UNITED STATES OF AMERICA	DO NOT V	WRITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD	Case	Date filed
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS	01-CB-230494	Nov. 2, 2018
NSTRUCTIONS: File an original of this charge with the NLRB Regiona occurred or is occurring.	<u>-</u>	,
LABOR ORGANIZATION OR ITS AGENTS		
a. Name	b. Union Representative	to Contact
International Association of Machinists and Aerospace	Kirby Boyce	
Workers Local 1746	President	
c. Address	d. Tel. No.	e.e. Cell No.
357 Main St. East Hartfurd, Ct. 06118	860-568-3000	
, , , , , , , , , , , , , , , , , , ,	f. Fax No.	g. e-Mail
		President 1746@111746.C
h. The above-named labor organization or its agents have engaged in and 8(b), subsection(s) 1(A) of the National Labor Relations Act, and these u meaning of the Act, or are unfair practices affecting commerce within the	ınfair labor practices are unfair j	oractices affecting commerce within the
mounting of the riot, of the union practices ancound continuous within the		
	constituting the alleged unitain is	abor practices)
	constituting the alleged untail is	abor practices)
2. Basis of the Charge (set forth a clear and concise statement of the facts		
2. Basis of the Charge (set forth a clear and concise statement of the facts Since about (b) (6), (b) (7)(C) 2018, the above-named labor organic	nization has restrained ar	nd coerced employees in the
2. Basis of the Charge (set forth a clear and concise statement of the facts Since about (b) (6) (b) (7)(c) 2018, the above-named labor organises of rights protected by Section 7 of the Act by refus	nization has restrained ar sing to process the grieva	nd coerced employees in the nce of (b) (6), (b) (7)(C) regarding
2. Basis of the Charge (set forth a clear and concise statement of the facts Since about (b) (6), (b) (7)(C) 2018, the above-named labor organic	nization has restrained ar sing to process the grieva	nd coerced employees in the nce of (b) (6), (b) (7)(C) regarding
Since about (b) (6), (b) (7)(C) 2018, the above-named labor organ exercise of rights protected by Section 7 of the Act by refus	nization has restrained ar sing to process the grieva	nd coerced employees in the nce of (b) (6), (b) (7)(C) regarding
2. Basis of the Charge (set forth a clear and concise statement of the facts Since about (b) (b) (7)(c) 2018, the above-named labor organ exercise of rights protected by Section 7 of the Act by refus	nization has restrained ar sing to process the grieva	nd coerced employees in the ence of (b) (6), (b) (7)(C) regarding

3. Name of Employer		4a. Tel. No.	4b. Cell No.		
Pratt & Whitney Aircraft		860-565-0941			
,		4c. Fax No.	4d. e-Mail		
		865-565-0416	Ì		
5. Location of Plant involved (street, city, state, and ZIP c	ode)	Employer representative to contact			
400 Main St, East Hartford, CT 06108-0968		Celeste Montey Human Resources Manager			
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	Number of Workers employed		
Manufacturer	Aircraft		300		
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No.		
(L) (B) (E) (Z)(O)		(b) (6), (b) (7)(C)			
(b) (6), (b) (7)(C)		11c. Fax No.	11d e-Mail		
11. Address of party filing charge (street, city, state, and 2	IP code)				
(b) (6), (b) (7)(C)					
	12. DECLARAT	TION			
I declare that I have read the above charge and	I that the statements	therein are true to the best	of my knowledge and belief.		
(b) (6), (b) (7)(C)			Tel No.		
			1		
By	(b) (6), (b) (7)	<u>/C\</u>	(b) (6) (b) (7)(C)		
		me and title or office, if any	(b) (6), (b) (7)(C)		
(Signature of representative or person making charge)	. Prinutype nai	me and title or office, it arry	Cell 140.		
Address:		Date:	Fax No.		
(b) (6), (b) (7)(C)					
		10/17/2014	e-Mail		
		(5):1/2-10			

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice 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.

FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TOTAL EXEMIT TOTALETT 44 0.0.0 0012		
DO NOT WRITE IN THIS SPACE			
Case 01-CB-230725	Date Filed 11/8/2018		

NSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

INSTRUCTIONS. File an original with NERB Regional Director for the	region in which the alleged u	niair iabor pra	actice occurre	ea or is occurring.		
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE IS	BROUGHT			
a. Name UNITE HERE, Local 26		b. Union Representative to contact Brian Lang Title: President				
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.		
101 Station Landing 4th Floor MA Medford 02155		(617) 832-6 f. Fax No.	699	g. e-Mail		
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	- C (II N I - C)		1 - C A - C -	1.0		
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	l unfair labor	practices)			
See additional page						
Name of Employer		4a. Tel. No.		b. Cell No.		
Public Information Resources, Inc. d/b/a Learning & the Brain		(781) 449-4 c. Fax No.	010	d. e-Mail		
Location of plant involved (street, city, state and ZIP code)			6. Employ	ver representative to contact		
35 Highland Circle 1st Floor MA Needham 02494			Daniel La Title: Pres	Gattuta		
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed		
Scientific & Technical Instr.	Educational seminars and c		20			
10. Full name of party filing charge (b) (6), (b) (7)(C)		11a. Tel. No (b) (6), (b) (7)		b. Cell No.		
Public Information Resources d/b/a Learning & the Brain		c. Fax No.	(C)	d. e-Mail		
11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)		(b) (6), (b) (7)	(C)	(b) (6), (b) (7)(C)		
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie		. No. (516) 32	28.8800		
_ Richard Milman	Richard Milman		I No.	20-0000		
(signature of representative or person making charge) (Print/type	name and title or office, if any Title: Attorney		(No. (516) 32	28-0082		
3000 Marcus Avenue Suite 3W8 New Hyde Park NY 11042	(date)_11/8/2018		/ail	nmmlaborlaw.com		
WILLELL EALSE STATEMENTS ON THIS CHARGE CAN BE DIEN	, ,	CONMENT (I & CODE :	TITLE 10 SECTION 1001)		

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice 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.

8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights

protected by Section 7 of the Act by threatening to retaliate against employees if they did not join or support the union.

Name of the Union Agent/Representative who made the threat	Date the threats were made
UNITE HERE, Local 26	11/6/2018

UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE		
NATIONAL LABOR RELATIONS BOARD	<u> </u>	Case	Date filed	
CHARGE AGAINST LABOR ORGANIZATION AGENTS	N OR ITS	01-CB-230804	11/8/2018	
INSTRUCTIONS: File an original of this charge with the	e NLRB Regional Di	rector of the region in whic	h the alleged unfair labor practice	
occurred or is occurring.				
	OR ITS AGENTS AGA	INST WHICH CHARGE IS BR		
a. Name		b. Union Representative to	Contact	
Service Employees International Union, Loca	al 32 BJ	Andres Reyes	1	
			1	
c. Address		d. Tel. No.	e.e. Cell No.	
26 West St, Boston, MA 02111-1207		(617)878-7560	e.e. Centro.	
20 West St, Boston, MA 02111-1201		f. Fax No.	g. e-Mail	
		1. Pax No.	g. e-iviali	
h. The above-named labor organization or its agents have	a angaged in and are	angaging in unfair labor pract	tices within the meaning of section	
8(b), subsection(s) (1)(A)of the National Labor Relation	s Act and these unfa	uir lahor practices are unfair n	ractices affecting commerce within the	
meaning of the Act, or are unfair practices affecting co	mmerce within the me	eaning of the Act and the Post	al Reorganization Act.	
2. Basis of the Charge (set forth a clear and concise state				
- '				
			i	
•				
			ļ	
See Attached.				
See Attached.				
			1	
			ı	
Name of Employer		4a. Tel. No.	4b. Cell No.	
Metalstone Technologies Inc.				
		4c. Fax No.	4d. e-Mail	
		(617)466-2039		
5. Location of Plant involved (street, city, state, and ZIP of	ode)	Employer representative	to contact	
180 Second St, Chelsea, MA 02150		Paul Fernandes Dir.	of Operations	
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product		Number of Workers employed	
Metal/wood/stone restoration	Restoration se		54	
10. Full name of party filing charge	1 COLOTOTION SC	11a, Tel. No.	11b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6) (b) (7)(C)		
		(b) (6), (b) (7)(C)	1	

11. Address of party filing charge (street, city, state, and ZIP code)

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

(si

12. DECLARATION

11c. Fax No.

Print/type name and title or office, if any

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

| Tel No.

_{By}(b) (6), (b) (7)(C)

је)

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

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

Address: (b) (6), (b) (7)(C)

Fax No.

