

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: Valley Electric Association, Inc.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 800 E. Highway 372, Pahrump, NV 89048
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3a. Employer Representative - Name and Title: Angela Evans, CEO	3b. Address (if same as 2b - state same): Same
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3c. Tel. No. (775) 727-5312	3d. Cell No. (775) 253-5507	3e. Fax No. (775) 727-6320	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electrical Cooperative	4b. Principal Product or Service Electrical Power Service	5a. City and State where unit is located: Pahrump, NV
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5b. Description of Unit Involved: Included: All full-time and regular part-time master fleet technicians, lead master fleet technicians, fleet technicians and journeyman fleet technicians.	6a. Number of Employees in Unit: 2
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Excluded:
All other employees, managers, and guards and supervisors as defined under the Act

Check One: **7a. Request for recognition as Bargaining Representative was made on (Date) 04/18/19 and Employer declined recognition on or about (Date) 04/18/19 (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:
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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: Manual Mail Mixed Manual/Mail

11b. Election Date(s): 6/19/19	11c. Election Time(s): 6AM - 2PM	11d. Election Location(s): Pahrump, NV
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12a. Full Name of Petitioner (including local name and number): International, Brotherhood of Electrical Workers, Local 396	12b. Address (street and number, city, State and ZIP code): 3520 Boulder Highway Las Vegas, Nevada 89121
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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 Electrical Workers

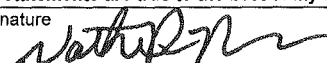
12d. Tel. No. (702) 457-3011	12e. Cell No.	12f. Fax No. (702) 457-7441	12g. E-Mail Address
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title: Nathan R. Ring, Esq.	13b. Address (street and number, city, State and ZIP code): 4270 S. Decatur Blvd. Suite A-9, Las Vegas, NV 89103
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13c. Tel. No. (702) 968-8087	13d. Cell No. (702) 301-0081	13e. Fax No. (702) 968-8088	13f. E-Mail Address nring@theurbanlawfirm.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) Nathan Ring	Signature 	Title Attorney 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.

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: Valley Electric Association, Inc.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 800 E. Highway 372, Pahrump, NV 89048
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3a. Employer Representative - Name and Title: Angela Evans, CEO	3b. Address (if same as 2b - state same): Same
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3c. Tel. No. (775) 727-5312	3d. Cell No. (775) 253-5507	3e. Fax No. (775) 727-6320	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electrical Cooperative	4b. Principal Product or Service Electrical Power Service	5a. City and State where unit is located: Pahrump, NV
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5b. Description of Unit Involved: Included: All full-time and regular part-time Metering Service Technicians, Apprentice Metering Technicians, and Meter Service Representatives employed	6a. Number of Employees in Unit: 5
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Excluded:
All other employees, managers, and guards and supervisors as defined under the Act

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 04/18/19 and Employer declined recognition on or about (Date) 04/18/19 (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:
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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: Manual Mail Mixed Manual/Mail

11b. Election Date(s): 6/19/19	11c. Election Time(s): 6AM - 2PM	11d. Election Location(s): Pahrump, NV
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12a. Full Name of Petitioner (including local name and number): International, Brotherhood of Electrical Workers, Local 396	12b. Address (street and number, city, State and ZIP code): 3520 Boulder Highway Las Vegas, Nevada 89121
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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 Electrical Workers

12d. Tel. No. (702) 457-3011	12e. Cell No.	12f. Fax No. (702) 457-7441	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: Nathan R. Ring, Esq.	13b. Address (street and number, city, State and ZIP code): 4270 S. Decatur Blvd. Suite A-9, Las Vegas, NV 89103
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13c. Tel. No. (702) 968-8087	13d. Cell No. (702) 301-0081	13e. Fax No. (702) 968-8088	13f. E-Mail Address nring@theurbanlawfirm.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) Nathan Ring	Signature 	Title Attorney 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.

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-242900	Date Filed 6/6/2019

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

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

2a. Name of Employer: Valley Electric Association, Inc.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 800 E. Highway 372, Pahrump, NV 89048
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3a. Employer Representative - Name and Title: Angela Evans, CEO	3b. Address (if same as 2b - state same): Same
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3c. Tel. No. (775) 727-5312	3d. Cell No. (775) 253-5507	3e. Fax No. (775) 727-6320	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electrical Cooperative	4b. Principal Product or Service Electrical Power Service	5a. City and State where unit is located: Pahrump, NV
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5b. Description of Unit Involved: Included: All full-time and regular part-time NOC technicians, OSP technicians, NOC technician trainees, and OSP technician trainees.	6a. Number of Employees in Unit: 7
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Excluded:
All other employees, managers, and guards and supervisors as defined under the Act

