (including wholesale belivery privers, General Truck danger 12c. Full name of national or international INTERNATIONAL BROTHERHOOD O	11c. E 5:00AN g local name and n rests, CHAUFFEURS, SALES al labor organization F TEAMSTERS 12e. Cell No. 202-528-5788	is matter, state you lection Time(s): A-7:00AM umber) INDUSTRIAL AND ALLED of which Petitioner	WORKERS TEAMSTERS LOCAL 848 is an affiliate or constituen 12f. Fax No. 562-595-1896	10c. Tet. No. 10e. Fax No. 11a. Election Type: 11d. Election Locatio CONFERENCE ROC 12b. Address (street 3888 CHERRY AVE (if none, so state)	on(s): OM and number, o . LONG BEAC	10f. E-Mail Address Mail Mixed Manual/Mail city, state, and ZIP code) CH, CA, 90807	
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any such election. 11b. Election Date(s): AUGUST 13, 2018 12a. Full Name of Petitioner (including wholesale Delivery Drivers, General Truck Den 12c. Full name of national or international INTERNATIONAL BROTHERHOOD Of 12d. Tel No. 562-595-1891 13. Representative of the Petitioner with 13a. Name and Title PABLO CA	11c. E 5:00AM g local name and n gens, CHAUFFEURS, SALES al labor organization F TEAMSTERS 12e. Cell No. 202-528-5788 ho will accept serv MACHO-OF 13d. Cell No. 202-528-5788	is matter, state you lection Time(s): A-7:00AM umber) INDUSTRIAL AND ALUED of which Petitioner Ice of all papers for CANIZER	workers teamsters local sas is an affiliate or constituen 12f. Fax No. 562-595-1896 or purposes of the repres 13b. Address (street and 3888-CHERRY AVE. LONG 13e. Fax No. 562-595-1896	10c. Tet. No. 10e. Fax No. 11a. Election Type: 11d. Election Locatio CONFERENCE ROC 12b. Address (street 3888 CHERRY AVE (if none, so state) Pentation proceeding.	in(s): DM and number, o LONG BEAC 12g. E-Mail Ac PCAMACHO1 and ZIP code) 13f. E-Mail Ad	10f. E-Mail Address Mail Mixed Manual/Mail city, state, and ZIP code) CH, CA, 90807 Idress 75@GMAIL_COM	
any such election. 11b. Election Date(s): AUGUST 13, 2018 12a. Full Name of Petitioner (includin wholesale believery privates, General Truck park 12c. Full name of national or internation: INTERNATIONAL BROTHERHOOD O 12d. Tel No. 562-595-1891 13. Representative of the Petitioner with 13a. Name and Title PABLO CA 13c. Tel No. 562-595-1891	11c. E 5:00AM g local name and n gens, CHAUFFEURS, SALES al labor organization F TEAMSTERS 12e. Cell No. 202-528-5788 ho will accept serv MACHO-OF 13d. Cell No. 202-528-5788	is matter, state you lection Time(s): A-7:00AM umber) INDUSTRIAL AND ALUED of which Petitioner Ice of all papers for CANIZER	workers teamsters local sas is an affiliate or constituen 12f. Fax No. 562-595-1896 or purposes of the repres 13b. Address (street and 3888-CHERRY AVE. LONG 13e. Fax No. 562-595-1896	10c. Tet. No. 10e. Fax No. 11a. Election Type: 11d. Election Locatio CONFERENCE ROC 12b. Address (street 3888 CHERRY AVE (if none, so state) Pentation proceeding.	in(s): DM and number, o LONG BEAC 12g. E-Mail Ac PCAMACHO1 and ZIP code) 13f. E-Mail Ad	10f. E-Mail Address Mail Mixed Manual/Mail city, state, and ZIP code) CH, CA, 90807 iddress 75@GMAIL.COM	

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1801)

PRIVACY ACT STATEMENT

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UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

