

FILED

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**STATE OF NEVADA
E.M.R.S**

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STATE OF NEVADA

GOVERNMENT EMPLOYEE-MANAGEMENT RELATIONS BOARD

8 AMERICAN FEDERATION OF STATE,
9 COUNTY & MUNICIPAL EMPLOYEES,
LOCAL 4041,

Application for Designation of AFSCME,
Local 4041 as Exclusive Representative of
Bargaining Unit C

11 Petitioner

CASE No. 2024-020

14 Petitioner, AMERICAN FEDERATION OF STATE, COUNTY & MUNICIPAL
15 EMPLOYEES, LOCAL 4041, ("AFSCME" or "the Union"), by and through its undersigned
16 counsel of record, and pursuant to NRS 288.160, NRS 288.520, and NAC 288.143, hereby
17 submits this Application for Designation of AFSCME, Local 4041 as Exclusive
18 Representative of Bargaining Unit C.

19 AFSCME submits concurrent with this Petition: (1) a spreadsheet showing its support
20 within Unit C from current members who will be part of the proposed bargaining unit,
21 including name, job title, and if they are employed by State or NSHE and a list with the same
22 information of individuals who will be in the bargaining unit that have completed
23 representation conversion cards but are not yet members; (2) files of all signed representative
24 conversion cards in the same order as the representative conversion cards; (3) a blank copy of
25 the representative conversion cards and membership cards in a hard copy format and a printed
26 version from AFSCME's website; and (4) an affidavit signed by AFSCME Administrator, EJ
27

1 Serrano, that the membership list and corresponding documents are correct and accurate and
2 the online and hard copy representation conversion cards and membership cards are the
3 legitimate and recognized method of enrolling in and showing support for AFSCME. The
4 attachments to this document are as follows:

5 A. Declaration of EJ Serrano

6 B. Blank Membership and Authorization Cards in Hard Copy and Printed Online
7 Format¹

8 Under applicable law, an election shall be conducted based on the support of AFSCME
9 amongst the bargaining unit employees in Unit C. NRS 288.525 sets the requirements for
10 designating labor organizations as exclusive representatives for bargaining units following an
11 election. Pursuant to that statute, If no labor organization is designated as the exclusive
12 representative of a bargaining unit, the Board shall order an election to be conducted within the
13 bargaining unit if...[a] labor organization files with the Board a written request for an election
14 which includes a list of its membership or other evidence showing that it has been authorized
15 to serve as a representative by at least 30 percent but not more than 50 percent of the
16 employees within the bargaining unit. NRS 288.525(1)(a). Here, no labor organization has
17 been designated as representative of Unit C and AFSCME is presenting documentary evidence
18 with this application demonstrating support of at least 30 percent and not more than 50 percent
19 of the employees within bargaining Unit C.

20 AFSCME seeks designation as the exclusive bargaining representative of the
21 bargaining unit designated in statute and administrative regulation as Unit C, including the
22 following class of employees: "Technical aides to professional employees, including, without
23 limitation, computer programmers, tax examiners, conservation employees and regulatory
24 inspectors." NRS 288.515(1)(c). The unit is further defined in regulation as follows: "For the
25

26
27 ¹ In addition to Exhibits A and B, AFSCME is submitting its signed conversion and membership cards to the
EMRB contemporaneously with this petition. Also submitted under separate cover is a spreadsheet containing
information on membership and support through conversion cards for AFSCME in Unit C.

1 purposes of paragraph (c) of subsection 1 of NRS 288.515, the technical aides to professional
2 employees bargaining unit is hereby established. The unit includes employees whose primary
3 job responsibility involves assisting employees who perform work that requires specialized
4 skills or education. The unit includes, without limitation, accountant technicians, tax examiners
5 and information technology technicians. The unit excludes supervisory employees.” NAC
6 288.108(3).

