

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-251226	Date Filed 11/5/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 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:
Nevada Ballet Theatre

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
1651 Inner Circle, Las Vegas, NV 89134

3a. Employer Representative - Name and Title:
Beth Barbre, Executive Director and CEO

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

3c. Tel. No. (702) 243-2623, ext 227 **3d. Cell No.** **3e. Fax No.** (702) 804-0365 **3f. E-Mail Address** BBarbre@nevadaballet.org

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Ballet Company

4b. Principal Product or Service
Ballet performances

5a. City and State where unit is located:
Las Vegas, Nevada

5b. Description of Unit Involved:
Included: All Company Dancers, Apprentices, Assistant Stage Managers, and Stage Managers employed by the Employer at its Las Vegas, Nevada facility.
Excluded: Las Vegas, Nevada facility. All other employees, guards and supervisors as defined by the Act.

6a. Number of Employees in Unit:
approx. 26

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) 10/28/2019 and Employer declined recognition on or about (Date) 11/4/2019 (if no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

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

8b. Address:

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

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

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

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

10a. Name
None

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: Manual Mail Mixed Manual/Mail

11a. Election Type:

11b. Election Date(s): 11/20/2019 **11c. Election Time(s):** TBD by RD after consultation w/the parties **11d. Election Location(s):** Employer's facility

12a. Full Name of Petitioner (including local name and number):
American Guild of Musical Artists

12b. Address (street and number, city, State and ZIP code):
1430 Broadway, 14th Floor
New York, NY 10018

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
Associated Actors & Artists of America

12d. Tel. No. (212) 265-3687 **12e. Cell No.** (202) 907-1725 **12f. Fax No.** (212) 262-9088 **12g. E-Mail Address** legert@musicalartists.org

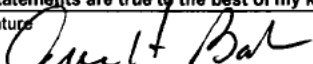
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title:
Andrew H. Baker, Attorney for Petitioner

13b. Address (street and number, city, State and ZIP code):
483 Ninth Street, Ste. 200, Oakland, CA 94607

13c. Tel. No. (510) 625-9700 **13d. Cell No.** **13e. Fax No.** (510) 625-8275 **13f. E-Mail Address** eaviva@beesontayer.com
abaker@beesontayer.com

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

Name (Print) Andrew H. Baker **Signature**  **Title** Attorney for Petitioner **Date** 11/5/2019

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 may cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-251452	Date Filed November 8, 2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 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
Akima

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
Campo Avion, Building 2886, Yuma Proving grounds, Yuma AZ 85365

3a. Employer Representative - Name and Title
Chris Hansen, Director Labor Relations

3b. Address (if same as 2b - state same)
2553 Dulles View Drive, Suite 700 Herndon, VA 20171

3c. Tel. No.
703 967-9357

3d. Cell No.
703 967-9357

3e. Fax No.

3f. E-Mail Address
Chris.hansen@akima.com

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

4b. Principal product or service
Aircraft Maintenance

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

5b. Description of Unit Involved
Included: All full-time and regular part-time Aircraft mechanics, GSE mechanics
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:
15

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) 11/8/2019 and Employer declined recognition on or about _____ (Date) (if no reply received, so state). **No Reply**
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

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

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

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

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

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

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

11. Election Details: 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):
11/22/2019

11c. Election Time(s):
9:00AM - 11:00AM

11d. Election Location(s):
Lunch Room/Conference Room, Campo Avion, Building 2888, Yuma Proving grounds, Yuma AZ 85365

12a. Full Name of Petitioner (including local name and number)
International Association of Machinists and Aerospace Workers, Local Lodge SC311

12b. Address (street and number, city, state, and ZIP code)
3939 W. Ave. 3E, Suite 109, yuma, AZ 85364

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.
916-549-6907

12e. Cell No.
916-549-6907

12f. Fax No.