	DO NOT WE	RITE IN THIS SPACE	
Case No. 31-RC-22	24426	Date Filed 7/25/2018	3

INSTRUCTIONS: Unless e-Filed						
in which the employer concern of service showing service on						
(Form NLRB-505); and (3) Desc						
with the NLRB and should not	be served on the	e employer or an	y other party.		<u> </u>	-
PURPOSE OF THIS PETITION: RO bargaining by Petitioner and Petition requests that the National Labor F	er desires to be cer	lified as representati	ve of the employees. The	Petitioner alleges t	hat the following	circumstances exist and
2a. Name of Employer		2b. Ac	dress(es) of Establishmen	t(s) involved (Street	and number, city,	
CBRE 3a. Employer Representative - Name	and Title	1280	O Culver Blvd., Los		30066	
George Mullane Director La	bor Relations	<u>,</u>	12800 Culver Bive			
3c. Tel. No. 562-577-3112	3d. Cell No.		3e. Fax No.		3f. E-Mail Addr	ess llane@cbre.com
4a. Type of Establishment (Fectory, mi.	ne, wholesaler, etc.)	4b. Principal pro	duct or service			and State where unit is located:
Broadcast Center		Stationary E	ngineering mainter	nance	Culver	<u>City</u>
6b. Description of Unit Involved Included: All full time, regular,	part-time, temp	orary or extra m	aintenance engineer	s employed at 1	2800 Culver	6a. No. of Employees in Unit: 7
Boulevard, Culver Ci	• •					6b. Do a substantial number (30% or more) of the employees in the
unit wish to be represented by						unit wish to be represented by the Petitioner? Yes V No
Check One:	or recognition as Ba	rgaining Representa	tive was made on (Date)Q	7/25/18 er	nd Employer deci	ined recognition on or about
7b. Pelitioner		(If no reply receive zed as Bargaining R	d, so state). epresentative and desires	certification under th	e Act.	
8s. Name of Recognized or Certified NA	Bargaining Agent	(If none, so state).	8b. Address NA			
8c. Tel No. NA	8d Cell No. NA		8e. Fax No. NA		8f. E-Mail Addr NA	ess
8g. Affiliation, if any NA			8h. Date of Recognition of NA	r Certification		ate of Current or Most Recent (Month, Day, Year)
9. Is there now a strike or picketing at ti	ne Employer's estab	lishment(s) involved	? NO If so, approx	imately how many e	mployees are par	ticipating?
			keted the Employer since (i			
Organizations or individuals other ti known to have a representative interest NONE					presentatives and	other organizations and Individuals
10a. Name	10b. A	ddress		10c. Tel. No. NA	<u> </u>	10d. Cell No. NA
NA	NA	1		10e. Fax No.	·	10f. E-Mail Address
11. Election Details: If the NLRB cond any such election.	lucts an election in t	his matter, state you	r position with respect to	11a. Election Type	e: 🗸 Manual 📗	<u></u>
11b. Élection Date(s): 8/7/18	11c. 9AM-	Election Time(s): 3PM		11d. Election Loca On-Site TBD	ition(s):	-
12a. Full Name of Petitioner (Includir International Union of Operating E	ingineers, Local	501, ÁFL-CIO		2405 West Third	et and number, c I Street Los Ar	ity, state, and ZIP code) igeles, CA 90057
12c. Full name of national or Internation International Union of Operating E	ngineers, Local	n of which Petitioner 501, AFL-CIO		t (if rione, so state)	•	
12d. Tel No. 213-251-4247	12e. Cell No. 213-220-764		12f. Fax No. 213-559-9472		12g. E-Mail Ad pmurphy@loc	
13. Representative of the Petitioner v						
13a. Name and Title Patrick M		. Rep.	13b. Address (street and 2405 West Third Street L			·
13c. Tel No. 213-251-4247	13d. Cell No. 213-220-764		13e. Fax No. 213-559-9472		13f, E-Mail Add pmurphy@loc	
I declare that I have read the above p	etition and that the	statements are tru	e to the best of my know	ledge and belief.		
Name (Print) Patrick Murphy	Signature	ly	Title Business Representa	ntive	Date 07/18/2018	В

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

PRIVACY ACT STATEMENT

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FORM NLRB-502 (RC) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
31-RC-224610	7/31/18				