7 The cards submitted contemporaneously with this petition and the spreadsheet
8 submitted as Exhibit B demonstrate that AFSCME has support of over forty-percent (40%) of
9 eligible bargaining unit members based on recent employment data from the State. There are
10 some cards contained within the presentation that are more than one-year old but those cards
11 do not affect the total amount of support being above thirty-percent (30%) of the bargaining
12 unit as required by NRS 288.525(1)(A). The one-year period is not determinative of counting a
13 card. *In re: Petition to be Designated as the Exclusive Representative of a Bargaining Unit*
14 *Pursuant to Senate Bill 135*, EMRB Case No. 2019-026 (Item No. 854), at p. 5 (citing *Carey*
15 *Mfg. Co.*, 69 NLRB 224 n. 4 (1946)). “It has been held that cards dated more than a year prior
16 to the filing of the petition were sufficiently current.” *Id.* Furthermore, though the COVID
17 pandemic has subsided, the ability to collect cards was hampered for some time and the ability
18 to go back out and collect new cards from those already signing cards was limited because of
19 the great expanse of our state and the number of work locations of employees in the unit.
20 Though these cards older than a year are not needed to trigger the election required under NRS
21 288.525(1)(A), AFSCME includes them here to show its support within the unit and requests
22 that these cards also be used in the EMRB’s calculations.

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CONCLUSION

AFSCME seeks an election to be conducted by the Board, which would designate AFSCME as the exclusive bargaining representative within Unit C.

DATED this 6th day of June, 2024.

Reese Ring Velto, PLLC

/s/ Nathan R. Ring _____
Nathan R. Ring, Esq.
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CERTIFICATE OF SERVICE

Pursuant to NAC 288.200(2), I certify that I am an employee of the law firm of Reese Ring Velto, LLC and that on the 6th day of June, 2024, I deposited for mailing, by certified U.S. Mail with postage prepaid (along with added service via email), a true and correct copy of this **Application for Designation of AFSCME, Local 4041 as Exclusive Representative of Bargaining Unit C** to:

Bachera Washington
Administrator DHRM
State of Nevada
7251 Amigo Street, Suite 120
Las Vegas, NV 89119

Matthew Lee, DHRM
State of Nevada
100 North Stewart St., Suite 200
Carson City, NV 89701

With a copy to:

Josh M. Reid, Esq.
Office of the Attorney General
555 E. Washington Avenue, Suite 3900
Las Vegas, NV 89101
jmreid@ag.nv.gov

An employee of Reese Ring Velto, PLLC

1 Nathan R. Ring, Esq.
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6 STATE OF NEVADA

7 GOVERNMENT EMPLOYEE-MANAGEMENT RELATIONS BOARD

8 AMERICAN FEDERATION OF STATE,
9 COUNTY & MUNICIPAL EMPLOYEES,
LOCAL 4041,

10
11 Petitioner

**Declaration of EJ Serrano in Support of
Application for Designation of AFSCME,
Local 4041 as Exclusive Representative of
Bargaining Unit C**

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13
14 I, EJ Serrano, declare and state as follows:

15 1. I make this declaration based upon my personal knowledge except as to those
16 matters stated upon information and belief and as to those matters, I believe them to be true to
17 the best of my ability and knowledge.

18 2. I am over the age of eighteen years and am competent to testify if called before
19 the Nevada Government Employee Management Relations Board to do so.

20 3. I am the Administrator of the Petitioner, AMERICAN FEDERATION OF
21 STATE, COUNTY & MUNICIPAL EMPLOYEES, LOCAL 4041, ("AFSCME" or "the
22 Union"), in this matter.

23 4. In its petition filed along with this declaration, AFSCME is providing the
24 EMRB with a showing of support of at least thirty-percent (30%) of those individuals
25 employed within Unit C under NRS 288.515(1)(c).
26
27

1 5. Provided to the EMRB with the petition, as authenticated by this declaration,
2 are the following:

3 a. A spreadsheet of (1) current members who will be part of the proposed
4 bargaining unit, including name, job title, and if they are employed by the State Executive
5 Department or NSHE and (2) a spreadsheet of information of individuals who will be in the
6 bargaining unit that have completed representation conversion cards but are not yet members.
7 This spreadsheet is submitted in hard copy under separate cover.

8 b. AFSCME is also submitting, files of all signed representative conversion cards
9 in the same order as the representative conversion cards in the spreadsheet. These are
10 submitted as Exhibit C to the Petition. Hard copies of the signed cards are placed into a binder
11 and are being delivered directly to the EMRB's offices contemporaneously with the electronic
12 filing of the Petition.

13 c. AFSCME is submitting a blank copy of the membership card and
14 representative conversion card in hard copy and a copy of the electronic format as Exhibit B
15 to the Petition.

16 6. The membership list and corresponding cards and documents are true, correct,
17 and accurate to the best of my knowledge.

18 7. The online and hard copy representation conversion card is the legitimate and
19 recognized method of enrolling in AFSCME as recognized by the State's Central Payroll and
20 DHRM.