11d e-Mail

8/18 e-Mail

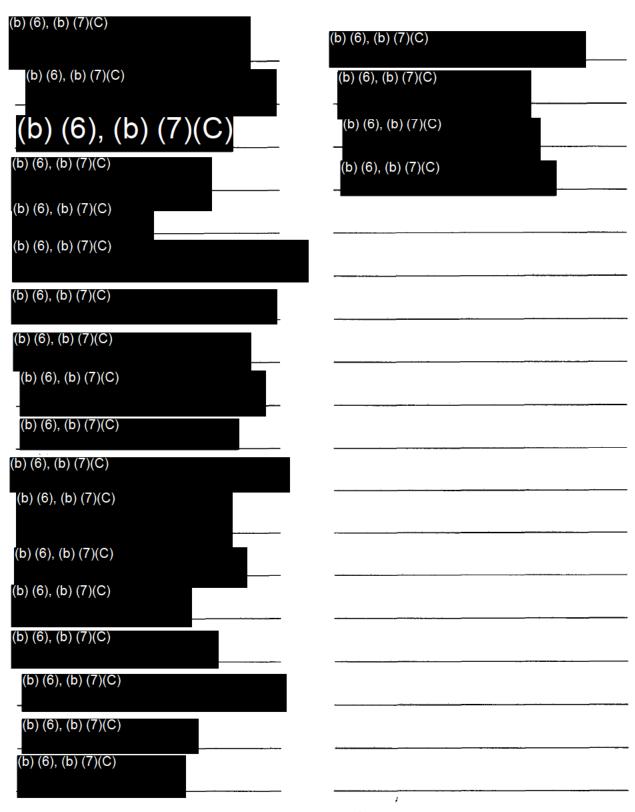
(b) (6), (b) (7)(C)

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

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Page 10f2

Within the past six months, SEIU Local 32 BJ has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by refusing to process the grievances, refusing to enforce contractual provisions, and otherwise failing in their duty of fair representation to the following individuals and others:



Page 2072

UNITED STATES OF AMERICA	DO NOT W	RITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD	Case	Date filed
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS	01-CB-230827	11/8/2018
INSTRUCTIONS: File an original of this charge with the NLRB Regional Of occurred or is occurring.		
1. LABOR ORGANIZATION OR ITS AGENTS AGA		
a. Name National Association of Letter Carriers, Branch 86	b. Union Representative to	Contact
table to be better of the best	Michael L Willadsen	, President
c. Address	d. Tel. No.	e.e. Cell No.
303 Burnside Ave, Suite 2, East Hartford, CT 06108	(860)528-7921	(860)478-6959
,	f. Fax No.	g. e-Mall
	(860)528-0116	mergedbr86@aol.com
h. The above-named labor organization or its agents have engaged in and are 8(b), subsection(s) (1)(A) of the National Labor Relations Act, and these until the meaning of the Act, or are unfair practices affecting commerce within the	air labor practices are unfair p	ractices affecting commerce within
2. Basis of the Charge (set forth a clear and conclas statement of the facts con	stituting the alleged unfair lab	or practices)
		*
and the second s	and the States	.**.
Since on or about September 1, 2018, the ab agents and representatives, has, by refusing to allow membership, and by other acts and conduct, restrain	(b) (6), (b) (7)(C)	to resign on Union

the exercise of the rights guaranteed in Section 7 of the Act.

3. Name of Employer		4a. Tel. No.	4b. Cell No.
UNITED STATES POSTAL SERVICE			<u> </u>
		4c. Fax No.	4d. e-Mail
5. Location of Plant Involved (street, city, state, and ZIP of	ode)	Employer representative	ve to contact
135 Chestnut St, New Britain, CT 06051		Elizabeth Vargas,	Post Master
7. Type of Establishment (factory, mine, wholeselar)	8. Principal product		9. Number of Workers-employed-
Post Office	Mail Delivery		80
10. Full name of party filing charge	, then bonton	11a, Tel. No.	11b. Cell No.
(b) (6), (b) (7)(C)		, , , , , , , , , , , , , , , , , , , ,	(b) (6), (b) (7)(C)
		11c, Fex No.	11d e-Mail
11. Address of party filing charge (street, city, state, and 2	IP code)		and the same the same the
(b) (6), (b) (7)(C)			
	12. DECLARAT	ION	
I declare that I have read the above charge and	that the statements	therein are true to the be	ist of my knowledge and belief.
(b) (6), (b) (7)(C)			Tel No.
8			
	(b) (6), (o) (7)(C) _{an Individua}	ı'l
76		ne and title or office, if any	
			(b) (6), (b) (7)(C)
	-,-,	Date:	Fex No.
(b) (6), (b) (7)(C)		Date.	, ax 110.
(b) (b) (1)(c)		16-11-110	e-Mail
		XIU YII X	G-itien

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice and related proceedings or litigation. The routine uses for the information art fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary, however, failure to supply the information will cause the NLRB to decline to invoke its processes.

... 1.