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party. 1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer: 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): GEO Group. 10400 Rancho road, Adelanto, Ca 92301 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): James Janecka Warden Same 3c. Tel. No. 3d. Cell No. 3f. E-Mail Address 3e. Fax No. 1-760-5616100 NA NA NA@example.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service 5a. City and State where unit is located: Ice Detention Center Adelanto California Detention services. 5b. Description of Unit Involved: 6a. Number of Employees in Unit: Included: Clerical, Maintainance, Bookeeker, janitors, accounts, Clerks, receptionist, records, mail. 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No supervisors, Guards & confidential employees Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) N/A and Employer declined recognition N/A (If no reply received, so state). on or about (Date) 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: Office & Professional Employees International Union | 6136 Mission Gorge rd. San Diego, Ca, 92120 Local 30. 8c. Tel. No. 8f E-Mail Address 8d. Cell No. 8e. Fax No. 619-640-4840 619-993-8860 619-640-4830 markbailey@opeiulocal30.org 8i. Expiration Date of Current or Most 8g. Affiliation, if any: 8h. Date of Recognition or Certification Recent Contract, if any (Month, Day, Year) NA NA 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. NA NA NA NA 10e. Fax No. 10f. E-Mail Address NA NA@example.com 11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: 11a. Election Type It would be welcomed 11b. Election Date(s): 11c. Election Time(s): 11d. Election Location(s): Victorville, Ca. TBD TBD 12a. Full Name of Petitioner (including local name and number): Mark Bailey, Business Agent OPEIU Local 30 12b. Address (street and number, city, State and ZIP code) 6136 Mission Gorge rd, San Diego, Ca, 92120 12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Officee and Professional Employees International Union Local 30. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 61*-640-4840 619-993-8860 (619) 640-4830 markbailey@opeiulocal30.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). Mark Bailey, Business Agent 6136 Mission Gorge Rd, San Diego Ca,92120 13f. E-Mail Address 13c. Tel. No 13d. Cell No markbailey@opeiulocal30.org 619-640-4840 619-993-8860 (619) 640-4830 I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief. Name (Print) Signature Title 7/11/2018 Business Agent Mark Bailey

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE							
31-RD-223177	Date Filed 7/3/2018						

	PETITIO			31-KD-2231		//3/2018
INSTRUCTIONS: Unless & Filed using the i located. The petition must be accompania in the petition of: (1) the petition; (2) States interest should only be filed with the NLRE	d by buth a showi nent of Position fo I and should not b	ng of interest (see orm (Form NLRB-5 e served on the e	o 6b below) and a certificat 505); and (3) Description of mplover or any other parti	le of service showing f Representation Casa r	service on the e Procedures (Fo	mployer and all other parties named orm NLRB 4812). The showing of
PURPOSE OF THIS PETITION: RD- D recognized pargaining representative is Labor Relations Board proceed under	no longer their rep	resentative. The	Petitioner alleges that the Section 9 of the National	te following circums Labor Relations Ac	tances exist an t	d requests that the National
2a. Name of Employer Arakettan Enterprises, Inc. d/b/a Athens S		2b. A 1) 112		alley, CA 91342 an	ənd numbər, city d 2) 12303 Mar	r, State, ZIP code) ntague Street, Paccima, CA 91331
3a. Employer Representative – Name an Lupe Guerrero, Human Resoul		r ·	3b. Address (if same) 12303 Montague		na, CA 9133	1
3c, Tel, No. (818) 381-4363 Ext 3525	3d, Cell No. (626) 893-1438		3e. Fax No.		3f. E-Mall Add	
4a. Type of Establishment (Fectory, mine, waste Management Services		4b. Principal pro Waste Mana			5a. Clty	and State where unit is located; alley, CA
6b. Description of Unit Involved		VV25.0 (VICI)	agomon		Sull V	6a. No. of Employees in Unit
Included: All mechanics, drivers, helpers	and shopworkers	at 11266 Peorle S	treet, Sun Valley, CA anc 1	2303 Montague Street	t, Pacolma, CA.	6b. Do a aubatential number (30%
Excluded: All other employees, office					ed in the Act.	or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative? Yes
	(Date) (If no reply receive				lined recognition on or about
7b. Petitioner is c	urrently recognize	d as Bargaining R	epresentative and desir =:	certification under th	e Act.	
8a. Name of Recognized or Certified Bar Teamsters Local 396				ark Road, Suite 200		
8c. Tel No. (826) 915-3636	8d Cell No.		8s. Fax No.		8f. E-Mali Add teamatera@loc	cal396.net
			06/26/2017	h. Date of Recognition or Certification 81. Expiration Date of Current or Most Rec Contract, if any (Month, Day, Year) n/a		
 Is there now a strike or picketing at the E (Name of labor organization) 	mployur's establis		7? No If so, appro keted the Employer since	ximately how many e	mployees are pa	rticipating?
10. Organizations or individuals other than	hose named in ite	ma 8 and 9, which	h have claimed recognition	вв representatives e	nd other organiz	ations and individuals known to
have a representative interest in any emplo	yees in the unit de	sended in Remist	above. (If none, so state			
10a, Name	10b. Add	irees		10¢, Tel. No.		10d, Cell No,
None				10e. Fax No.		10f. E-Mail Address
 Election Details: If the NLRB conducts any such election. 	an election in this	s matter, state you	ur position with respect to	11a. Election Type	:: 🗸 Menuel	Mell Mixed Manual/Mail
11b, Election Date(s): July 19, 2018	1	ection Time(s): Sun Valley, momin	ngs. 2) Pecolma: aflemoor s	11d. Election Loca Conference		Valley and Pacoima locations.
12a. Full Name of Petitioner (b) (6), (b) (7)(C)			-	12b. Address (stre (b) (6), (b) (7)(C	el and number, (city, state, and ZIP code)
12c. Full name of national or international la	bor organization	of which Petitioner	r is an affiliate or constituo	rt (if none, so state)		
12d Tel No (b) (6), (b) (7)(C)	12e. Cell No.	•••	12f. Fax No.		120 E-Mail Ac (b) (6), (b)	dress. (7)(C)
13. Representative of the Petitioner who	will accept servi	oc of all papers f	S. Committee of the Com	sentation proceeding	g.	
13a. Name and Title None			13b. Address (street in	d number, city, state,	and ZIP code)	
13c. Tel No.	13d. Cell No.		13e. Fax No.		131. E-Mail Ad	dress
I declare that I have read the above petit	on and that the (b) (6), (b) (7)	ue to the best of my know	viedge and belief.	·	
(b) (6), (b) (7)(C)	(C)		n/a		Date 7	18/18
WILLFUL FALSE STATEME	NTS UN THIS PE	TITION CAN BE	PUNISHED BY FINE AND	IMPRISONMENT (U	.S. CODE, TITL	E 18, SECTION 1001)

