

## Fill in this information to identify the case:

Debtor United Site Services, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of New Jersey  
(State)Case number 25-23630

## Modified Official Form 410

## Proof of Claim

04/25

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

**Filets must leave out or redact** information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. **Do not send original documents;** they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

## Part 1: Identify the Claim

1. Who is the current creditor?	Jerry L. Ned II		
	Name of the current creditor (the person or entity to be paid for this claim)		
	Other names the creditor used with the debtor <u>Jerry L. Ned II, Jerry Ned, Jerry L. Ned</u>		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)	
	Jerry L. Ned II 9740 Surrey Run Dr Colorado Springs, CO 80924	Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	
	Contact phone _____	Contact phone _____	
	Contact email <u>jerryned1@yahoo.com</u>	Contact email _____	
	Uniform claim identifier (if you use one): _____		
4. Does this claim amend one already filed?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on <u>2.17.26</u> MM / DD / YYYY		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		



**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: _____
7. How much is the claim? \$ 250,000	. Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information.  <u>Employment Retaliation/wrongful termination; wages and damages</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property.  <b>Nature or property:</b> <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principle residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____  <b>Basis for perfection:</b> _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)
	<b>Value of property:</b> \$ _____ <b>Amount of the claim that is secured:</b> \$ _____ <b>Amount of the claim that is unsecured:</b> \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.)
	<b>Amount necessary to cure any default as of the date of the petition:</b> \$ _____
	<b>Annual Interest Rate</b> (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. <b>Amount necessary to cure any default as of the date of the petition.</b> \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	<input type="checkbox"/> No	Amount entitled to priority
	<input checked="" type="checkbox"/> Yes. Check all that apply:	
<p>A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.</p>	<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
	<input type="checkbox"/> Up to \$3,800* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
	<input checked="" type="checkbox"/> Wages, salaries, or commissions (up to \$17,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ <u>12000</u>
	<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
	<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
	<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)(____) that applies.	\$ _____

\* Amounts are subject to adjustment on 4/01/28 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?	<input checked="" type="checkbox"/> No
	<input type="checkbox"/> Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.
	\$ _____

### Part 3: Sign Below

The person completing this proof of claim must sign and date it.  
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(3) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both.

18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- I am the creditor.
- I am the creditor's attorney or authorized agent.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 02/18/2026  
MM / DD / YYYY

/s/Jerry L. Ned II  
Signature

Print the name of the person who is completing and signing this claim:

Name Jerry L. Ned II  
First name Jerry Middle name L. Last name Ned II

Title Former Employee/Claimant

Company United Site Services, Inc.  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_



# Verita (KCC) ePOC Electronic Claim Filing Summary

For phone assistance: Domestic (877) 634-7164 | International (424) 236-7220

<b>Debtor:</b> 25-23630 - United Site Services, Inc.			
<b>District:</b> District of New Jersey, Trenton Division			
<b>Creditor:</b> Jerry L. Ned II 9740 Surrey Run Dr Colorado Springs, CO, 80924 <b>Phone:</b> <b>Phone 2:</b> <b>Fax:</b> <b>Email:</b> jerryned1@yahoo.com	<b>Has Supporting Documentation:</b> Yes, supporting documentation successfully uploaded		
	<b>Related Document Statement:</b>		
	<b>Has Related Claim:</b> No		
	<b>Related Claim Filed By:</b>		
	<b>Filing Party:</b> Creditor		
<b>Other Names Used with Debtor:</b> Jerry L. Ned II, Jerry Ned, Jerry L. Ned		<b>Amends Claim:</b> Yes, 2.17.26	
		<b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> Employment Retaliation/wrongful termination; wages and damages		<b>Last 4 Digits:</b> No	<b>Uniform Claim Identifier:</b> _____
<b>Total Amount of Claim:</b> 250,000		<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> Yes		<b>Priority Under:</b> 11 U.S.C. §507(a)(4): 12000	
<b>Has Secured Claim:</b> No		<b>Nature of Secured Amount:</b> <b>Value of Property:</b>	
<b>Amount of 503(b)(9):</b> No		<b>Annual Interest Rate:</b>	
<b>Based on Lease:</b> No		<b>Arrearage Amount:</b>	
<b>Subject to Right of Setoff:</b> No		<b>Basis for Perfection:</b>	
		<b>Amount Unsecured:</b>	
<b>Submitted By:</b> Jerry L. Ned II on 18-Feb-2026 2:49:58 p.m. Pacific Time			
<b>Title:</b> Former Employee/Claimant			
<b>Company:</b> United Site Services, Inc.			



U.S. Department of Transportation  
Federal Motor Carrier Safety Administration

US DOT/ FMCSA  
1200 New Jersey Avenue S.E.  
Washington, D.C.  
20590 MC-NC

**Jerry Ned**  
**9740 Surrey Run Dr.**  
**Colorado Springs, Colorado 80924**

Complaint ID: **00261515**  
**01/29/2026**

Dear Mr. \Mrs. \Ms. **Jerry Ned**:

Thank you for your complaint submission to the Federal Motor Carrier Safety Administration's (FMCSA) National Consumer Complaint Database (NCCDB).

Your complaint number is **00261515**. Please refer to this number when submitting additional information or checking on the status of your complaint.