4.4

FORM EXEMPT UNDER 44 U.S.C 3512

FORM NLRB-508 (6-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

| DO NOT WRITE IN THIS SPACE | Case | Date Filed | 11/8/2018

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

	-					
1. LABOR ORGANIZATION OR IT	S AGENTS	AGAINST WHICH CHARC	SE IS BRO	UGHT		
a. Name		b. Union Representative to contact				
UNITE HERE, Local 26		Brian La	ang			
c. Address (Street, city, state, and ZIP code)			d. Tel. N		e. Cell No.	
UNITE HERE Local 26	NITE HERE Local 26			-6699		
Attn: Mr. Brian Lang, President			f. Fax. No	D.		
101 Station Landing, 4th Floor			617-426	-7684		
Medford, MA 02155			g. e-mail			
n. The above-named labor organization has engaged in and is enga	ging In unfal	labor practices within the	meaning	of section 8(b).	subsections (1) and	
(list subsections) subsections (4)(i) and 4(ii)	•	· ·			nd these unfair labor	
practices are practices affecting commerce within the meaning of	the Act. or th	esé unfair labor practices	affecting o	commerce with	in the meaning of	
the Act and the Postal Reorganization Act.	2.57.64.64	iore fillen i hisanan		••••••		
2. Basis of the Charge (set forth a clear and concise statement of th	e ferte const	ituting the alleged unfair is	ebor practi	cas)		
UNITE HERE, Local 26 (the "Union") has engaged in unla	wful second	lary hoveoft activity as	ainst the	Employer in	this matter. Public	
Information Resources, Inc. d/b/a Learning & the Brain, wh	o is a neutr	al third-party and who	is not a n	arty to a prin	ary labor dipute	
between the Union and the Marriott-Westin Copley Place h	otel (the "W	estin"), which is the lo	cation fo	r Learning &	the Brain's	
apcoming annual conference.	(,,		_		
The Union has engaged in threatening, harrassing, and intin	nidating tac	tics to coerce Learning	& the Br	rain into boyo	otting the Westin,	
The Union has also threatened, harrassed, and initmidated p	articipants	in Learning & the Brai	n's upcon	ning annual c	onference with the	
ntent of coercing those participants into boycotting the We	stin and refi	raining from attending	Learning	& the Brain'	s conference.	
. Name of Employer		4a. Tel. No.	b. Cell N		c, Fax No.	
Public Information Resources, Inc. d/b/a Learning & the Br	ain	781-449-4010	Di Gen III	781-449-4024		
Thome intornation resources, me. what bearing & the pr	ω 1.	d. e-mail				
		danicl.lagattuta@lear	ningandtl	ehrain com		
		Carrior.ingatterates			ivo to pontoni	
Location of plant involved (street, city, state and ZIP code)			6. Employer representative to contact Richard Milman, Esq.			
Public Information Resources, Inc.			Richard	Millinger, Esc	•	
35 Highland Circle, First Floor Needham, MA 02494						
Troculain, har 02494						
7. Type of establishment (factory, mine, wholesaler, etc.)		rincipal product or service			of workers employed	
Education Organization	Eductiona	l seminars, conference	s, classes	20		
0. Full name of party filing charge						
Public Information Resources, Inc. d/b/a Learning & the Br	ain					
Address of party filing charge (street, city, state and ZIP code)		11a. Tel. No.	b. Cell N	0.	c. Fax No.	
		516-328-8899			516-328-0082	
3000 Marcus Ave, Ste. 3W8, Lake Success, NY 11042		d. o-mail			-	
rich@mmnlaborlaw		com				
12. DECLARATION			1	Tel. No.		
declare that I have read the above charge and that the statements		statements	516-328-8899			
are true to the best of my knowledge and belief.			Cell No.			
Richard Milman, counsol for Employer						
(signature of representative or person making charge) (Printitype name and title or office, if any) Fax No.						
loshipme or tohipocurpas or herapit manufa and Ball to the state of th		516-328-0082				
3000 Marcus Avenue, Ste. 3W8, Lake Success			e-mail			
Address		Date 11/8/2018	/8/2018 e-mail rich@mmmlaborlaw.com			
				тепевини	INDUCTOR WILLIAM	

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

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FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
01-CB-230911	11/13-18	