Check One: **7a. Request for recognition as Bargaining Representative was made on (Date) 04/18/19 and Employer declined recognition on or about (Date) 04/18/19 (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:
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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): 6/19/19	11c. Election Time(s): 6AM - 2PM	11d. Election Location(s): Pahrump, NV
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12a. Full Name of Petitioner (including local name and number): International, Brotherhood of Electrical Workers, Local 396	12b. Address (street and number, city, State and ZIP code): 3520 Boulder Highway Las Vegas, Nevada 89121
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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):
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12d. Tel. No. (702) 457-3011	12e. Cell No.	12f. Fax No. (702) 457-7441	12g. E-Mail Address
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13a. Name and Title: Nathan R. Ring, Esq.	13b. Address (street and number, city, State and ZIP code): 4270 S. Decatur Blvd. Suite A-9, Las Vegas, NV 89103

13c. Tel. No. (702) 968-8087	13d. Cell No. (702) 301-0081	13e. Fax No. (702) 968-8088	13f. E-Mail Address nring@theurbanlawfirm.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) Nathan Ring	Signature 	Title Attorney for Petitioner	Date 06/06/19
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DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-242872	Date Filed 6/6/2019

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

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2a. Name of Employer: Valley Electric Association, Inc.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 800 E. Highway 372, Pahrump, NV 89048
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3a. Employer Representative - Name and Title: Angela Evans, CEO	3b. Address (if same as 2b - state same): Same
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3c. Tel. No. (775) 727-5312	3d. Cell No. (775) 253-5507	3e. Fax No. (775) 727-6320	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Electrical Cooperative	4b. Principal Product or Service Electrical Power Service	5a. City and State where unit is located: Pahrump, NV
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5b. Description of Unit Involved: Included: All full-time and regular part-time Customer Service Representatives and Customer Service Supervisors employed by the employer.	6a. Number of Employees in Unit: 11
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Excluded:
All other employees, managers, and guards and supervisors as defined under the Act

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 04/18/19 and Employer declined recognition on or about (Date) 4/18/19 (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:
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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: Manual Mail Mixed Manual/Mail

11b. Election Date(s): 6/19/19	11c. Election Time(s): 6AM - 2PM	11d. Election Location(s): Pahrump, NV
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12a. Full Name of Petitioner (including local name and number): International Brotherhood of Electrical Workers, Local 396	12b. Address (street and number, city, State and ZIP code): 3520 Boulder Highway Las Vegas, Nevada 89121
--	---

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

12d. Tel. No. (702) 457-3011	12e. Cell No.	12f. Fax No. (702) 457-7441	12g. E-Mail Address
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13a. Name and Title: Nathan R. Ring, Esq.	13b. Address (street and number, city, State and ZIP code): 4270 S. Decatur Blvd, Suite A-9, Las Vegas, NV 89103
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13c. Tel. No. (702) 968-8087	13d. Cell No. (702) 301-0081	13e. Fax No. (702) 968-8088	13f. E-Mail Address nring@theurbanlawfirm.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) Nathan Ring	Signature 	Title Attorney for Petitioner	Date 06/06/19
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UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-242864	Date Filed 6/6/2019

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

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2a. Name of Employer:
Valley Electric Association, Inc.

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
800 E. Highway 372, Pahrump, NV 89048

3a. Employer Representative - Name and Title:
Angela Evans, CEO

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

3c. Tel. No. (775) 727-5312 **3d. Cell No.** (775) 253-5507 **3e. Fax No.** (775) 727-6320 **3f. E-Mail Address**

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

4b. Principal Product or Service
Electrical Power Service

5a. City and State where unit is located:
Pahrump, NV

5b. Description of Unit Involved:
Included:
All full-time and regular part-time Broadband Installers and Broadband Installer Trainees employed by the employer.
Excluded:
All other employees, managers, and guards and supervisors as defined under the Act

6a. Number of Employees in Unit:
7

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) 04/18/19 and Employer declined recognition on or about (Date) 04/18/19 (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): 6/19/19 **11c. Election Time(s):** 6AM - 2PM **11d. Election Location(s):** Pahrump, NV

12a. Full Name of Petitioner (including local name and number):
International Brotherhood of Electrical Workers, Local 396

12b. Address (street and number, city, State and ZIP code):
3520 Boulder Highway
Las Vegas, Nevada 89121

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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:
Nathan R. Ring, Esq.

13b. Address (street and number, city, State and ZIP code):
4270 S. Decatur Blvd. Suite A-9, Las Vegas, NV 89103

13c. Tel. No. (702) 968-8087 **13d. Cell No.** (702) 301-0081 **13e. Fax No.** (702) 968-8088 **13f. E-Mail Address** nring@theurbanlawfirm.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) Nathan Ring	Signature 	Title Attorney for Petitioner	Date 06/06/19
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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-242976	Date Filed 6/7/2019

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.