Your complaint may be used for research and analysis to better address noncompliance by regulated entities. FMCSA will retain a record of this complaint in the NCCDB and may use it in future investigations. Notwithstanding 5 U.S.C. § 552, FMCSA will not disclose the identity of a complainant unless disclosure is necessary to prosecute a violation.

If you need more information or have questions, call our nationwide toll-free hotline for the NCCDB at 1-888-DOT-SAFT (368-7238) from 8 am–8 pm, Mon–Fri, EST.

## Online Complaint Summary #ECN129595

### Employee Information

Complainant Name Jerry L Ned II	Date Complaint Filed 01-16-2026	Region 01	Complainant E-mail jerryned1@yahoo.com
Complainant Address 9740 Surrey Run Dr., Colorado Springs CO 80924	Job Title	Date of Hire	Confirm Complainant E-mail jerryned1@yahoo.com
Worksite Address 118 Flanders Rd, Suite 1000, Westborough MA	Person Filing the Complaint is	Person filing certifies that the information in this complaint is true and correct to the best of their knowledge Yes	Exclusive Bargaining Representative
Location on Federal or Military Base No	Preferred Method of Contact	Do you require the use of a translation service to speak with an OSHA Representative? N	
Other Contact Name Sacorra Ned	Other Contact Phone 719-321-0163	Best Time to Contact	Telephone Available Yes

### Complainant Phone

Type	Country Code	Phone Number	Extn
Home	US	(719) 321-0155	
Mobile	US	(719) 321-0155	

### Employer Information

Employer Name United Site Services, Inc.	Employer Type	Sector Private	
Employer Address	Employer Alt Phone	Employer Alt Fax	Employer E-mail priscilla.adams@united siteservices.com
Manager's Name Jimmy Smith	Manager's Job Title VP of EHS	Manager's Phone (774) 513-0253	Different Company Name

**Supervisor Name**  
Priscilla Adams

## Supervisor Job Title

## Employer Phone

Type	Country Code	Phone Number	Extn
Work	US	(626) 433-7383	

## **Allegation of Discrimination/Retaliation**

<b>Name of Management Person Responsible for the Retaliation</b>	<b>Job Title of Management Person Responsible for the Retaliation</b>	<b>When did you first learn that the action(s) would be taken against you?</b>	<b>Adverse Action Date</b>
			01-12-2026

Adverse Action Termination/Layoff	Other Adverse Actions	Has the Complainant Filed Previous Complaint?	Previous Complaint Date
		No	

Previous Complaint Number	Agency Name
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## How did complainant become aware a complaint could be filed with OSHA?

**Please describe why you believe you suffered the adverse action(s):**

Other

**Why do you believe you suffered adverse employment action(s)?:**

I believe I suffered ad-  
protected activity rela-  
concerns internally to  
including hours-of-ser-  
drivers and the public

Management, including senior leadership, was aware of these concerns. Despite being instructed to focus on safety, my reports were not addressed. I was later terminated and told the reason was **poor performance**, even though I had no prior disciplinary actions, no performance improvement plan, and had been performing my job satisfactorily.

The timing of my termination closely followed my internal reporting of DOT safety and compliance issues, and I believe the stated performance reason was pretextual. I believe the real reason for my termination was retaliation for raising safety and regulatory compliance concerns protected under OSHA whistleblower laws.

**Is there anything that you would like OSHA to know about what happened? Please include witness names or their contact information:**

Management was aware that my performance met expectations and that the safety and compliance concerns I raised were valid. Despite this, no corrective action was taken regarding the reported DOT violations, and I was terminated without prior discipline. I am aware that management discussed replacing me before my termination while these safety issues remained unresolved. I am willing to provide documentation and additional evidence supporting my reports and the retaliatory nature of my termination.

**What is the name of the person who issued the adverse employment action(s), title or position, and contact information?**

Jimmy Smith - VP of Safety  
Phone: 774-513-0251  
Email: jimmy.smith@unitedsiteservices.com

Daniel Hamilton - GM PNW  
Phone: 425-606-1606  
Email: daniel.hamilton@unitedsiteservices.com

Priscilla Adams - Director of West Safety  
Phone: 626-433-7383  
Email: priscilla.adams@unitedsiteservices.com

Brittany Arellano- HR  
Phone: 508-439-0578  
Email: brittany.arellano@unitedsiteservices.com

**What reason(s) did your employer give for the adverse action(s):**

The employer cited performance-related concerns; however, I was not provided with specific examples or prior discipline, and my performance had consistently met expectations.

