

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

DO NOT WRITE IN THIS SPACE

Case No. <b>31-RC-244204</b>	Date Filed <b>7/1/2019</b>
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**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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.**

<b>2a. Name of Employer:</b> Technica, LLC	<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> Marine Corps Logistics Base, Joseph L. Broll Ave., Barstow, CA 92311
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<b>3a. Employer Representative - Name and Title:</b> Christian Bassily Chief Operating Officer	<b>3b. Address (if same as 2b - state same):</b> 1 Cool Blow Street, STE 201 Charleston, SC 29403
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<b>3c. Tel. No.</b> 843-822-9605	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> cbassily@technicanow.com
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<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Military Base	<b>4b. Principal Product or Service</b> Facilities Support Services	<b>5a. City and State where unit is located:</b> Barstow CA
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<b>5b. Description of Unit Involved:</b> <b>Included:</b> See Attachment <b>Excluded:</b> See Attachment	<b>6a. Number of Employees in Unit:</b> 5	<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Check One:  7a. Request for recognition as Bargaining Representative was made on (Date) 05/17/19 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.

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

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

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

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

<b>11b. Election Date(s):</b> July 15, 2019	<b>11c. Election Time(s):</b> 4:30-6:00 p.m.	<b>11d. Election Location(s):</b> See Attachment
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<b>12a. Full Name of Petitioner (including local name and number):</b> Teamsters, Chauffeurs, Warehousemen, Industrial and Allied Workers of America, Local 166	<b>12b. Address (street and number, city, State and ZIP code):</b> 18597 Valley Blvd. Bloomington, CA 92316
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**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):**  
International Brotherhood of Teamsters

<b>12d. Tel. No.</b> 909-877-8326	<b>12e. Cell No.</b>	<b>12f. Fax No.</b> 909-877-2812	<b>12g. E-Mail Address</b>
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<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>			
<b>13a. Name and Title:</b> Arthur N. Four, REICH, ADELL & CVITAN	<b>13b. Address (street and number, city, State and ZIP code):</b> 3550 Wilshire Blvd., Suite 2000 Los Angeles, CA 90010		

<b>13c. Tel. No.</b> 213-386-3860	<b>13d. Cell No.</b>	<b>13e. Fax No.</b> 213-386-5583	<b>13f. E-Mail Address</b> arthurf@rac-law.com
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Arthur N. Four	Signature 	Title Counsel for Petitioner	Date 06/06/19
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**  
**PRIVACY ACT STATEMENT**

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

**ATTACHMENT TO RC PETITION**

**5b. Description of Unit Involved:**

Included: All truck Drivers (Heavy) and Material Handling Labor employees employed by the Employer out of Marine Corps. Logistics Base Warehouse 5.

Excluded: All other employees, office clerical employees, confidential employees, guards and supervisors, as defined by the Act, as amended.

**11d. Election Location(s):**

Employee breakroom located in Warehouse 5 (near door 16) on Avenue A, Marine Corps. Logistics Base, Barstow, CA.

UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. 31-RC-244356	Date Filed 7/3/2019

**INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlr.gov](http://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.**

<b>2a. Name of Employer</b> Art Directors Guild	<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 11969 Ventura Boulevard CA Studio City 91604-
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<b>3a. Employer Representative - Name and Title</b> Chuck Parker	<b>3b. Address (If same as 2b - state same)</b> 11969 Ventura Boulevard CA Studio City 91604-
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<b>3c. Tel. No.</b> (818) 762-9995	<b>3d. Cell No.</b> (818) 858-2817	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> chuck@artdirectors.org
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<b>4a. Type of Establishment (Factory, mine, wholesaler, etc )</b> Others	<b>4b. Principal product or service</b> Labor Organization	<b>5a. City and State where unit is located:</b> Studio City, CA
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<b>5b. Description of Unit Involved</b> <b>Included:</b> See Attached Page 2 for additional details <b>Excluded:</b> See Attached Page 2 for additional details	<b>6a. No. of Employees in Unit:</b> 22	<b>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"/></b>
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**Check One:**  **7a.** Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
 **7b.** Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

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

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

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

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

<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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<b>11b. Election Date(s):</b> July 15, 2019	<b>11c. Election Time(s):</b> 12 noon to 1 p.m.	<b>11d. Election Location(s):</b> Art Directors Guild, 11969 VENTURA BLVD. STUDIO CITY, CA 91604
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<b>12a. Full Name of Petitioner (including local name and number)</b> Jacqueline K. White-Brown Office & Professional Employees International Union, Local 537, AFL-CIO	<b>12b. Address (street and number, city, state, and ZIP code)</b> 3229 East Foothill Boulevard CA Pasadena 91107-
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**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
Office & Professional Employees International Union, AFL-CIO