12g. E-Mail Address
snickel@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

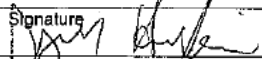
13c. Tel No.
916-985-8101

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 11/8/2019
--------------------------------	--	-------------------------------------	-------------------

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 GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE
Case No. **28-RC-251849** Date Filed **November 15, 2019**

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

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

2a. Name of Employer
Palms Hotel and Casino
2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
4321 W. Flamingo Rd, Las Vegas, NV 89103

3a. Employer Representative - Name and Title
Teresa Hilton
3b. Address (if same as 2b - state same)
SAME AS ABOVE

3c. Tel. No. (702) 942-6825
3d. Cell No. (702) 283-3967
3e. Fax No. (702) 942-8055
3f. E-Mail Address Teresa.Hilton@palms.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Hotel and Casino
4b. Principal product or service Hospitality and Gaming
5a. City and State where unit is located: Las Vegas, NV

6a. Description of Unit Involved
Included: All full-time and part-time maintenance engineers, junior engineers, painters, carpenters employed by the Employer.
Excluded: Office clerical and professional employees guards and supervisors defined by the Act.
6a. No. of Employees in Unit: 55
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes [X] No []

Check One: **7a. Request for recognition as Bargaining Representative was made on (Date)** 11/12/2019 **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). None
8b. Address N/A

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

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

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

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

10a. Name None
10b. Address N/A
10c. Tel. No. N/A
10d. Cell No. N/A
10e. Fax No. N/A
10f. E-Mail Address N/A

11. Election Details: If the NLRB conducts 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): November 26, 2019
11c. Election Time(s): 7:00 am to 9:00 am & 3:00 pm to 5:00 p.m.
11d. Election Location(s): Employers Location/Convention Room

12a. Full Name of Petitioner (including local name and number)
International Union of Operating Engineers Local 501 & District Council 16 International Union of Painters and Allied Trades
12b. Address (street and number, city, state, and ZIP code)
301 South Deauville Street, Las Vegas, NV 89106 & 1701 Whitney Mesa Drive #105, Henderson, NV 89104

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Union of Operating Engineers Local 501, AFL-CIO & International Union of Painters and Allied Trades District Council 16

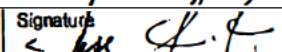
12d. Tel. No. (702) 382-8452
12e. Cell No. (702) 622-0846
12f. Fax No. (702) 386-5813
12g. E-Mail Address Jsoto@local501.org

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

13a. Name and Title
Jose Soto, Director of Organizing & Savannah Palmis, Organizer
13b. Address (street and number, city, state, and ZIP code)
301 Deauville Street, Las Vegas, NV 89106
1701 Whitney Mesa Drive #105, Henderson, NV 89104

13c. Tel No. (702) 382-8452 & (702) 452-2140
13d. Cell No. (702) 622-0846
13e. Fax No. (702) 386-5813 & (702) 452-3062
13f. E-Mail Address Jsoto@local501.org & Savannah@DC16.us

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) Jose Soto
Signature 
Title Director of Organizing
Date 11/15/2019

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

PRIVACY ACT STATEMENT

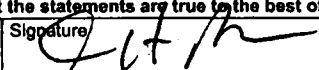
Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses 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. 1-2613774221

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-251953	Date Filed 11/18/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 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: Nevada Ballet Theatre		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1651 Inner Circle, Las Vegas, NV 89134	
3a. Employer Representative - Name and Title: Beth Barbre, Executive Director and CEO		3b. Address (if same as 2b - state same): same	
3c. Tel. No. (702) 243-2623, ext 227	3d. Cell No.	3e. Fax No. (702) 804-0365	3f. E-Mail Address BBarbre@nevadaballet.org
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Ballet Company		4b. Principal Product or Service Ballet performances	5a. City and State where unit is located: Las Vegas, Nevada
5b. Description of Unit Involved: Included: All Company Dancers, Apprentices and Production Coordinators employed by the Excluded: Employer at its Las Vegas, Nevada facility All other employees, guards and supervisors as defined by the Act.		6a. Number of Employees in Unit: approx. 25	
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 10/28/2019 and Employer declined recognition on or about (Date) 11/4/2019 (if no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>No</u> 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 None	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election:			11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): 12/4/2019	11c. Election Time(s): 3:45 p.m. - 4:45 p.m.		11d. Election Location(s): Employer's facility
12a. Full Name of Petitioner (including local name and number): American Guild of Musical Artists		12b. Address (street and number, city, State and ZIP code): 1430 Broadway, 14th Floor New York, NY 10018	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): Associated Actors & Artists of America			
12d. Tel. No. (212) 265-3687	12e. Cell No. (202) 907-1725	12f. Fax No. (212) 262-9088	12g. E-Mail Address legert@musicalartists.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Andrew H. Baker, Attorney for Petitioner		13b. Address (street and number, city, State and ZIP code): 483 Ninth Street, Ste. 200, Oakland, CA 94607	
13c. Tel. No. (510) 625-9700	13d. Cell No.	13e. Fax No. (510) 625-8275	13f. E-Mail Address eaviva@beesontayer.com abaker@beesontayer.com
I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) Andrew H. Baker	Signature 	Title Attorney for Petitioner	Date 11/18/19

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

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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-252160	Date Filed November 20, 2019

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

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

2a. Name of Employer
Magellan Healthcare, Inc.