**Allegation Code:**

Called / Filed complaint with another government agency, Complained to management about unlawful conditions, conduct, or practices, Because you engaged in protected concerted activities regarding workspace safety and/or health activities, Participated in safety and health activities

**Allegation Code - Refused to Perform Task:**

**Allegation Code - Testified or Provided Statement in Investigation or Other Proceedings:**

**Allegation Code – Other:**

**Allegation Dates:**

**Do you believe the employer knew you engaged in the activities described?**

**Other Actions Taken by Complainant:**

**Identification of Representative**

Representative's Name	Representative's Job Title	Representative's Organization	Representative's E-mail
Representative's Address	Are you an authorized/designated representative (e.g., attorney, shop steward) that is filing on behalf of an employee?	Representative certifies the named employee has authorized him/her to act as their representative? No	Union Affiliation

**Do you have authorized/designated representative (e.g., attorney, shop steward)?**

No

**Additional Comments**

# U.S. Department of Labor

Occupational Safety and Health Administration  
Denver Region  
César E. Chávez Memorial Building  
1244 Speer Boulevard, Suite 551  
Denver, CO 80204



[jerryned1@yahoo.com](mailto:jerryned1@yahoo.com)

January 28, 2026

Jerry Ned  
9740 Surrey Run Dr.  
Colorado Springs, CO 80924

RE: 301069966 United Site Services Inc - Ned  
ECN129595

Dear Mr. Ned:

This acknowledges your inquiry about filing a discrimination complaint in the above-referenced matter[1][2]. Your case has been assigned to Regional Investigator, Crystal R. Stevens. Please keep any evidence you may have that relates to your complaint, such as notes, letters, check stubs, termination notices, performance evaluations, employee handbooks, and the like. It would also be helpful if you would write a brief, factual account of what happened and prepare a list of names, addresses, and telephone numbers of potential witnesses, indicating what information each witness might give.

OSHA will disclose to the parties information relevant to the resolution of the case as well as provide all parties an opportunity to fully respond. As such, both you and Respondent will receive a copy of each other's submissions to OSHA that are responsive to the above-referenced whistleblower complaint. We have notified Respondent of the filing of this complaint and provided Respondent with a copy.

*Per Presidential Memorandum – Managing Government Records, we request that any future documents you submit to OSHA be submitted electronically, if possible, using the investigator's email address below and that whatever you submit to OSHA, you also send a copy to Respondent at the address below:*

United Site Services Inc  
118 Flanders Road  
Westborough, MA 01581  
[jason.stegall@unitedsiteservices.com](mailto:jason.stegall@unitedsiteservices.com)

If the information provided contains personal, identifiable information about individuals other than you, such information, where appropriate, will be redacted before disclosure. OSHA may contact the party directly for the un-redacted copy, if necessary.

Attention is called to your right and the right of any party to be represented by counsel or other representative in this matter. In the event you choose to have a representative appear on your behalf, please have your representative complete the Designation of Representative form enclosed and forward it promptly.

[1] USPS employees may wish to contact the USPS Office of the Inspector General about safety and health hazards.

[1] OSHA recommends that you contact the National Labor Relations Board (NLRB) as soon as possible to inquire about filing a charge alleging unfair labor practices. The NLRB time limit to file a charge is 6 months from the unfair labor practice. You may reach the NLRB at 1-844-762-NLRB. You may also locate your nearest NLRB Field Office at [www.nlrb.gov/who-we-are/regional-offices](http://www.nlrb.gov/who-we-are/regional-offices).

Your cooperation is requested and necessary. Without your cooperation, it may be necessary to dismiss your complaint. Voluntary adjustment of complaints can be effected by way of a settlement agreement at any time through the assigned investigator or through OSHA's Alternative Dispute Resolution (ADR) mediation process.

**(See Attachments)**

In addition, you have the right to request that OSHA end its investigation to allow the case to proceed to an Administrative Law Judge (ALJ) more quickly under certain statutes.[1] For more information see <https://www.whistleblowers.gov/policy/directives>

Lastly, many of OSHA's whistleblower statutes contain a "kick-out" provision that allows Complainant to file the retaliation claim in federal district court if the Secretary of Labor has not issued a final decision, if the number of days prescribed by the statute from the time of the filing of the complaint with OSHA has passed, and the delay was not due to the bad faith of Complainant.

It is essential that the Regional Investigator assigned to your case be made aware of any change in your address or telephone number. If there is a change in your telephone or address, please contact the assigned investigator immediately.

Investigator Assigned: Crystal R. Stevens  
U.S. Department of Labor- OSHA  
1244 Speer Blvd, Suite 551  
Denver, CO 80204  
Phone: 303-253-0094  
Email: [stevens.crystal.r@dol.gov](mailto:stevens.crystal.r@dol.gov)

Thank you for your cooperation.

Sincerely,

*Shawn Vollrath*

Shawn Vollrath  
Regional Supervisory Investigator

Enclosures: Copy of the Complaint  
Designation of Representative Form  
ADR Fact Sheet & Request Form  
Job Search Log  
Expedited Case Processing Information and Request Form