<b>12d. Tel No.</b> (626) 577-4500	<b>12e. Cell No.</b> (626) 260-8989	<b>12f. Fax No.</b> (626) 577-0100	<b>12g. E-Mail Address</b> jacqueline@opeiu537.org
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> Joseph L. Paller Jr. Attorney for Petitioner Gilbert & Sackman, a Law Corporation	<b>13b. Address (street and number, city, state, and ZIP code)</b> 3699 Wilshire Boulevard Suite 1200 CA Los Angeles 90010-2732
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<b>13c. Tel No.</b> (213) 900-4690	<b>13d. Cell No.</b> (323) 627-6015	<b>13e. Fax No.</b> (323) 937-9139	<b>13f. E-Mail Address</b> jpaller@gslaw.org
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**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

<b>Name (Print)</b> Joseph L. Paller Jr.	<b>Signature</b> Joseph L. Paller Jr.	<b>Title</b> Attorney for Petitioner	<b>Date</b> 07/3/2019 13:41:08
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

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

Attachment

Employees Included  
All full-time and part-time employees

Employees Excluded  
Guards, watchmen and supervisors

<b>DO NOT WRITE IN THIS SPACE</b>	
Case	Date Filed



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. 31-RC-244938	Date Filed 7/16/2019

**INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlr.gov](http://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)  
30 Nightingale Rd., Edwards Air Force Base, CA 93524

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:  
Edwards Air Force Base, CA

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 Edwards Air Force Base.  
Excluded: All other employees, managers, office clericals, guards, and supervisors as defined by the Act.

6a. No. of Employees in Unit:  
3

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

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):  
Wednesday 07/31/2019

11c. Election Time(s):  
12:30 pm - 1:00 pm

11d. Election Location(s):  
Oasis Community Ctr classroom - Bldg 2500, 205 West Popson Ave, Edwards AFB, CA 93524

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  
Caren P. Sencer, 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  
CSencer@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)  
Caren P. Sencer

Signature  


Title  
Attorney

Date  
July 15, 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**

<b>DO NOT WRITE IN THIS SPACE</b>	
Case No. <b>31-RC-245109</b>	Date Filed <b>7/18/2019</b>

**INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlr.gov](http://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.**

<b>2a. Name of Employer</b> Strategic Resources, Inc. (SRI)		<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> Vandenberg Air Force Base, 747 Nebraska Ave, Vandenberg AFB, CA 93437	
<b>3a. Employer Representative - Name and Title</b> Kirby Collins Senior Human Resources Manager		<b>3b. Address (If same as 2b - state same)</b> 7927 Jones Branch Drive, Suite 600W McLean, VA 22102-3329	
<b>3c. Tel. No.</b> (703) 749-3040	<b>3d. Cell No.</b>	<b>3e. Fax No.</b> (703) 749-3046	<b>3f. E-Mail Address</b> kcollins@sri-hq.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Military Contractor		<b>4b. Principal product or service</b> Military Support	<b>5a. City and State where unit is located:</b> Vandenberg AFB, CA
<b>5b. Description of Unit Involved</b> <b>Included:</b> All full-time and regular part-time Military Family Life Counselors (MFLC) working for the MFLC Program, which is based out of Vandenberg Air Force Base. <b>Excluded:</b> All other employees, managers, office clericals, guards, and supervisors as defined by the Act.			<b>6a. No. of Employees in Unit:</b> 3 <b>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"/></b>

**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.

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

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

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

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

<b>11b. Election Date(s):</b> Wednesday 08/07/2019	<b>11c. Election Time(s):</b> 11:00 am - 1:00 pm	<b>11d. Election Location(s):</b> 30FSS Airman & Family Readiness Ctr Classroom 10122 Washington Ave, Vandenberg AFB
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<b>12a. Full Name of Petitioner (including local name and number)</b> International Association of Machinists and Aerospace Workers, Local Lodge 47	<b>12b. Address (street and number, city, state, and ZIP code)</b> 5621 Bowen Ct., Commerce City, CO 80022
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)  
International Association of Machinists and Aerospace Workers, AFL-CIO

<b>12d. Tel No.</b> (916) 985-8101	<b>12e. Cell No.</b> (916) 597-6100	<b>12f. Fax No.</b> (916) 985-8121	<b>12g. E-Mail Address</b> mward@iamaw.org
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13. **Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> Caren P. Sencer, Attorney		<b>13b. Address (street and number, city, state, and ZIP code)</b> Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501	
<b>13c. Tel No.</b> 510-337-1001	<b>13d. Cell No.</b>	<b>13e. Fax No.</b> 510-337-1023	<b>13f. E-Mail Address</b> csencer@unioncounsel.net nlrnotices@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.