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

3a. Employer Representative - Name and Title
Amy Shore, Regional Manager

3b. Address (if same as 2b - state same)
14100 Magellan Plaza Maryland Heights, MO 63043-4644

3c. Tel. No.
(619) 433-4709

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
Ashore9@magellanhealth.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:
Yuma, AZ

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 Yuma, AZ
Excluded: All other employees, managers, office clericals, guards, and supervisors as defined by the Act.

6a. No. of Employees in Unit
6

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):
12/2/2019

11c. Election Time(s):
3:00 - 6:00 p.m.

11d. Election Location(s):
Meeting Room at the Petitioner's Hall, 3939 South Avenue 3 E, Suite 109, Yuma, AZ

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)
5821 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
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.

Name (Print)
Caren P. Sencer

Signature

Title
Attorney

Date
November 20, 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)

Attachment A

2.b. Addresses of Establishment(s) involved:

Sunrise Elementary School
9943 28th St., Yuma AZ 85367

Mary A Otondo Elementary
2251 Otondo Dr, Yuma, AZ 85365

Castle Dome Middle School
2353 Otondo Dr, Yuma, AZ 85365

Role Elementary School
5777 Engler Ave, Yuma, AZ 85365

Palmcroft Elementary School
901 Palmcroft Drive, Yuma, AZ 85365

Woodward Jr. High
2250 8th Ave., Yuma, AZ 85365

Desert Mesa Elementary
2350 Ave 7 1/2 E, Yuma, AZ 85365

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-252235	Date Filed November 21, 2019

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

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

2a. Name of Employer Decypher Technologies Ltd.	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Mike O'Callaghan Military Med. Ctr., 4700 Las Vegas Blvd N, Nellis AFB, NV 89191
---	--

3a. Employer Representative - Name and Title Deborah Heifner, Director of Operations	3b. Address (If same as 2b - state same) 200 Concord Plaza Dr., Suite 780, San Antonio, Texas, 78216-6972
--	---

3c. Tel. No. (210) 735-9900	3d. Cell No.	3e. Fax No.	3f. E-Mail Address Deborah.heifner@decypher.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: Nellis AFB, NV
---	---	--

5b. Description of Unit Involved Included: All full time, regular part time, per diem, Registered Nurses and Medical Office Clerks working in Post-Anesthesia Care Unit (PACU) and the Gastroenterology Unit (GI) employed by the employer at Mike O'Callaghan Military Medical Center Building 1300, 2nd floor. Excluded: All managers, Doctors, Physicians, Pharmacists, Dieticians, Therapists and all other professional employees, guards and supervisors as defined by the Act.	5a. No. of Employees in Unit: 7 5b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
--	--

Check One: **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). none	8b. Address
--	--------------------

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

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

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

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

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

11. Election Details: 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 December 11, 2019	11c. Election Time(s): 7:00 am - 8:00 am	11d. Election Location(s): 2nd Floor Conference Room #2280
---	--	--

12a. Full Name of Petitioner (including local name and number) International Association of Machinists and Aerospace Workers, Local Lodge SC711	12b. Address (street and number, city, state, and ZIP code) 4343 N. Rancho Dr. Suite 218, Las Vegas, NV 89130
---	---

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) 542-3351	12e. Cell No. (760) 810-6989	12f. Fax No.	12g. E-Mail Address rcarrillo@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
-------------------------------------	----------------------	-------------------------------------	--

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 November 21, 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 OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-252280	Date Filed 11/21/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 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: Red Rock Resorts d/b/a Red Rock Casino Resort & Spa	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 11011 W Charleston Blvd Las Vegas, NV 89135
---	---

3a. Employer Representative - Name and Title: Scott Nelson, General Manager	3b. Address (if same as 2b - state same): same
---	--

3c. Tel. No. 702-797-7005	3d. Cell No.	3e. Fax No.	3f. E-Mail Address scott.nelson@stationcasinos.com
-------------------------------------	---------------------	--------------------	--