v09132023

[1] Surface Transportation Assistance Act (STAA), 49 U.S.C. §31105, Clean Air Act (CAA), 42 U.S.C. §7622; Comprehensive Environmental Response, Compensation and Liability Act;(CERCLA), 42 U.S.C. §9610; Federal Water Pollution Control Act (FWPCA), 33 U.S.C. §1367; Safe Drinking Water Act (SDWA), 42 U.S.C. §300j-9(i); Solid Waste Disposal Act (SWDA), 42 U.S.C. §6971;Toxic Substances Control Act (TSCA), 15 U.S.C. §2622; Energy Reorganization Act (ERA), 42 U.S.C. §585 1; Wendell H. Ford Aviation Investment and Reform Act for the 21st Century (AIR21), 49 U.S.C. §42121; Pipeline Safety Improvement Act (PSIA), 49 U.S.C. §60129; Sarbanes-Oxley Act (SOX), 18 U.S.C. §1514A; Federal Railroad Safety Act (FRSA), 49 U.S.C. §20109; National Transit Systems Security Act (NTSSA), 6 U.S.C. §1142; Consumer Product Safety Improvement Act (CPSIA), 15 U.S.C. §2087; Section 1558 of the Affordable Care Act (ACA), 29 U.S.C. §218C; Seaman's Protection Act (SPA), 46 U.S.C. §2114; Consumer Financial Protection Act (CFPA), 12 U.S.C. §5567; FDA Food Safety Modernization Act (FSMA), 21 U.S.C. §399d; Moving Ahead for Progress in the 21st Century Act (MAP-21), 49 U.S.C. §30171; Taxpayer First Act, 26 U.S.C. §7623(d); Criminal Antitrust Anti-Retaliation Act (CAARA), 15 U.S.C. § 7a-3 and Anti-Money Laundering Act (AMLA), 31 U.S.C. § (g) & (j). Cases under Section 11 ( c ) of the Occupational Safety and Health Act (Section 11 ( c ) ), 29 U.S.C. §660(c), the Asbestos Hazard Emergency Response Act (AHERA), 15 U.S.C. §265 1, and the International Safe Container Act (ISCA), 46 U.S.C. §80507, are not included.

Jerry Ned  
9740 Surrey Run Dr.  
Colorado Springs, CO 80924

RE: 301069966 United Site Services Inc - Ned

Dear Mr. Ned:

My name is Lisa Armstrong, Alternative Dispute Resolution (ADR) Coordinator, for OSHA Region VIII. ADR is an approach to resolve whistleblower complaints by means other than the sometimes long, costly, and unpredictable investigative and litigation process. To give you a sense of how long, costly, and unpredictable investigations or litigation can be, you are encouraged to view our many press releases at [www.whistleblowers.gov/news\\_page.html](http://www.whistleblowers.gov/news_page.html).

OSHA offers a voluntary ADR program known as “early resolution.” Early resolution is a process in which the parties attempt to negotiate a settlement with the assistance of the ADR Coordinator, a neutral OSHA whistleblower expert who is not the investigator assigned to the case and is not involved in OSHA’s decision-making on the merits of the case. To assist the ADR process, the investigation (including any deadlines for the parties to submit responses) will be stayed pending the outcome of the early resolution process.

#### How it Works

The ADR Coordinator normally discusses early resolution with each party privately over the phone. The ADR Coordinator will first solicit an initial settlement offer from the Complainant and then convey it to the Respondent. The Respondent can then accept, reject, or counteroffer. If a counteroffer is made, the ADR Coordinator will convey it to the Complainant, who can then accept, reject, or counter. This process will continue until either a settlement or impasse is reached between the parties. If an impasse is reached, the ADR Coordinator will return the case to the investigator, who will begin the investigative process.

During the early resolution process, the ADR Coordinator may not offer an opinion on the merits of the complaint or the amount of damages being mediated. However, the ADR Coordinator may suggest how the parties might reach an agreement and may give the parties an objective perspective on the strengths and weaknesses of their positions.

The ADR Coordinator may share documents between the parties during the early resolution process at the parties’ request, but those documents will not be shared with the investigative unit or any other individual not involved in ADR.

The parties are welcome to discuss resolution privately through direct communication or through private mediation at the expense of the parties. In addition, the ADR Coordinator can offer to hold a day-long “facilitated discussion” between both parties, similar to mediation, at OSHA Region VIII’s offices in Denver, Colorado, provided the parties pay their own expense. If you’d like more information on these options, please contact me at the information provided below.

#### Ground Rules

There are a few basic ground rules for ADR:

- Voluntary. Early Resolution is a voluntary process. Both parties must agree to pursue the early resolution process as an alternative to an investigation. Either party may choose to terminate the process and return the case to investigation for any reason. Agreeing or not agreeing to participate in early resolution will not affect the parties’ right to receive a full and fair investigation if early resolution does not resolve the case.
- Good Faith. “Good faith” participation means that the parties engage in the process with openness towards

resolving the whistleblower complaint and treat each other, the process, and any third-party with respect. Parties should come to the process fully prepared to discuss resolution of the whistleblower complaint and must have full authority to settle the case.

- Neutrality. The ADR Coordinator has no decision-making authority and does not represent either party. The ADR Coordinator may give the parties an objective perspective on the strengths and weaknesses of their positions; however, he/she may not offer judgment on the merits of the case.
- Confidentiality. The ADR Coordinator will not disclose statements made and/or documents submitted during the early resolution process, including any settlement offers made, to any individual outside of the ADR process. The ADR Coordinator will not discuss the merits of the complaint or the content of early resolution discussions with OSHA's investigative staff. The ADR Coordinator may only communicate the outcome of the early resolution process. Moreover, the ADR case file will be segregated from the whistleblower investigative case file and generally exempt from disclosure under Freedom of Information Act (FOIA) Exemption 3, in compliance with the Alternative Dispute Resolution Act (ADRC), 5 U.S.C. §571 *et. seq.* However, the parties and/or their representatives are permitted to retain their own notes. All of the parties involved in a early resolution proceeding, including the ADR Coordinator, are not permitted to disclose and cannot be required to disclose through discovery or compulsory process any communication that is part of the early resolution process, unless an exception listed under 5 U.S.C. § 574 applies, or if required by another law.
- Settlement. Any settlement agreement reached must be approved by OSHA. OSHA therefore requests that the parties share any “draft” agreement with OSHA before signing it. Approved settlement agreements reached in the early resolution process must be retained in the investigative case file. Settlements are not dispute resolution communications that are confidential under the ADRA. Settlements are also subject to FOIA, including possible protection from disclosure under FOIA Exemption 4 and the Executive Order 12600 process.