PRIVACY ACT STATEMENT

Sclicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 of seq. The principal use of the information is to essist the National Labor Relations Board (NLRB) in processing representation and related proceedings or hitigation. The routine uses fix 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 (he 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

DO NOT W	IRITE IN THIS SPACE	
(ase No. 31-RD-223309	Date Filed 7/6/2018	

RD PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov, submit an original of this . itition 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 cartificate 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: RD- DECER'INFICATION (REMOVAL OF REPRESENTATIVE) - 4 substantial number of employees assert that the cartified or currently recognized pargaining representative is no longer their representative. The Potitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) Involved (Street and number, city, State, ZIP code) 12303 MONTAGUE ST. PACOINA, CA. 91331 Arakeiian Enterprises, Inc. d/b/a Athens Services 3a. Employer Representative - Name and Title -- 2h -- state same) 12303 MONTAGUE ST. Lupe Guerrero, Human Resources Manager PACOIMA, CA . 91331 3f. E-Mail Address 3d, Cell No. (818) 381-4363 Ext 3525 (626) 893-1438 Iramirezguerrero@athensservices.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 46. Principal product or service Sa. City and State where unit is located; PACOLMA.CA. Waste Management Services Waste Management 8a. No. of Employees in Unit 267 5b. Description of Unit Involved included: All mechanics, drivers, helpers, and shopworkers at 1) 12303 MONTAGUE ST. PACCIMA, CA. 91371 6b. Do a aubatantial number (30% or more) of the employees in the Excluded: unit no longer wish to be represented by the certified or All other employees, office clerical employees, confidential employees, guards and supervisors as defined in the Act. currently recognized bargaining representative? Yes ✓ No Check One: 7a. Request for recognition as Bargaining Representative was made on (Data) and Employer declined recognition on or about (Date) (If no reply received, so state). 7b. Petitioner is currently recognized as Bargaining Representative and desir ≥ certification under the Act. 8a. Name of Recognized or Certified Bargaining Agent 8b. Address Teamsters Local 396 880 S. Oak Park Road, Suite 200, Covina, CA 91724 8c. Tel No. 8d Cell No. 8c. Fex No. 8f. E-Mall Address (626) 915-3636 teamsters@tocs(396.net 8g. Affiliation, it any 8h. Date of Recognition or Certification 8l. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 06/26/2017 8. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately now many employees are participating? (Name of labor organization) has picketed the Employer since (Month, Day, Year) 10. Organizations or individuals other than 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 aserdon .d01 10c, Tel. No. 10d, Cell No. None 10f. E-Mail Address 10p. Fax No. 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: 🗸 Manual Mail Mixed Manual/Mail any such election. 11c. Election Time(s): AFTERNOOM. 11d. Election Location(s); CONFERENCE ROOM 11b. Election Date(s): July 19, 2018 (b) ¹²(b) (6), (b) (7)(C) (6). (b) (b) (6), (b) (7)(C) or international labor organization of which Petitioner is an affiliate or constituent (if none, so state 12c. Full name None 12e, Cell No. 12g. E-Mail Add (b) (6), (b) (7)(C) 12f Fax No. 13. Representative of the Potitioner 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) None 13¢, Tel No. 13d. Cell No. 13¢, Fax No. 13f. E-Mail Address I declare that I have read the above polition enrither the (b) (6), (b) (7) ts are true to the best of my knowledge and belief. Title (C)