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Casino	4b. Principal Product or Service Casino gaming	5a. City and State where unit is located: Las Vegas, Nevada
--	--	---

5b. Description of Unit Involved: Included: See Attachment A Excluded: See Attachment A	6a. Number of Employees in Unit: 1,350	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input type="checkbox"/> Yes <input type="checkbox"/> No
--	--	--

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

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

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

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

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

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

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

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

11b. Election Date(s): December 6-7, 2019	11c. Election Time(s): 6 am to 9 am; 11 am to 2 pm; 4 pm to 7 p	11d. Election Location(s): on-property meeting room
---	---	---

12a. Full Name of Petitioner (including local name and number): Local Joint Executive Board of Las Vegas	12b. Address (street and number, city, State and ZIP code): 1630 S. Commerce Street Las Vegas, NV 89102
--	--

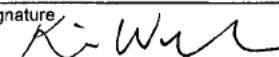
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
UNITE HERE International Union

12d. Tel. No. 702-385-2131	12e. Cell No.	12f. Fax No. 702-386-9517	12g. E-Mail Address kkline@unitehere.org
--------------------------------------	----------------------	-------------------------------------	--

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.	
13a. Name and Title: Kimberley C. Weber, Attorney	13b. Address (street and number, city, State and ZIP code): McCracken, Stemerma & Holsberry, LLP 595 Market Street, Suite 800 San Francisco, CA 94105

13c. Tel. No. 415-597-7200	13d. Cell No.	13e. Fax No. 415-597-7201	13f. E-Mail Address kweber@msh.law
--------------------------------------	----------------------	-------------------------------------	--

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) Kimberley C. Weber	Signature 	Title Attorney	Date 11/21/19
------------------------------------	--	-------------------	------------------

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

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

5b. Description of Unit Involved:

INCLUDED: All full-time and regular part-time Assistant Food Servers, Bakers, Bakers 2, Bakers 3, Banquets Back Aisle, Banquet Bar Backs, Banquet Bartenders, Banquet Porters, Banquets Setup, Barbacks, Bar porters, Bar host, Bartenders, Bell Persons, Bell Starters, Beverage Porters, Beverage Servers, Beverage (Race/Sports), Banquet Servers, Bus Persons/Bussers, Cake Decorators, Cake Decorators 2, Captains, Coffee Breakers, Concession Workers, Cooks, Cook's Helpers, Counter Attendants, Entertainment Bartenders, Food Servers, Gourmet Hostperson/Cashiers, Host/Cashiers, Housekeeping Utility Porters, Ice Cream Concession Workers, Kitchen Runners, Kitchen Workers, Lead Banquet Porters, Lead Counter Attendants, Lead Servers, Mini Bar Attendants, Mixologists, Pantry, Porters, Resort Guest Room Attendants, Resort Housepersons, Resort Suite Guest Room Attendants, Resort Steakhouse Cooks, Restaurant Attendants, Room Runners, Room Service Captains, Runners, Service Bartenders, Specialty Cooks, Servers, Sprinters, Status Board, Stove Persons, TDR Attendants, Turndown Guest Room Attendants, Utility Porters, VIP Attendants, VIP Bartenders, and VIP Lounge Attendants employed by the employer at its facility at 11011 W Charleston Blvd, Las Vegas, NV.

EXCLUDED: All other employees, front desk employees, valet parkers, gaming employees (dealers, slot attendants, cage cashiers), inspectresses, engineering and maintenance employees, office clerical employees, guards, managers, and supervisors as defined by the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-252293	Date Filed November 22, 2019

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

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

2a. Name of Employer
Akahi Associates LLC

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
Mike O'Callaghan Military Med. Ctr., 4700 Las Vegas Blvd N, Nellis AFB, NV 89191

3a. Employer Representative - Name and Title
Janelle Hamada, Executive Manager

3b. Address (If same as 2b state same)
745 Fort Street, Suite 327, Honolulu, HI 96813

3c. Tel No.
(808) 441-7999

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
jhamada@akahillc.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:
Nellis AFB, NV

5b. Description of Unit Involved

Included: All full time, regular part time, Licensed Practical Nurse (LPN) and Certified Surgical Technologist (CST) working in Post-Anesthesia Care Unit (PACU) and the Urology Clinic employed by the employer at Mike O'Callaghan Military Medical Center Building 1300, 1st and 2nd floor.