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2a. Name of Employer
Magellan Healthcare, Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
4311 N Washington Blvd Bldg. 312, Nellis Air Force Base, NV 89191

3a. Employer Representative - Name and Title
Michael Francisco, Human Resources Business Consultant

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

3c. Tel. No.
571-403-3760

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
francisco@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:
Nellis AFB, NV 89191

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

6a. No. of Employees in Unit:
2

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)

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: Manual Mail Mixed Manual/Mail

11b. Election Date(s):
Ballots mailed

11c. Election Time(s):
n/a

11d. Election Location(s):
n/a

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

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

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

12d. Tel No.
(916) 985-8101

12e. Cell No.
(916) 597-6100

12f. Fax No.
(916) 985-8121

12g. E-Mail Address
mward@iamaw.org

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

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

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

13c. Tel No.
510-337-1001


13d. Cell No.

13e. Fax No.
510-337-1023

13f. E-Mail Address
dfujimoto@unioncounsel.net

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

Name (Print)
David W. M. Fujimoto

Signature


Title
Attorney

Date
June 7, 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-243677

Date Filed
6/20/2019

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: AMS, A Beacon Roofing Supply Company		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 4424 Polaris Ave. Las Vegas NV.89103	
3a. Employer Representative - Name and Title: Dennis Dessaints, Branch Manager		3b. Address (if same as 2b - state same): SAME	

3c. Tel. No. (702) 795-1738	3d. Cell No. (702) 303-8482	3e. Fax No. (702) 795-2034	3f. E-Mail Address ddessaints@a-m-s.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Wholesale	4b. Principal Product or Service Materials Delivery	5a. City and State where unit is located: Las Vegas NV.
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5b. Description of Unit Involved: Included: All Full & Regular Part-Time Drivers, Warehouseman, Stockers, Forklift Operators, and Working Foremen, employed at the Excluded: All other employees, office clerical employees, guards, and supervisors as defined in the Act.	6a. Number of Employees in Unit: 20 Las Vegas, NV Facility	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
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Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 06.20.19 and Employer declined recognition on or about (Date) 06.10.19 (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) <u>NONE</u>	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 and 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 July 3, 2019	11c. Election Time(s): 4:30am - 5:30am	11d. Election Location(s): 4424 Polaris Ave. Las Vegas NV.89103
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12a. Full Name of Petitioner (including local name and number): Teamsters, Chauffeurs, Warehouseman and Helpers Local Union 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) 453-5031	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 AS ABOVE
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13c. Tel. No. (702) 430-5010	13d. Cell No. (702) 672-4666	13e. Fax No. SAME AS ABOVE	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 06/20/19
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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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 28-RC-243786	Date Filed 6/21/2019

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
Lockheed Martin

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
80 Kinley Dr Bldg 1706 Nellis AFB, NV 89191

3a. Employer Representative - Name and Title
Israel Harden, Manager

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

3c. Tel. No.
702) 679-0379

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
Israel.m.harden@lmco.com

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

4b. Principal product or service
Air Force F-35 Flight instruction

5a. City and State where unit is located:
Nellis AFB, NV

5b. Description of Unit Involved
Included: F-35 Flight Instructors, Field Engineers, Simulator Technicians
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:
4

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

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 6/21/2019 and Employer declined 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):
7/10/2019

11c. Election Time(s):
9am - 9:30am

11d. Election Location(s):
Sim Tech Lead Office, 80 Kinley Dr, Bldg 1706, Nellis AFB NV 89191

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

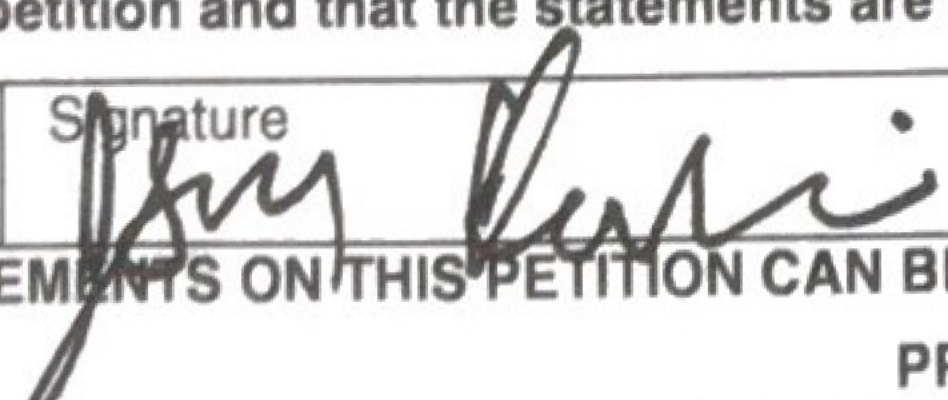
13c. Tel No.
916-985-8101

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 6/21/2019
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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.