<b>Name (Print)</b> Caren P. Sencer	<b>Signature</b> 	<b>Title</b> Attorney	<b>Date</b> July 17, 2019
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information 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. <b>31-RC-245150</b>	Date Filed <b>7/19/2019</b>

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://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.**

<b>2a. Name of Employer</b> AutoNation Honda Valencia		<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 23551 Magic Mountain Parkway, Valencia, CA 91355	
<b>3a. Employer Representative - Name and Title</b> John Turja, General Manager		<b>3b. Address (If same as 2b - state same)</b> same	
<b>3c. Tel. No.</b> 661-799-1299	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> TurjaJ@AutoNation.com
<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Automobile Dealership		<b>4b. Principal product or service</b> Automobile Sales and Service	
<b>5b. Description of Unit Involved</b> Included: All full time and regular part-time Service Technicians. Excluded: All others		<b>5a. City and State where unit is located:</b> Valencia, CA	
		<b>6a. No. of Employees in Unit.</b> 23	
		<b>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"/></b>	

**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.

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

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

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

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

<b>11b. Election Date(s):</b> Thursday, August 1, 2019	<b>11c. Election Time(s):</b> 10:00 am -11:00 am	<b>11d. Election Location(s):</b> TBD
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12a. **Full Name of Petitioner (including local name and number)**  
International Association of Machinists and Aerospace Workers Local Lodge No. 1484, District Lodge 190

12b. **Address (street and number, city, state, and ZIP code)**  
1261 N. Avalon Blvd., Wilmington, CA 90744

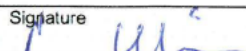
12c. **Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
International Association of Machinists and Aerospace Workers, AFL-CIO

<b>12d. Tel No.</b> 925-687-6421 x 16	<b>12e. Cell No.</b>	<b>12f. Fax No.</b> 925-685-4116	<b>12g. E-Mail Address</b> jjuarez1173@sbcglobal.net
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13. **Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b> Eric J. Wiesner, Attorney		<b>13b. Address (street and number, city, state, and ZIP code)</b> Weinberg, Roger & Rosenfeld 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501	
<b>13c. Tel No.</b> 510-337-1001	<b>13d. Cell No.</b>	<b>13e. Fax No.</b> 510-337-1023	<b>13f. E-Mail Address</b> ewiesner@unioncounsel.net nlrnotices@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.

<b>Name (Print)</b> Eric J. Wiesner	<b>Signature</b> 	<b>Title</b> Attorney	<b>Date</b> July 19, 2019
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)**

**PRIVACY ACT STATEMENT**

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

Case No. <b>31-RC-245764</b>	Date Filed <b>7/30/2019</b>
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**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov/](http://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.

<b>2a. Name of Employer:</b> Occidental College	<b>2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):</b> 1600 Campus Road, Los Angeles, CA 90041
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<b>3a. Employer Representative - Name and Title</b> Jonathan Veitch, President	<b>3b. Address (if same as 2b - state same):</b> same
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<b>3c. Tel No</b> (323) 259-2691	<b>3d. Cell No</b>	<b>3e. Fax No</b>	<b>3f. E-Mail Address</b> Veitch@oxy.edu
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<b>4a. Type of Establishment (Factory, mine, wholesaler, etc)</b> Higher Learning	<b>4b. Principal Product or Service</b> Education	<b>5a. City and State where unit is located</b> Los Angeles, CA
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<b>5b. Description of Unit Involved:</b> <b>Included:</b> See Attachment A	<b>6a. Number of Employees in Unit</b> 96
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<b>Excluded:</b> See Attachment A	<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Check One  **7a. Request for recognition as Bargaining Representative was made on (Date) this petition and Employer declined recognition** on or about (Date) ( f no reply received so state)

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

<b>8a. Name of Recognized or Certified Bargaining Agent (if none, so state)</b> None	<b>8b. Address</b>
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<b>8c. Tel No</b>	<b>8d. Cell No</b>	<b>8e. Fax No</b>	<b>8f. E-Mail Address</b>
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<b>8g. Affiliation, if any:</b>	<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>
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**9. s there now a strike or picketing at the Employer's establishment(s) involved? No** f 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)**