Excluded: All managers, Doctors, Physicians, Pharmacists, Dieticians, Therapists and all other professional employees, 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).
none

8b. Address

8c. Tel No

8d. Cell No

8e. Fax No

8f. E Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

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

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

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

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No

10e. Fax No.

10f. E-Mail Address

11. Election Details: 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 December 11, 2019

11c. Election Time(s):
7:00 am 8:00 am

11d. Election Location(s)
2nd Floor Conference Room #2280

12a. Full Name of Petitioner (including local name and number)
International Association of Machinists and Aerospace Workers, Local Lodge SC711

12b. Address (street and number, city, state, and ZIP code)
4343 N Rancho Dr. Suite 218, Las Vegas, NV 89130

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) 542 3351

12e. Cell No
(760) 810-6989

12f. Fax No

12g. E Mail Address
rcarrillo@iamaw.org

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

13a. Name and Title
David W. M. Fujimoto, Attorney

13b. Address (street and number, city, state, and ZIP code)
Weinberg, Roger & Rosenfeld, 1001 Marina Village Parkway, Suite 200, Alameda, CA 94501

13c. Tel No
510-337 1001

13d. Cell No

13e. Fax No.
510 337 1023

13f. E Mail Address
nlrbnotices@unioncounsel.net

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

Name (Print)
David W. M. Fujimoto

Signature


Title
Attorney

Date
November 22, 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)

FIRST AMENDED
UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-252235	Date Filed November 25, 2019

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

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

2a. Name of Employer Decypher Technologies Ltd.	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) Mike O'Callaghan Military Med. Ctr., 4700 Las Vegas Blvd N, Nellis AFB, NV 89191
---	--

3a. Employer Representative - Name and Title Deborah Heifner, Director of Operations	3b. Address (if same as 2b - state same) 200 Concord Plaza Dr., Suite 780, San Antonio, Texas, 78216-6972
--	---

3c. Tel. No. (210) 735-9900	3d. Cell No.	3e. Fax No.	3f. E-Mail Address Deborah.heifner@decypher.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: Nellis AFB, NV
---	---	--

5b. Description of Unit Involved Included: All full time, regular part time, per diem, Registered Nurses working in Post-Anesthesia Care Unit (PACU) and the Gastroenterology Unit (GI) employed by the employer at Mike O'Callaghan Military Medical Center Building 1300, 2nd floor. Excluded: All Medical Office Clerks, managers, Doctors, Physicians, Pharmacists, Dieticians, Therapists and all other professional employees, guards and supervisors as defined by the Act.	6a. No. of Employees in Unit 6 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
--	--

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

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

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

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

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

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

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

11. Election Details: 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 December 11, 2019	11c. Election Time(s): 7:00 am- 8:00 am	11d. Election Location(s): 2nd Floor Conference Room #2280
--	---	--

12a. Full Name of Petitioner (including local name and number) International Association of Machinists and Aerospace Workers, Local Lodge SC711	12b. Address (street and number, city, state, and ZIP code) 4343 N. Rancho Dr. Suite 218, Las Vegas, NV 89130
---	---

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) 542-3351	12e. Cell No. (760) 810-6989	12f. Fax No.	12g. E-Mail Address rcarrillo@iamaw.org
---------------------------------------	--	--------------	---

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

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

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

Name (Print) David W. M. Fujimoto, Attorney	Signature 	Title Attorney	Date November 25, 2019
---	--	--------------------------	----------------------------------

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

PRIVACY ACT STATEMENT

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

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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-252480	Date Filed November 26, 2019

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

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

2a. Name of Employer MGM Resorts International	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 3549 Sammy Davis Jr Dr, Las Vegas, Nevada 89109
--	---

3a. Employer Representative - Name and Title Rudy Pulido, Director of Labor Relations	3b. Address (If same as 2b - state same) 840 Grier Drive, Las Vegas, Nevada 89119
---	---

3c. Tel. No. (702) 692-1955	3d. Cell No.	3e. Fax No. (702) 669-4252	3f. E-Mail Address RPulido@MGMResorts.com
---------------------------------------	---------------------	--------------------------------------	---

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Casino Call Center	4b. Principal product or service Hotel and Gaming	5a. City and State where unit is located: Las Vegas, Nevada
--	---	---

5b. Description of Unit Involved Included: Please see Attachment 1 Excluded: Please see Attachment 1	6a. No. of Employees in Unit: 281
	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Check One: **7a. Request for recognition as Bargaining Representative was made on (Date) 10/09/2019 and Employer declined recognition on or about 10/09/2019 (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). None	8b. Address
--	--------------------