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	nfair labor	prac	tice occurre	ed or is occurring.	
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE	IS E	BROUGHT		
a. Name		b. Union	Rep	resentative t	to contact	
International association of emt and paramedics		phil Petit				
		Title: (Orga	nizer		
c. Address (Street, city, state, and ZIP code)		d. Tel. N (617) 37		85	e. Cell No.	
159 Thomas Burgin Pkwy		f. Fax N			g. e-Mail	
MA Quincy 02169-4213						
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (3), (1)(A) are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor	Rela	ations Act, a	nd these unfair labor practices	
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the allege	d unfair lai	oor p	ractices)		
See additional page						
					1	
3. Name of Employer		4a. Tel.	No.		b. Cell No.	
Madison Emergency Medical services		c. Fax N	lo.		d. e-Mail	
Location of plant involved (street, city, state and ZIP code)		L		6. Employ	er representative to contact	
9 Old 79					er Bernier	
CT Madison 06443-2604		Title: EM		Title: EMS	Diretor	
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	t or service 9. Number			r of workers employed	
Others	Emergency Medical Service			12		
10. Full name of party filing charge		11a. Tel		C)	b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C) c. Fax No.			d. e-Mail	
11. Address of party filing charge (street, city, state and ZIP code.)		ł			(b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C)						
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie	ef.	Tel.	No. (b) (6), (b	o) (7)(C)	
By (b) (6), (b) (7)(C)		_	Cell			
	name and title or office, if an	y)	Fax	No.		
(b) (6) (b) (7)(C)	Title:	Ĺ				
(b) (6), (b) (7)(C)	44/42/204	IS 15:50:02	e-M		(b) (7)(C)	
Address	(date)_11/13/201	10 10.00:02		(b) (b),	(b) (7)(C)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice 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

8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by refusing to process the Charging Party's grievance for arbitrary or discriminatory reasons or in bad faith.

8(b)(3)

Within the previous six months, the above-named labor organization has failed and refused to bargain in good faith with the employer.

FORM NLRB-508 (6-18)

1st Amended

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
02-08-230311	11/14/18	

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. LABOR ORGANIZATION OR IT	S AGENTS A	GAINST WHICH CHAR	GE IS BROU	JGHT			
a. Name			b. Union Representative to contact				
1199SEIU United Healthcare Workers East			Luiz Cru	Luiz Cruz, Organizer			
c. Address (Street, city, state, and ZIP code)			d. Tel. No 212-582-	·	e. Cell No.		
310 West 43rd Street, New York, NY 10036			f. Fax. No.				
			g. e-mail				
h. The above-named labor organization has engaged in and is enga	iging in unfair	labor practices within the	e meaning o	f section 8(b),	subsections (1) and		
(list subsections) A		of the Natio	nal Labor R	elations Act, a	nd these unfair labor		
practices are practices affecting commerce within the meaning of	the Act, or th	ese unfair labor practice	s affecting c	ommerce withi	n the meaning of		
the Act and the Postal Reorganization Act.							
2. Basis of the Charge (set forth a clear and concise statement of the Since on or about (b) (6). (b) (7)(C) 2018, the above-named labs Section 7 rights by failing and refusing to further process reasons that are arbitrary, discriminatory, or otherwise unlar	or organizat grievance	ion has restrained and	coerced (b (7)(C) 2018 s	(6), (b) (7)(C) in uspension by REC [the exercise of the Employer, for FIVE D		
3. Name of Employer		4a. Tel. No.	b. Cell No		c. Fax No.		
New York Presbyterian Hospital		212-746-6127					
		d. e-mail	1				
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	er representati	ve to contact		
622 West 168th Street, New York, NY 10032			Alexande	er Gallan			
7. Type of establishment (factory, mine, wholesaler, etc.) hospital		rincipal product or servicere and services	e	9. Number o	of workers employed		
10. Full name of party filing charge (b) (6), (b) (7)(C)	1.						
11. Address of party filing charge (street, city, state and ZIP code)	11. Address of party filing charge (street, city, state and ZIP code) 11a. Tel. No.		b. Cell No (b) (6), (b)		c. Fax No.		
(b) (6), (b) (7)(C)		d. e-mail		,			
(b) (6), (b) (7)(C) 12. DECLARATION rad, the above charge be best of my knowler	and that the	statements		Tel. No.			
ne best of my knowledge and belief. (b) (6), (b) (7)(C)		Cell No. same as above					
charge)	(Print/type na	ame and title or office, if any)		Fax No.			
same as above Address		Date 11/14/18		e-mail			

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice 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.