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

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

<b>11b. Election Date(s):</b> August 13, 2019	<b>11c. Election Time(s):</b>	<b>11d. Election Location(s):</b>
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<b>12a. Full Name of Petitioner (including local name and number):</b> Service Employees International Union, Local 721	<b>12b. Address (street and number, city, State and ZIP code)</b> 1545 Wilshire Boulevard, Los Angeles, CA 90017
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**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):**  
Service Employees International Union

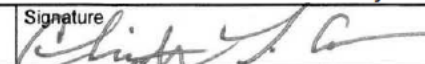
<b>12d. Tel No</b> (213) 368-8660	<b>12e. Cell No</b> (213) 304-9862	<b>12f. Fax No</b>	<b>12g. E-Mail Address</b> Heidi.Holliday@seiu721.org
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title:</b> Christina L. Adams, Attorney	<b>13b. Address (street and number, city, State and ZIP code):</b> Weinberg, Roger & Rosenfeld, A Professional Corporation 800 Wilshire Boulevard, Ste. 1020, Los Angeles, CA 90017
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<b>13c. Tel No</b> (213) 380-2344	<b>13d. Cell No</b>	<b>13e. Fax No</b> (213) 443-5098	<b>13f. E-Mail Address</b> nlrbcourtnotices@unioncounsel.net
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

<b>Name (Print)</b> Christina L. Adams	<b>Signature</b> 	<b>Title</b> Attorney	<b>Date</b> 7/30/2019
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**WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) PRIVACY ACT STATEMENT**



## ATTACHMENT A

### **RC Petition**

Petitioner: Service Employees International Union, Local 721

Employer: Occidental College

### **Description of Union Involved:**

**Included:** Academic Coordinator - Upward Bound, Academic Technology Specialist, Accounting Support Clerk, Administrative Assistant, Administrative Coordinator, Admission Coordinator, Admission Operations Coordinator, Alumni Engagement Coordinator, Art Studio Manager, Assessment and User Experience Specialist, Assistant College Archivist/Meta Data Specialist, Assistant to the Director of Campaign Planning, Bookstore Course Materials Coordinator, Budget Analyst/Information Systems Specialist, Campus Visit Assistant, Card Services/POS Coordinator, Catalog Data Specialist, Conference Services/Filming Program Coordinator, Coordinator of OEI, Data & Information Specialist-Social Sciences, Data Control Coordinator, Department Coordinator, Department Manager, Department Secretary, Department Services Coordinator, Development and Events Coordinator, Development Coordinator, Digitization and Preservation Specialist, Donor Relations Coordinator, Engagement Assistant, Enrollment Communications Specialist, Executive Assistant, Executive Assistant and Senior Operations Admin Asst, Facilities Worker Center Coordinator, Faculty Services Assistant, Financial Aid Coordinator, Front Desk Staff, Gen.MerchandiseBuyer /ShpRecCr, Gift Processor, Grants Specialist, Help Desk Support Specialist, HRIS Coordinator, Instruction + Research Specialist for Arts & Humanities, Instruction/Resources Specialist – Sciences, Machinist, Marketing Communications Specialist, Master Calendar Coordinator, Media Services Coordinator, Office Assistant, Operation Assistant, Operation Coordinator, Parent/Community Involvement Coordinator, Payroll Specialist, Production/Operations manager, Program Assistant, Program Coordinator, Program Manager, Program Services Coordinator, Project and Outreach Coordinator, Project Coordinator, Project Services Coordinator, Receptionist, Receptionist & Events, Receptionist/Campus Visit Assistant, Registrar Assistant, Research and Prospect Management Specialist, Research Assistant, Resource Acquisition Specialist,

Resource Sharing Specialist, Sales Reconciliation & Services Coordinator, Senior Administrative Assistant, Senior Admissions Coordinator, Senior Coordinator Data Management, Senior Coordinator Engagement Communications, Senior Operations Coordinator Gift Planning, Senior Program Coordinator, Senior Research and Prospect Management Specialist, Serial Data and Materials Specialist, Special Collections Instruction + Research Librarian Specialist, Specialist for Language Education, Student Benefits and Instruction Specialist, Student Records Specialist, Summer Office Assistant, Technical Support Specialist, Upward Bound Office Aide, URC Coordinator, User Support Specialist, Vendor Maintenance Specialist

Excluded: All other employees, guards, and supervisors as defined by Section 2(11) of the Act