ADR Request Form

**If you are interested in the early resolution process, and haven't already done so, please sign, date, and return the attached “ADR Request Form” to Lisa Armstrong at [armstrong.lisa@dol.gov](mailto:armstrong.lisa@dol.gov) or FAX (720) 264-6585.** By submitting the form, it does not mean that you are agreeing to a settlement. Rather, it means that you are open to the idea of exploring whether a settlement can be reached in this matter, as discussed above. The ADR process cannot start between the parties without this signed form.

If you have any questions, please contact me at (720) 264-6561. Thank you.

**Lisa Armstrong** | Alternative Dispute Resolution Coordinator  
U.S. Department of Labor | Denver Region Whistleblower Protection Program  
Occupational Safety and Health Administration  
1244 Speer Blvd., Suite 551, Denver, CO 80204  
p. (720) 264-6561 | m. (303) 476-1031| f. (720) 264-6461  
[armstrong.lisa@dol.gov](mailto:armstrong.lisa@dol.gov) | [www.whistleblowers.gov](http://www.whistleblowers.gov)

**REQUEST FOR  
ALTERNATIVE DISPUTE RESOLUTION (ADR)**

301069966 United Site Services Inc - Ned

OSHA's ADR Program is a voluntary program that allows the parties to resolve a whistleblower retaliation complaint outside of the investigative process. In ADR, the parties attempt to negotiate a settlement with the help of a neutral OSHA facilitator who is not involved in the investigation of the complaint. While ADR is ongoing, the investigation will be put on hold.

Communications during ADR are kept confidential, to the extent permitted by law, except that the neutral OSHA facilitator may share ADR communications with Department of Labor (DOL) officials when it is necessary for administrative and supervisory purposes, or to seek legal or policy guidance on novel or complex questions that arise during the ADR proceeding. However, the neutral OSHA facilitator will not share ADR communications with any DOL official who will be involved in any further investigations or proceedings related to the whistleblower complaint if a settlement is not reached through ADR. Additionally, if a settlement is not reached through ADR, the parties may share any of their own communications made during the ADR proceeding with the OSHA Investigator.

If the parties decline to pursue ADR, or if they pursue ADR but fail to reach a settlement, the Investigator identified in the opening letter will proceed with an investigation. However, the parties, with or without the assistance of the Investigator, may still enter into a settlement agreement at any time during OSHA's investigation. Settlement agreements of whistleblower retaliation complaints reached through ADR or during OSHA's investigation must be submitted to OSHA for its review and approval prior to signing.

If you are interested in participating in ADR, please complete and return this form as soon as possible. You may email the form to [armstrong.lisa@dol.gov](mailto:armstrong.lisa@dol.gov) or FAX (720) 264-6585.

       I am interested in participating in the OSHA ADR Program.

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Signature

Date

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Print Full Name

Daytime Phone Number

Email Address

## **Expedited Case Processing Information and Request Form**

Case Number: 301069966 United Site Services Inc - Ned

The Occupational Safety and Health Administration (OSHA) is offering an Expedited Case Processing (ECP) option to allow you to request that OSHA terminate its investigation and issue a determination on your complaint if your case has been pending with OSHA for more than 30 or 60 days, depending on the statute. Requesting termination of the investigation may result in a dismissal of your case. In any event, you (or your representative) or the respondent(s) may object to OSHA's findings and request a hearing on your case by an Administrative Law Judge (ALJ). An ALJ will issue a decision on your complaint without any reference to OSHA's factual or legal conclusions (i.e., *de novo* review). An ALJ may also assist the parties in settling your complaint. ALJs can order the same remedies as OSHA, including, where applicable, back pay, compensatory damages, punitive damages, attorneys' fees, and reinstatement. The timeline for OSHA to finish its investigation is different in every case. OSHA's investigation process may take time, however, and you therefore may be able to receive a quicker determination from OSHA and lose no appeal rights by electing to expedite your claim under the ECP procedure.

Unlike OSHA, ALJs follow strict procedural rules in a formal quasi-judicial setting pursuant to 29 C.F.R. Part 18, including setting discovery (i.e. fact-finding) deadlines, compelling the production of documents and appearance of witnesses within a party's control, deciding on various discovery and evidentiary motions, holding a hearing on your complaint, issuing decisions and/or orders, and where applicable, taking any appropriate action authorized by the Federal Rules of Civil Procedure. 29 C.F.R. Part 18 can be found at

[https://www.dol.gov/agencies/oaj/PUBLIC/RULES\\_OF\\_PRACTICE/REFERENCES/REFERENCE\\_WORKS/29\\_CFR\\_PART\\_18\\_SUBPART\\_A\\_\(2015\)](https://www.dol.gov/agencies/oaj/PUBLIC/RULES_OF_PRACTICE/REFERENCES/REFERENCE_WORKS/29_CFR_PART_18_SUBPART_A_(2015).). ALJ decisions are publicly available at <https://www.dol.gov/agencies/oaj>.