21 8. AFSCME seeks designation as the exclusive bargaining representative of the
22 bargaining unit designated in statute and administrative regulation as Unit C.

23 I declare under penalty of perjury that the foregoing is true and correct. Executed at
24 Las Vegas, Nevada on this 6th day of June, 2024.

26 /s/ EJ Serrano
27 EJ Serrano
 Administrator of AFSCME, Local 4041



AFSCME Local 4041, AFL-CIO

Yes! I am AFSCME Strong. I want a strong voice at work and in my community.

AFSCME Membership and Dues Authorization

I hereby choose to become a member of AFSCME, and to abide by its constitution and bylaws. By signing below, I authorize my employer to deduct from my pay the membership dues and benefit program payments established by AFSCME Local 4041 currently and as may be modified in the future. Membership dues are currently 1% of base compensation pay before taxes per pay period; probationary employees dues are ½% (and are not tax-deductible as charitable contributions). This authorization will automatically renew from year to year, and without regard to whether I remain a member of the union, unless I give written notice to AFSCME Local 4041 and the State Controller of my decision to revoke this authorization during the two weeks preceding each anniversary date of this authorization.

 Last Name First Name MI

 Home Street Address

 City State Zip

 Date of Birth Date of Hire Circle (Y or N)
Registered Voter

 Cell Phone* Home Email

*By providing your cell phone number you consent to receive calls (including recorded or autodialed calls, or texts) at that number from AFSCME and its affiliated labor, political and charitable organizations on any subject matter. Your carrier's rates may apply. You may modify your preferences at: <https://www.afscme.org/tpa>.



 Signature Date

 Name of Employer EIN

 Department Job Classification

 Worksite

Office Use Only	
Date Received Circle (Y or N)	Start Date
Probationary	Chapter
Probation End Date	Received By



AFSCME Local 4041, AFL-CIO

AFSCME Conversion Card

I hereby apply for membership in AFSCME, Local 4041, and its successor or assign (hereafter the "Union"), and I agree to abide by its Constitution and Bylaws. I authorize the Union to act as my exclusive bargaining representative for purposes of collective bargaining with respect to wages, hours and other terms and conditions of employment with my Employer. This card may be used to establish or obtain recognition of the Union with my Employer, with or without an election. Upon the Union being designated as the exclusive representative for my designated bargaining unit, I hereby voluntarily authorize and direct my Employer to deduct from my pay each pay period, regardless of whether I am or remain a member of the Union, the amount of dues certified by the Union, and as they may be adjusted periodically by the Union, and to authorize my Employer to remit such amount monthly to the Union. This voluntary authorization and assignment shall be irrevocable, regardless of whether I am or remain a member of the Union, and for a period of one year from the date of execution, and for year to year thereafter unless I give the Union written notice of revocation not less than ten (10) days and not more than twenty (20) days before the anniversary date of this authorization. This card supersedes any prior check-off authorization card I signed. I recognize that my authorization of dues deductions, and the continuation of such authorization from one year to the next, is voluntary and not a condition of my employment. Payment to the Union are not deductible as charitable donations for federal income tax purposes. However, state law may extend favored tax treatment.

Signature _____ Date _____

Last Name _____ First Name _____ MI _____ Date of Birth _____

Street Address _____

City _____ State _____ Zip _____

Billing Address (If Different From Street Address) _____

Cell Phone* _____ Personal Email _____

Name of Employer _____ EIN _____ Date of Hire _____

Department _____ Worksite _____ Job Classification _____

*By providing my cell phone number and email address, I understand that the Union and its affiliates may use automated email, calling technologies, and/or text message me on my cell phone on a periodic basis. The Union will not charge for text message alerts; carrier message and data rates may apply to such texts.

OFFICE USE ONLY

Return to 601 S. Rancho Drive, Suite C-24,
Las Vegas, NV 89106





Text NEVADA to 237-263
for the latest updates!

[\(/JOIN\)](#)

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 [\(HTTPS://TWITTER.COM/LOCAL4041\)](https://twitter.com/local4041)

 [\(HTTPS://FACEBOOK.COM/NVAFSCME4041\)](https://facebook.com/nvafscme4041)



AFSCME Local 4041, AFL-CIO

Yes! I am AFSCME Strong. I want a strong voice at work and in my community.

