

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

<b>DO NOT WRITE IN THIS SPACE</b>	
Case No. <b>28-RC-237411</b>	Date Filed <b>March 8, 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.

**2a. Name of Employer**  
CAE Oxford Aviation

**2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)**  
5010 E. Falcon Drive, Suite 201, Mesa, AZ85215

**3a. Employer Representative - Name and Title**  
Dominiek De Roo

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

**3c. Tel. No.**  
480-948-4515

**3d. Cell No.**

**3e. Fax No.**

**3f. E-Mail Address**  
dominiek.deroo@cae.com

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**  
Airport

**4b. Principal product or service**  
Flight Instruction

**5a. City and State where unit is located:**  
Mesa, AZ

**5b. Description of Unit Involved**

**Included:** Piston-Engine Flight Instructors operating out of Falcon Field

**Excluded:** Managers, Supervisors, Clerical Workers, and all other employees including professional employees, managerial employees, guards, supervisors, and other employees as defined by the act.

**6a. No. of Employees in Unit:**  
64

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

**Check One:**  **7a.** Request for recognition as Bargaining Representative was made on (Date) 3/8/2019 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):**  
3/26/2019

**11c. Election Time(s):**  
4PM - 8PM

**11d. Election Location(s):**  
Conference Room, 5010 E. Falcon Drive, Suite 201, Mesa, AZ 85215

**12a. Full Name of Petitioner (including local name and number)**  
International Association of Machinists and Aerospace Workers, Local Lodge 519

**12b. Address (street and number, city, state, and ZIP code)**  
PO Box 74811, Phoenix, AZ 85087

**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.**

**12e. Cell No.**  
801-201-3715

**12f. Fax No.**  
928-441-1157

**12g. E-Mail Address**  
pshepherd@iamaw.org

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

**13a. Name and Title** Jason Hardwick, Grand Lodge Representative

**13b. Address (street and number, city, state, and ZIP code)**  
620 Coolidge Rd., Suite 130, Folsom, CA 95630

**13c. Tel No.**  
916-985-8101

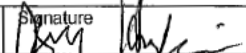
**13d. Cell No.**  
916-936-6013

**13e. Fax No.**  
916-985-8121

**13f. E-Mail Address**  
jhardwick@iamaw.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)** Jason Hardwick

**Signature** 

**Title** Grand Lodge Representative

**Date** 3/8/2019

**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 OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-237981	Date Filed 3/20/2019

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlrb.gov/](http://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: Letter Ride LLC.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 3655 W. Sunset Rd. Suite E, Las Vegas NV 89118
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3a. Employer Representative - Name and Title: Jesus Castro, Manager	3b. Address (if same as 2b - state same): SAME
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3c. Tel. No. (619)886-2570	3d. Cell No. (702)913-3383	3e. Fax No.	3f. E-Mail Address jccastro.dhl@gmail.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transport, Delivery, Freight	4b. Principal Product or Service Delivery	5a. City and State where unit is located Las Vegas, Nevada
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6b. Description of Unit Involved: Included: All full & part time Drivers, Dock Workers Bulk Drivers At the Las Vegas NV. Facility  Excluded: All Other employees, Gards and Supervisors As defined in Act	6a. Number of Employees in Unit: 35
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6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner?  Yes  No

Check One  7a. Request for recognition as Bargaining Representative was made on (Date) 3/11/19 and Employer declined recognition on or about (Date) (If no reply received, so state). None  
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

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

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

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

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

11b. Election Date(s): Tuesday, March 26, 2019	11c. Election Time(s): 4pm -8pm	11d. Election Location(s): 3655 W. Sunset Rd. Suite E. Las Vegas NV. 89118
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12a. Full Name of Petitioner (including local name and number): Teamsters, Chauffeurs, Warehousemen And Helpers, Local No.631	12b. Address (street and number, city, State and ZIP code): 700 N. Lamb BLVD. Las Vegas, NV 89110
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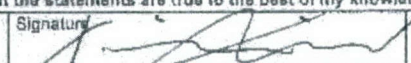
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):  
International Brotherhood Of Teamsters

12d. Tel. No. (702)-453-6310	12e. Cell No.	12f. Fax No. (702)-437-7237	12g. E-Mail Address
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title: Francisco Miranda, Organizer	13b. Address (street and number, city, State and ZIP code): SAME
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13c. Tel. No. (702)-430-5031	13d. Cell No. (702)-672-4666	13e. Fax No. SAME	13f. E-Mail Address Franciscom@teamsters631.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) Francisco Miranda	Signature 	Title Organizer	Date 3/18/19
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)  
PRIVACY ACT STATEMENT

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