**If 30/60 calendar days have passed since the filing of your complaint and you wish to request that OSHA terminate its investigation and issue a determination under the ECP procedure, you must sign and return both pages of this Request Form.** OSHA will endeavor to respond to you (or your representative) within two weeks to inform you whether your request is accepted.

OSHA will evaluate the following factors, among others, to determine whether to grant your request:

- ❑ Has OSHA allowed you (or your representative) and the respondent(s) the opportunity to submit written responses, meet with an OSHA investigator, and present statements from witnesses?
- ❑ Has OSHA interviewed you as appropriate?
- ❑ Have you (or your representative) been provided a copy of the respondent(s) submissions that are relevant to your complaint (redacted as necessary to protect the privacy of third- party non- management witnesses) and have you (or your representative) been provided an opportunity to respond to those submissions?
- ❑ Has OSHA evaluated the complaint, along with attachments and your interview, to determine if the complaint contains the basic elements of a retaliation claim?
- ❑ Does OSHA need more time to evaluate your request?

If OSHA grants the request and terminates its investigation under the ECP procedure, you will be provided Secretary's Findings which explain how to file objections and request a hearing before an ALJ. **Please note that if OSHA accepts your request under the ECP procedure and dismisses your complaint, you (or your representative) will need to file objections to OSHA's findings to request a hearing before an ALJ.** You cannot refile the same claim with OSHA.

If OSHA determines not to grant your request at this time you (or your representative) will be notified in writing. Depending on the circumstances, OSHA may later grant your request once the above factors have been met.

If you do not elect expediting case processing under the ECP option, OSHA will conduct its investigation in the normal course.

If you have any questions about the ECP option, please contact Shawn Vollrath, Regional Supervisory Investigator, through his contact information below.

If you are interested in expediting your case under the ECP procedure, please return this form to:

Shawn Vollrath  
Regional Supervisor Investigator  
Denver Regional  
vollrath.shawn@dol.gov  
720-264-6557

       **I request that OSHA terminate its investigation and issue a determination pursuant to the ECP . I understand that if OSHA accepts my request and dismisses my complaint, I will need to file objections to OSHA's findings to request a hearing before an ALJ. I am making this request freely and without coercion.**

**Signature**

**Date**

**U.S. DEPARTMENT OF LABOR**  
**Occupational Safety and Health Administration**  
*Whistleblower Protection Program*

## Complainant Job Search Log

301069966 United Site Services Inc - Ned II

As part of the investigation of your complaint, please complete the information below, and return to OSHA upon request. To qualify for full back wages, if the investigation finds merit to your complaint, you must show that you have applied for comparable or similar jobs soon after your employment was terminated. If your employment was not terminated, you do not need to maintain this log.

If you are hired by another company, please indicate that as well. Thank you.

Date Hired: \_\_\_\_\_ Pay Rate: \$ \_\_\_\_\_ / \_\_\_\_\_ Avg. # of Hours/Week: \_\_\_\_\_

## **What Complainants Need to Know about Participating in an OSHA Whistleblower Investigation Duties**

Workers who file a whistleblower complaint with OSHA, known as Complainants, are active participants in OSHA's whistleblower investigations. A Complainant's failure to cooperate with an investigation may lead OSHA to dismiss their complaint.

As active participants, Complainants have the following duties during an investigation:

- Provide relevant information in your possession, such as witness contact information and documents supporting your position, including emails about the events at issue, to the investigator. Other examples of relevant documents can be found on [https://www.whistleblowers.gov/complaint\\_page](https://www.whistleblowers.gov/complaint_page).
  - Some documents, such as documents related to matters that OSHA cannot investigate (e.g., wage complaints, sexual harassment, or racial discrimination), may not be relevant to your investigation. If you have any questions about whether a document is relevant, please ask your investigator before sending it to OSHA.
- Answer questions from your investigator promptly.
- Immediately inform your investigator of any changes to your contact information, employment status, or if your employer takes any additional adverse actions against you.

Please remember to communicate with your investigator in a courteous and respectful manner. Verbal abuse or harassment of OSHA personnel will not be tolerated. Harassment, inappropriate behavior, or threats of violence may justify dismissal for lack of cooperation. Threats of violence on the part of the Complainant will be referred to local law enforcement for possible investigation and prosecution.

### **Additional Information**

- OSHA whistleblower investigators are neutral third parties and will collect evidence to ensure that both the complainant's allegation(s) and the respondent's positions are adequately investigated. Investigators do not represent any party.
- If you have any interest in attempting to resolve the case via a settlement with the other party(ies), please contact your investigator to discuss options.
- If you are represented by an attorney, union representative, or other designated representative, your investigator will typically direct communications regarding your case to your representative.
- At any point, if you would like to withdraw your complaint and end the investigation process, please let your investigator know. OSHA prefers that requests to withdraw be made in writing.
- Complainants in some cases have the option of requesting that OSHA end its investigation and issue findings after a certain time period has passed and OSHA has not completed the investigation. Ask your investigator if you are interested in this option.