FORM NLRB-508 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

| DO NOT WRITE IN THIS SPACE | Case | Date Filed | 11/13/2018 |

2001/001 1

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

INSTRUCTIONS: File an original with NLRB Regional Director for the					
1. LABOR ORGANIZATION OR IT	S AGENTS AGAINST WHICH			<u> </u>	
a. Name International Association of Machinists and Aerospace Workers, District 15, Automobile Lodge 447		Jim Fo	Representativ ley	e to contact	
c. Address (Street, city, state, and ZIP code) 37 Pierce St.		d. Tel. N 781-42	lo. 22-0090	e. Cell No.	
Northboro, MA 01532		f. Fax No	Q .	g. e-Mall	
h. The above-named organization(s) or its agents has (have) engaged authorition(s) (list subsections) 1a are untair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Mat	anal I abar	Dalations Act	and those unfall labor practices	
2. Basis of the Charge (set forth a clear and concise statement of the Since in or around 2018, the above-named labor of 2016 termination.				(b) (7)(C) with respect to	
3. Name of Employer Ryder South Boston #1010		4a. Tel. No. 617-269-8000 c. Fex No.		b. Ceff No.	
5. Location of plant involved (street, city, state and ZIP code) 280 W. First Street, Boston, MA 02127		,	6. Emplo Joe Br	gyer representative to contact uno	
7. Type of establishment (factory, mine, wholesaler, etc.) truck rentals	8. Identify principal product truck rentals	or service	9. Numb 20	per of workers employed	
io. Full name of party filing charge b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C) c. Fax No.		b, Cell No. (b) (6), (b) (7)(C) d. e-Mall	
 Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 				(b) (6), (b) (7)(C)	
(algrenate or representative or person making charge) (b) (6), (b) (7)(C), an individual (Printrype name and title or office, if any)			Tel. No. (b) (6) Cell No. (b) (6 Fax No.	, (b) (7)(C)), (b) (7)(C)	
(b) (6), (b) (7)(C) Address	(date) 11 /	1/18	e-Mail (b) (6), (b) (7)(C)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice and related processings or fligation. 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.

FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TOTAL EXEMIT TOTALETT TO O.O.O.O.O.	
DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
01-CB-231104	11/15/2018	

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	nfair labor prac	ctice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE IS E	BROUGHT	
a. Name		b. Union Rep	resentative t	to contact
SPFPA		lionel hall		
		Title: presi	dent local 54	45 appointed
		proof.	dorit local o	io appointou
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
25540 Kally Dd		(586) 772-72	50	
25510 Kelly Rd MI Roseville 48066-4994		f. Fax No.		g. e-Mail
				spfpa545pres@gmail.com
h. The above-named organization(s) or its agents has (have) engaged	in and is (are)engaging in un	fair labor pract	ices within t	he meaning of section 8(b)
subsection(s) (list subsections) (1)(A), (2)	of the Natio	onal Labor Rela	ations Act, a	and these unfair labor practices
are unfair practices affecting commerce within the meaning of the Ameaning of the Act and the Postal Reorganization Act.	ct, or these unfair labor practi	ces are unfair	practices aff	fecting commerce within the
	facts constituting the allege	d unfair labor n	ractional	
Basis of the Charge (set forth a clear and concise statement of the	e racis consuluting the alleged	типпан тарог р	racuces)	
See additional page				
1 0				
3. Name of Employer		4a. Tel. No.		b. Cell No.
Paragon		(603) 518-81	62	(617) 659-7053
		c. Fax No.		d. e-Mail
				eaucoin@parasys.com
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	er representative to contact
575 S Willow St Ste B4			Eddie Aud	
NH Manchester 03103-5713			Title: proje	ect manager
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	r of workers employed
Security Systems & Services	security		200	
10. Full name of party filing charge		11a. Tel. No.		b. Cell No.
		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		c. Fax No.		d. e-Mail
				(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state and ZIP code.)				
(b) (6), (b) (7)(C)				
12. DECLARATION		Tel.	No	
I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie		(b) (6), (b	o) (7)(C)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Cell		
(signature of representative or person making charge) (Print/type	name and title or office, if any		(b) (6), (b) (7)(C)
	Title:	Fax	No.	
(b) (6), (b) (7)(C)		e-M	ail	
	(date)(8 10:17:43		, (b) (7)(C)
Address	(date)		(0)	, (-) (-)

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice 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.

8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by refusing to process the Charging Party's grievance for arbitrary or discriminatory reasons or in bad faith.

8(b)(1)(A) and 8(b)(2)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by causing the employer to discriminate against an employee(s) in retaliation for failing to pay union dues.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST LABOR ORGANIZATION** OR ITS AGENTS