(C) n/s 7/6/2019
...ILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION (001)

PRIVACY ACT STATEMEN'S

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 (Dsc. 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.

FORM NLRB-502 (RD) (2-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RD PETITION

DO NOT WRITE IN THIS SPACE				
	Date Filed 7/06/2018			

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INSTRUCTIONS: Unless e-Filed employer concerned is located the employer and all other part Case Procedures (Form NLRB	l. The petition lies named in ti	must be accompa he petition of:(1)	anied by both a sh the petition; (2) Sta	owing of inter- stement of Pos	est (see 7 l sition form	below) and a certific (Form NLRB-505); a	ate of service show and (3) Description	ving service on of Representation	
 PURPOSE OF THIS PETITION: recognized bargaining represent Labor Relations Board proceed 	tative is no long	er their representa	ative. The Petitione	r alleges that t	he following	ng circumstances ex			
2a. Name of Employer Arakelian Enterprise Inc. d.	/b/a Athens	Services	2b. Address(es) of 1301 West 228			(Street and number, CA 90501	city, state, ZIP code)	
3a. Employer Representative - Na Elsa Alvarez, Human Reso			3b. Address (If san 1301 West 228	nme as 2b - state same) 28th Street, Torrance, CA 90501					
3c. Tel. No. 626-709-5589	3d. Fax No.	•	3e. Cell No.		3f. E-Mail ealvarea	Address @athensservice	s.com		
4a. Type of Establishment (Factory, Waste Management Service		ler, etc.)				pal product or service management	1		
5a. Description of Unit Involved					1		5h City and S	state where unit	
All mechanics, drivers, he	elpers and sh	opworkers at	1301 West 228t	th Street, To	orrance, (CA 90501.	is located: Torrance,		
Excluded: All other employees, offic	e clerical en	nployees, and	confidential em	ployees, gu	ards and	supervisors.			
6. No. of Employees in Unit 103	recog	nized bargaining r	r (30% or more) of the epresentative?		n the unit n	longer wish to be re	epresented by the cer	rtified or currently	
8a. Name of Recognized or Certifie Teamsters Local 396	d Bargaining A	gent				8b. Affiliation, if any			
8c. Address 880 South Oak Park Road	Suite 200			8d. Tel. No. 626-915-3	636	8e. Cell No.	,	· · · · · · · · · · · · · · · · · · ·	
Covina, CA 91724	, 54110 200			8f. Fax No.		8g E-Mail Address teamsters@local396.net			
						teamsters@ioe	a1370.HCt		
9. Date of Recognition or Certificati 06/26/2017	on		10. Expiration Date N/A	of Current or I	Most Recer	t Contract, if any (Mo	onth, Day, Year)		
11a. Is there now a strike or picketing	ng at the Emplo	ver's establishmen	ot(s) involved2 \(\sigma\)	Yes X No	11h If co	approximately how r	nany employees are	participating?	
					170. 11 50,	approximately now i	- , ,	· · · · ·	
11c. The Employer has been picket (Insert Address)	ted by or on bei	naif of (Insert Nan	ne)		•	sine	ce (Month, Day, Year	a labor organization, of	
12. Organizations or individuals oth	er those named	in items 8 and 11	c. which have claim	ed recognition	as represer	ntatives and other ord	anizations	_	
and individuals known to have a			ployees in the unit	described in ite				ä	
12a. Name	12b. Addr	ess .			12c. Tel. f	۱o. ر	12d. Fax No.		
None				•	12e. Cell I	No.	12f. E-Mail Address	1	
13. Election Details: If the NLRB matter, state your position with r					13a. Elect	ion Type: 🔀 Manua	Mail M	lixed Manual/Mail	
13b. Election Date(s) July 19, 2018		13c. Election Tin Morning / A			13d. Elect Confe	ion Location(s) rence Rooms in	Torrance location	n	
14. Full Name of Petitioner (b) (6), (b) (7)(C)		1							
(b) (6), (b) (7)(C)	city state, ZIP o	ode)	· · · · · · · · · · · · · · · · · · ·	•	14b. Tel. (b) (6), (b	No.) (7)(C)	14c. Fax No.		
			•		14d. Cell	No.	14e. E-Mail Addres (b) (6), (b) (7)	(C)	
14f. Affiliation, if any								,	
15. Representative of the Petition	ar who will an	eant comics of o	I nanora for	non of the sa-	manatatia-	proceeding			
	ier who will ac	cept service of al	papers for purpos	ses of the repr		proceeding.			
15a. Name					15b.Title				
15c. Address (Street and number, o	city, state, ZIP c	ode)		1	15d. Tel. I	No.	15e. Fax No.		
		(1) (2) -(1)			15f. Cell N	lo	15g. E-Mail Addres	s	
		(b) (6), (b)	o) (7)(C)	heat of acciden	audede :	nd holist	L		
declare that I have read the abo				best of my kn		na benet.		Data Filad	
Name (Print) (b) (6), (b) (7)(C)	S	(b) (o), (b) (1)(C)		Title			Date Filed 07/03/2018	