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

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

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

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

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

11. Election Details: 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): 12/11/2019	11c. Election Time(s): 7:30am-10:30am & 3:30pm-6:30pm	11d. Election Location(s): TBD - Conference Room at Location
---	---	--

12a. Full Name of Petitioner (including local name and number) General Teamsters, Airline, Aerospace and Allied Employees, Warehouse, Drivers, Construction, Rock and Sand, Local 986	12b. Address (street and number, city, state, and ZIP code) 1430 E Holt ave, Covina, California 91724
---	---

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. (626) 350-9860	12e. Cell No.	12f. Fax No. (626) 448-0986	12g. E-Mail Address cgiz009@Teamsters986.org
---------------------------------------	----------------------	---------------------------------------	--

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

13a. Name and Title Debra S. Goldberg, General Counsel Matthew J. Lundy, IBT Organizer	13b. Address (street and number, city, state, and ZIP code) 1430 E Holt ave, Covina, California 91724
---	---

13c. Tel No. (626) 350-9860	13d. Cell No. (702) 704-5980	13e. Fax No. (626) 448-0986	13f. E-Mail Address DGoldberg@Teamsters986.org MLundy@Teamsters986.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) Matthew J. Lundy	Signature 	Title IBT Organizer	Date November 26, 2019
---	---	-------------------------------	----------------------------------

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

PRIVACY ACT STATEMENT

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

ATTACHMENT 1

INCLUDED:

All full-time, regular part-time, on-call and steady extra Rep Sales Service I, Rep Sales Service Lead, Coordinator Customer Care, and Lead Customer Care employees employed by the Employer at or out of its Las Vegas, Nevada facility.

EXCLUDED:

Supervisors and managers; security officers; secretarial and/or office clerical employees; training, workforce management employees, technical and analyst employees; cleaning and maintenance employees; and quality control, audit or other employees employed by Employer.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-252613	Date Filed November 26, 2019

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

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

2a. Name of Employer: FreshPoint	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 155 N. Orange Avenue, City of Industry, CA 91744
--	---

3a. Employer Representative - Name and Title: John Collie, Vice President of Operations	3b. Address (if same as 2b - state same): Same
---	--

3c. Tel. No. (626) 855-1433	3d. Cell No. (626) 277-5883	3e. Fax No.	3f. E-Mail Address John.Collie@FreshPoint.com
---------------------------------------	---------------------------------------	--------------------	---

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Warehouse	4b. Principal Product or Service Produce	5a. City and State where unit is located: Las Vegas, Nevada
---	--	---

5b. Description of Unit Involved: Included: See Attachment "A". Excluded: See Attachment "A".	6a. Number of Employees in Unit: Approx. 8
--	--

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

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) June 2018 and Employer declined recognition on or about (Date) June 2018 (if no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

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

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

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

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

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

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

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

11b. Election Date(s): ASAP	11c. Election Time(s): 12:30 p.m. - 2:30 p.m.	11d. Election Location(s): TBD
---------------------------------------	---	--

12a. Full Name of Petitioner (including local name and number): Teamsters Local 630	12b. Address (street and number, city, State and ZIP code): 750 S. Stanford Avenue, Los Angeles, CA 90021
---	---

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.	12e. Cell No.	12f. Fax No.	12g. E-Mail Address
----------------------	----------------------	---------------------	----------------------------

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

13a. Name and Title: Roberto Garcia, Esq.	13b. Address (street and number, city, State and ZIP code): 513 South Myrtle Avenue, Suite B, Monrovia, CA 91016
---	--

13c. Tel. No. 619-297-6900	13d. Cell No.	13e. Fax No.	13f. E-Mail Address rg@sdlaborlaw.com
--------------------------------------	----------------------	---------------------	---

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

Name (Print) Roberto Garcia	Signature 	Title Attorney for Teamsters Local 630	Date 11/26/19
--------------------------------	--	---	------------------

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

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

Re: FreshPoint (Teamsters Local 630) RC Petition

ATTACHMENT "A"

5b. Description of Unit Involved:

Included: The Petition seeks an *Armour-Globe* election to add or include all Drivers employed by the Employer at its facility located in Las Vegas, Nevada to the existing unit located at 155 N. Orange Avenue, City of Industry, California 91744.

Excluded: All other employees including managerial/supervisor, clerical, professional, and security guards.