	FURM EXEMPT UNDER 44 U.S.C 3312
DO NOT WRIT	E IN THIS SPACE
Case	Date Filed
01-CB-231289	11/20/2018

1. LABOR ORGANIZATION OR ITS	INSTRUCTIONS: File an original with NLR8 Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.					
	S AGENTS AGAINST WHICH	CHARGE IS	BROUGHT			
a. Name		b. Union Rep	resentative	to contact		
Massachusetts Nurses Association (MNA) Union: (b) (6), (b) (7)(C) (b) (6), (b) (7) .; MNA attorney representative, (b) (6), (b) (7)(C) assigned to (b) (b) (b) (c) Arbitration case. McDonald, Lamond, Canzeroni Law Firm			John Gordon MNA Associate Director			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	4007	e. Cell No.		
340 Tumpike Street, Canton, MA 02021		(781) 821	4625			
		f. Fax No.		g. e-Mail gordon@mnam.org		
		(781) 821-	4445	igoson@inathang		
h. The above-named organization(s) or its agents has (have) engaged in and is (are) engaging in unfair labor practices within the meaning of section 8(b), subsection(s) (list subsections) 8(b)(1)(A) 8 8(b)(2) of the National Labor Relations Act, and these unfair labor practices are unfair practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.						
2. Basis of the Charge (set forth a clear and concise statement of th	e facts constituting the allege	d unfair labor p	vractices)			
Within the last 6-months the MNA Union restrained & co				otected by Section 7 of		
the Act by including but not limited to: On 100,000,2018 to	he MNA Union harasse	d & coercer	(b) (6), (b)	(7)(C) by the		
cancellation of [0](6) Adultation Hearing on (b) (6)	(7)(C)2018 as well	as by three	tening to	nermanently cancel		
(b) (6), (b) (7)(C) Arbitration case altogether in retaliation for the MNA Union on 08/23/2018. On: (0)(6), (0)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)(7)	b) (6), (b) (7)(C) iling unfair	r labor pract	ice charg	es w/ the NLRB against		
the MNA Union on 08/23/2018. On: 016/01/01/2018: 016/01/2018:	2018; (b) (6) (b) (7) 2018; and	(6) (0) (7) (2018 t	ne MNA L	Inion representative		
(b) (6) (b) (7)(C) attempted to deceive & mislead.	into failing to	appear for	O Arbitr	ation Hearing on the		
correct date. For the purpose of effectuating an Arbitrati	ion Judgement against	(b) (6), (b) (7)(C) due to F	ailure to Appear in		
retaliation for (10)(6),(10)(7)(6) filing unfair labor practice ch	arges on 08/23/2018. A	dditionally,	despite (b) (6), (b) (7)(C) many		
repeated requests the MNA Union Rep.(b) (6), (b) (7)(C) h						
arbitrary and unjust Written Warning dated (1000) (2017)				On		
2017. The MNA Union engaged in these actions	for reasons that are arb	itrary, discri		and in bad faith.		
2017. The MNA Union engaged in these actions	for reasons that are arb	itrary, discri		and in bad faith.		
	for reasons that are arb	itrary, discri		and in bad faith. b. Cell No.		
3. Name of Employer	for reasons that are arb		minatory,			
Name of Employer Signature-Healthcare Brockton Hospital	for reasons that are arb	4a. Tel. No.	minatory,	b. Cel No. d. e-Mail		
3. Name of Employer	for reasons that are arb	4a. Tel. No. (508) 941 c. Fax No.	minatory, 7236	b. Cell No. d. e-Mail kwalsh@Signature-		
3. Name of Employer Signature-Healthcare Brockton Hospital Kimberty Walsh RN, Sr. VP Patient Services, CNO	for reasons that are arb	4a. Tel No. (508) 941	7236 6204	b. Cell No. d. e-Mait kwalsh@Signature- Healthcare, org.		
3. Name of Employer Signature-Healthcare Brockton Hospital Kimberty Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code)	for reasons that are arb	4a. Tel. No. (508) 941 c. Fax No.	7236 6204	b. Cell No. d. e-Mail kwalsh@Signature- Healthcare.org.		
3. Name of Employer Signature-Healthcare Brockton Hospital Kimberty Walsh RN, Sr. VP Patient Services, CNO	for reasons that are arb	4a. Tel. No. (508) 941 c. Fax No.	7236 6204 6. Employ David F	b. Cell No. d. e-Mail kwalsh@Signature- Healthcare. org. er representative to contact isher VP, HR dfisher@.		
3. Name of Employer Signature-Healthcare Brockton Hospital Kimberly Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code) 680 Centre Streeet, Brockton, MA 02302		4a. Tel. No. (508) 941 c. Fax No. (508) 941	7236 6204 6. Employ David F Signatur	b. Cell No. d. e-Mail kwalsh@Signature- Healthcare.org.		
3. Name of Employer Signature-Healthcare Brockton Hospital Kimberly Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code) 680 Centre Streeet, Brockton, MA 02302 7. Type of establishment (factory, mine, wholesaler, etc.)	8 Identify principal product	4a. Tel. No. (508) 941 c. Fax No. (508) 941	7236 6204 6. Employ David F Signatur	b. Cell No. d. e-Mail kwalsh@Signature Healthcare.org. er representative to contact isher VP, HR dfisher@ re-Healthcare.org or of workers employed		