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE	
31-RD-223335	Data Filed 7/6/2018

RD PETITION INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.gov, submit an original of this 🦮 tition to an NLRS 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: RD- DECERTIFICATION (REMOVAL OF REPRESENTATIVE) - 4 substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act. 2a. Name of Employer 2b. Address(es) of Establishment(s) Involved (Street and number, city, State, ZIP code) 112UL PEONIA T SUN VALLEY CA 91352 Arakellan Enterprises, Inc. d/b/a Athens Services 3a. Employer Representative - Name and Title Lupe Guerrero, Human Resources Manager , Pacoima .CA 9133] 3c. Tel. No. 3d, Cell No. 3f. E-Mall Address (818) 381-4363 Ext 3525 (626) 893-1438 framfrezguerrero@athensservices.com 4a. Type of Establishment (Factory, mine, wholessier, etc.) 4b. Principal product or service 5a. City and State where unit is located; Waste Management Services Waste Management SUNVAlley, CA 5b. Description of Unit Involved Ba. No. of Employees in Unit. All mechanics, drivers, helpers, and altropworkers at 1 11266 Peoria ST SUNVALLEY CA a1353 ۱۱۵ included: 6b. Do a substantial number (30% or more) of the employees in the Excluded: unit no longer wish to be represented by the certified or All other employees, office clerical employees, confidential employees, guards and supervisors as defined in the Act. currently recognized bargaining representative? 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). Petitioner is currently recognized as Bargaining Representative and desires certification under the Act 7b. 8a. Name of Recognized or Certified Bargaining Agent 8b. Address Teamsters Local 396 880 S. Oak Park Road, Suite 200, Covina, CA 91724 8c. Tel No. 8d Cell No. 8f. E-Mail Address (626) 915-3636 teamsters@tocsl396.net 8g. Affillation, if any 8h. Date of Recognition or Certification 8I. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 06/26/2017 9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately now many employees are participating? (Name of labor organization) has picketed the Employer since 'Month, Day, Year) 10. Organizations or individuals other than these 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) tita, Name 10b. Address 10¢, Tel. No. 10d, Çell No, None 10a, Fax No. 10f. E-Mail Address 11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to 11a. Election Type: 🗸 Manual Mail Mixed Manual/Mail any such election. 11c. Election Time(s):
Sun Valley, morning 11d. Election Location(a): CONFERENCE ROOM in Suivalley 11b. Election Date(s): July 19, 2018 ^{12a. F}(b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 125 labor organization of which Petitioner is an affiliate or constitution of mine, as None 12c. Cell No. 12f. Fax No. (b) (6), (b) (7)(C) (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 13b. Address (street and number, city, state, and ZIP code) None 13c. Tel No. 13d. Cell No. 13e. Fax No. 13f. E-Mail Address I declare that I have read the above petition (b) (6), (b) (7)(C) s are true to the best of my knowledge and belief. Title (b) (6), (b) (7)(C) (b) (6), (b) (1)(C) n/a ALFUL FALSE ST N BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION (001)

PRIVACY ACT STATEMENT

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