**DESIGNATION OF REPRESENTATIVE FORM**

**PLEASE COMPLETE THE INFORMATION IN THE BOXES BELOW. USE BLUE OR BLACK INK. RETURN THIS FORM TO OSHA AS SOON AS POSSIBLE.**

301069966 United Site Services Inc - Ned

**The designated representative named below will represent the party named below in this matter. Generally, OSHA will communicate with and send any correspondence to the designated representative. Additionally, the designated representative agrees to accept service of any subpoena on behalf of the party.**

<b>Party's Name (Type or print in the box below)</b>	<b>Representative's Name (Type or print in the box below)</b>
<b>Signature (Sign below)</b>	<b>Street Address or P.O. Box (Type or print in the box below)</b>
<b>Date (Type or print in the box below)</b>	<b>City, State, ZIP (Type or print in the box below)</b>
<b>Telephone (Type or print in the box below)</b>	<b>FAX (Type or print in the box below)</b>
<b>E-mail Address (Type or print in the box below)</b>	



## CORRECTIVE ACTION FORM

Employee Name

EE Number

Branch/Dept.

<b>Jerry Ned</b>		122499	Safety
Date:	2/3/2025	Time frame of Event(s):	1/23/2025

**Nature of Event(s):**

<input type="checkbox"/>	Absenteeism/Attendance	<input type="checkbox"/>	Safety Violation	<input type="checkbox"/>	Poor Work Quality/Productivity
<input checked="" type="checkbox"/>	Falsification of Records	<input type="checkbox"/>	Policy Violation	<input checked="" type="checkbox"/>	Other (state reason)
<input type="checkbox"/>	Insubordination	<input type="checkbox"/>	Harassment		Falsification of Records, Misrepresentation of Facts/Information

**DISCIPLINARY ACTION:**

<input type="checkbox"/>	Verbal Warning	<input type="checkbox"/>	Written warning	<input type="checkbox"/>	Suspension	<input checked="" type="checkbox"/>	Final Warning	<input type="checkbox"/>	Termination
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**PREVIOUS WARNINGS: (Enter the Date and Type of warning the employee received previously)**

1 <sup>st</sup> Warning – Date	Select date	2 <sup>nd</sup> Warning - Date	Select date	3 <sup>rd</sup> Waring - Date	Select date
Type:	Choose an item	Type:	Choose an item	Type:	Choose an item

On 1/23/25 Jerry Ned misrepresented the facts following an incident that occurred on 1/22/25. As an employee in a safety-sensitive position, honesty and integrity are paramount in ensuring a safe and effective working environment. These actions violated company policy and compromised the trust in which the safety team relies on to maintain a safe workplace for all employees.

**Summary of Events:**

- **1/22/2025:** At approximately 8:40 PM PST/9:40 PM MST a safety incident occurred at the Tacoma branch
- **1/22/2025:** At approximately 9:13 PM PST/10:13 PM MST Jeff sent Jerry Ned a text message to report the safety incident
- **1/23/2025:** At approximately 7:48 AM PST/8:48 AM MST Jerry acknowledged receipt and responded to Jeff's text message from the night before
- **1/23/2025:** At approximately 9:44 AM PST/10:44 AM MST Jeff made a secondary report of the incident through email
- **1/23/2025:** At approximately 12:22 PM PST/1:22 PM MST Todd emailed Jerry and asked when the incident was reported
- **1/23/2025:** At approximately 12:28 PM PST/1:28 PM MST Jerry responded to Todd "This morning, by Jeff"
- **1/23/2025:** At approximately 2:09 PM PST/3:09 PM MST Priscilla called Jerry and asked if he had been contacted by Jeff immediately following the incident on 1/22/25. Jerry said he hadn't been contacted until the next morning (1/23/25). Priscilla told Jerry about an email that was sent regarding the initial report coming in the night before on 1/22/25. Jerry then said he would check his text messages. Jerry told Priscilla that he had received a text from Jeff at 10:13 PM MST the night before (1/22/25) and that he responded at 8:48 AM MST that morning (1/23/25)
- **1/23/2025:** At approximately 2:23 PM PST/3:23 PM MST/5:23 PM EST: Jerry sent Todd a text message "Todd don't get your blood pressure up brother over *their mistakes*"

**Standards of Conduct:** To assure safety and security and provide the best possible work environment, we expect employees to follow basic, common-sense rules of conduct that will protect everyone's interests and safety. It is not possible to list all the forms of behavior that are considered unacceptable in the workplace, but the following are examples of infractions of rules of conduct that may result in disciplinary action, including suspension, demotion or termination of employment:

- Falsification of employment records, employment information or other records
- Committing a fraudulent act or intentional breach of trust under any circumstances

The Company reserves the right to determine which type of disciplinary action to issue in response to any type of performance issue or rule violation.

**At-Will Employment:** All employment with the United Site Services (the "Company") is "at-will." You or the Company may terminate your employment at any time, with or without cause, and without advance notice, procedure, or formality."