AFSCME Membership and Dues Authorization

Last Name *

First Name *

Middle Initial

Home Street Address *

Address 2

City *

State *

ZIP code *

- Select -

Date of Birth *

Month ▾ Day ▾ Year ▾

Date of Hire *

Month ▾ Day ▾ Year ▾

Registered Voter (Y/N) *

- Yes
 No

Cell Phone †

† By providing your cell phone number you consent to receive calls (including recorded or autodialed calls, or texts) at that number from AFSCME and its affiliated labor, political and charitable organizations on any subject matter. Your carrier's rates may apply. You may modify your preferences at: <https://www.afscme.org/tcps>.

Personal Email Address *

Name of Employer *

EIN *

Please enter your 9-digit Employee Number.

Department *

Job Classification *

Worksite *

Authorization

I hereby choose to become a member of AFSCME, and to abide by its constitution and bylaws. By signing below, I authorize my employer to deduct from my pay the membership dues and benefit program payments established by AFSCME Local 4041 currently and as may be modified in the future. Membership dues are currently 1% of base compensation pay before taxes per pay period; probationary employees dues are 1/2% (and are not tax-deductible as charitable contributions). This authorization will automatically renew from year to year, and without regard to whether I remain a member of the union, unless I give written notice to AFSCME Local 4041 and the State Controller of my decision to revoke this authorization during the two weeks preceding each anniversary date of this authorization.

Signature

Please sign using your mouse or your finger on a touchscreen.

Clear Signature
Date *

Jun ▼ 5 ▼ 2024 ▼ 

JOIN NOW

We make Nevada Happen

BECOME A MEMBER ([HTTPS://WWW.NVAFSCME.ORG/AFSCME-LOCAL-4041-DIGITAL-MEMBERSHIP-CARD](https://www.nvafscme.org/afscme-local-4041-digital-membership-card))

Local 4041 Carson City Office
504 E Musser Street, Suite 300
Carson City, Nevada 89701

(<https://www.google.com/maps/place/504+E+Musser+St+%23300,+Carson+City,+NV+89701/@39.1647485,-119.7657828,17z/data=!3m1!1e3!3m1!1s504+E+Musser+St,+Carson+City,+NV+89701/@39.1647485,-119.7657828,17z>)

119.7632988)

Phone: (775) 882-3910 (tel:7758823910)

Office Hours:

Monday thru Friday 8:30am to 5:00pm

Closed on Saturday and Sunday

We observe all State and Federal Holidays

Local 4041 Las Vegas Office
601 S. Rancho Drive, Unit C-24
Las Vegas, Nevada 89106

115.1721551)

Phone: (702) 431-3113 (tel:7024313113)

Fax: (702) 534-4653 (tel:7025344653)



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AFSCME Local 4041 Conversion Card

Yes! I am AFSCME Strong. I want a strong voice at work and in my community.

First Name *

Middle Initial

Last Name *

Address *

Address 2

City *

State *

- Select -

ZIP code *

▾

Personal Email Address *


Cell Phone †

† By providing my cell phone number and email address, I understand that the Union and its affiliates may use automated email, calling technologies, and/or text message me on my cell phone on a periodic basis. The Union will not charge for text message alerts; carrier message and data rates may apply to such texts.

Employer *

EIN

Date of Hire

Month ▼ Day ▼ Year ▼ 

Department

Worksite *

Job Classification

Authorization

I hereby apply for membership in AFSCME, Local 4041, and its successor or assign (hereafter the "Union"), and I agree to abide by its Constitution and Bylaws. I authorize the Union to act as my exclusive bargaining representative for purposes of collective bargaining with respect to wages, hours and other terms and conditions of employment with my Employer. This card may be used to establish or obtain recognition of the Union with my Employer, with or without an election.

Upon being covered by an agreement with my Employer, I hereby voluntarily authorize and direct my Employer to deduct from my pay each pay period, regardless of whether I am or remain a member of the Union, the amount of dues certified by the Union, and as they may be adjusted periodically by the Union, and to authorize my Employer to remit such amount monthly to the Union. This voluntary authorization and assignment shall be irrevocable, regardless of whether I am or remain a member of the Union, for a period of one year from the date of execution, and for year to year thereafter unless I give the Union written notice of revocation not less than ten (10) days and not more than twenty (20) days before the anniversary date of this authorization. This card supersedes any prior check-off authorization card I signed.

I recognize that my authorization of dues deductions, and the continuation of such authorization from one year to the next, is voluntary and not a condition of my employment. Payment to the Union are not deductible as charitable donations for federal income tax purposes. However, state law may extend favored tax treatment.

Signature