**Performance Problem or Misconduct: Describe the violation and impact on job and/or company:**

**Corrective Action: Expected improvement and/or standards for the future:**

Perform and communicate with honesty and transparency. Improve attention to detail and commitment to accuracy moving forward. You are expected to ensure all the information you provide is accurate and complete. This includes verifying facts and double-checking details before reporting or presenting any data, especially where it impacts safety, compliance, or operational efficiency.

**Action to be taken if employee does not meet the improvements/standards required:**

Further disciplinary action, up to and including termination.

As discussed on 1/31/25, your continued employment is contingent upon your ability to show immediate improvement in the areas above. If you are not able to effectively do so, you may be subject to further disciplinary action up to and including termination of employment. Additionally, nothing in this document alters your at-will employment with United Site Services. I have read the above and understand the consequences for non-conformance.

**Associate Statement:**

Check the appropriate box (Provide comments below)

I concur with the company's statement

I disagree with the company's statement

Wet Signature	Date	Digital Signature – click in box to sign	Date
Employee			
Manager			
HR Review			1/31/2025



## CORRECTIVE ACTION FORM

Employee name	EE Number	Branch
Jerry Ned	122499	Corporate Safety
Date: 1/12/2026	Time frame of Event(s):	1/12/2026

**Nature of Event(s):**

<input type="checkbox"/> Absenteeism/Attendance	<input type="checkbox"/> Safety Violation	<input checked="" type="checkbox"/> Poor Work Quality/Productivity
<input type="checkbox"/> Falsification of Records	<input checked="" type="checkbox"/> Policy Violation	<input type="checkbox"/> Other (state)
<input type="checkbox"/> Insubordination	<input type="checkbox"/> Harassment	

**DISCIPLINARY ACTION:**

<input type="checkbox"/> Verbal Warning	<input type="checkbox"/> Written warning	<input type="checkbox"/> Suspension	<input type="checkbox"/> Final Warning	<input checked="" type="checkbox"/> Termination
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**PREVIOUS WARNINGS: (Enter the Date and Type of warning the employee received previously)**

1 <sup>st</sup> Warning – Date	2/3/2025	2 <sup>nd</sup> Warning - Date	Select date	3 <sup>rd</sup> Waring - Date	Select date
Type:	Final Written	Type:	Choose an item	Type:	Choose an item

**Performance Problem or Misconduct: Describe the violation and impact on job and/or company:**

Jerry demonstrated a pattern of inadequate follow-through, poor communication, and misalignment with established expectations. Commitments were not met, coordination with leadership was lacking, and scheduled trainings were missed without notice, resulting in repeated delays and operational impact.

- On 10/28/25, Jerry was instructed by his direct manager to schedule EHS training for all assigned branches, with completion required before Christmas. It was verbally communicated that the latest acceptable completion date was year-end.
- On 12/5/25, it was confirmed that EHS training for the PNW branches (Longview, Boise, and Mount Vernon), which are assigned to Jerry, had not been completed yet. Although Jerry traveled to the market during Q4 2025, the required EHS training session had not been completed.
- It was later discovered that Jerry had scheduled EHS training sessions via Microsoft Teams without first consulting his direct manager. Because this training is designed to be interactive and is not suitable for a virtual format, the sessions had to be rescheduled.
- On Tuesday, 12/30/25, Jerry confirmed with regional leadership that he would conduct an in-person EHS meeting at the Mount Vernon branch on 1/12/26 at 6:00 a.m.
- Jerry did not attend the scheduled safety meeting on 1/12/26 and did not provide advance notice to branch leadership of any changes. As a result, local team members were present and waiting, and the training had to be postponed for a second time.

**Poor Work Quality/Productivity:** This ongoing pattern of missed commitments and lack of communication does not align with the expectations of Jerry's role as Regional Safety Manager.

**Policy Violation:** This behavior falls under United Site Services Guideline's for Appropriate Conduct, specifically: Failing to observe working schedules, which includes attendance at required meetings.

**Guidelines for Appropriate Conduct:** The Company expects team members to follow basic, common-sense rules of conduct that will protect everyone's safety and security, as well as the Company's legitimate business interests. It is not possible to list all the forms of prohibited behavior, but below are examples of unacceptable behavior that may lead to corrective action up to and including termination of employment, in the discretion of the Company. The following list is not all-inclusive:

- Failing to observe working schedules

The Company reserves the right to determine which type of corrective action to issue a team member.

**At-Will Employment:** All employment with the United Site Services (the "Company") is "at-will." You or the Company may terminate your employment at any time, with or without cause, and without advance notice, procedure, or formality.

**Corrective Action: Expected improvement and/or standards for the future:**

Termination effective January 12, 2025

**Action to be taken if employee does not meet the improvements/standards required:**

NA

**Associate Statement:**

Check appropriate box (Provide comments below)

I concur with the company's statement

I disagree with the company's statement

Employee Signature:

\_\_\_\_\_  
*John Smith VPEHS*

Date: \_\_\_\_\_

Supervisor/Manager Signature:

\_\_\_\_\_  
*John Smith VPEHS*

Date: \_\_\_\_\_

Human Resources Review:

\_\_\_\_\_  
*John Smith VPEHS*

Date: \_\_\_\_\_