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3. Name of Employer Signature-Healthcare Brockton Hospital Kimberly Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code) 680 Centre Streeet, Brockton, MA 02302 7. Type of establishment (factory, mine, wholesaler, etc.)	8 Identify principal product	4a. Tel. No. (508) 941 c. Fax No. (508) 941	7236 6204 6. Employ David F Signatur 9. Numbe	b. Cell No. d. e-Mail kwalsh@Signature Healthcare.org. er representative to contact isher VP, HR dfisher@ re-Healthcare.org or of workers employed		
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3. Name of Employer Signature-Healthcare Brockton Hospital Kimberly Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code) 680 Centre Streeet, Brockton, MA 02302 7. Type of establishment (factory, mine, wholesaler, etc.) Hospital 216-Beds 10. Full name of party filing charge (b) (6), (b) (7)(C)	8 Identify principal product	4a. Tel. No. (508) 941 c. Fax No. (508) 941-or service	7236 6204 6. Employ David Fi Signatur 9. Numbe approx.	b. Cell No. d. e-Mail kwalsh@Signature Healthcare.org. ver representative to contact isher VP, HR dfisher@ re-Healthcare.org or of workers employed 1,500 b. Cell No. (b) (6), (b) (7)(C) d. ie-Mail		
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3. Name of Employer Signature-Healthcare Brockton Hospital Kimberly Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code) 680 Centre Streeet, Brockton, MA 02302 7. Type of establishment (factory, mine, wholesaler, etc.) Hospital 216-Beds 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) Residential: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) ECLARATION. atternetts therein are true to	8. Identify principal product Health Services the best of my knowledge and before (b) (7)(C)	4a. Tel. No. (508) 941 c. Fax No. (508) 941-or service 11a. Tel. No. (b) (6), (b) (c. Fax No. (b) (6), (c. Fax No. (b) (6), (c. Fax No. (b) (6), (d. Cell	7236 6204 6. Employ David F Signatur 9. Numbe approx. 7)(C) (b) (7)(C)	b. Cell No. d. e-Mail kwalsh@Signature Healthcare.org. ver representative to contact isher VP, HR dfisher@ re-Healthcare.org or of workers employed 1,500 b. Cell No. (b) (6), (b) (7)(C) d. ie-Mail		
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3. Name of Employer Signature-Healthcare Brockton Hospital Kimberly Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code) 680 Centre Streeet, Brockton, MA 02302 7. Type of establishment (factory, mine, wholesaler, etc.) Hospital 216-Beds 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) Residential: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) ECLARATION. atternetts therein are true to	8. Identify principal product Health Services the best of my knowledge and before (b) (7)(C)	4a. Tel. No. (508) 941 c. Fax No. (508) 941-or service 11a. Tel. No. (b) (6), (b) (c. Fax No. (b) (6), (c. Fax No. (b) (6), (c. Fax No. (b) (6), (d. Cell	7236 6204 6. Employ David F Signatur 9. Numbe approx. 7)(C) (b) (7)(C)	b. Cell No. d. e-Mail kwalsh@Signature Healthcare.org. ver representative to contact isher VP, HR dfisher@ re-Healthcare.org or of workers employed 1,500 b. Cell No. (b) (6), (b) (7)(C) d. ie-Mail		
3. Name of Employer Signature-Healthcare Brockton Hospital Kimberly Walsh RN, Sr. VP Patient Services, CNO 5. Location of plant Involved (street, city, state and ZIP code) 680 Centre Streeet, Brockton, MA 02302 7. Type of establishment (factory, mine, wholesaler, etc.) Hospital 216-Beds 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) Residential: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) ECLARATION. atternetts therein are true to	8. Identify principal product Health Services the best of my knowledge and before (b) (7)(C)	4a. Tel. No. (508) 941 c. Fax No. (508) 941- or service 11a. Tel. No. (b) (6), (b) (c. Fax No. (b) (6),	7236 6204 6. Employ David Fisignature 9. Number approx. 7)(C) No. No.	b. Cell No. d. e-Mail kwalsh@Signature Healthcare.org. ver representative to contact isher VP, HR dfisher@ re-Healthcare.org or of workers employed 1,500 b. Cell No. (b) (6), (b) (7)(C) d. ie-Mail		

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice and related proceedings or litigation. The muline 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.

FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE		
Case 01-CB-231596	Date Filed 11/26/2018	

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	ntair labor pra	ctice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH			
a. Name		b. Union Rep	resentative	to contact
teamsters local 633, and the teamsters brewery and soft drink division	in washington dc.	jeff padella	аго	
		Title: treas	urer, busine	ss agent, principle officer
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
53 Goffstown Rd		(603) 625-97	731	
NH Manchester 03102		f. Fax No.		g. e-Mail
				padellaro@teamsters633.com
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A), (3)	of the Natio	onal Labor Rel	ations Act, a	and these unfair labor practices
are unfair practices affecting commerce within the meaning of the A meaning of the Act and the Postal Reorganization Act.	ct, or these unfair labor practi	ces are unfair	practices af	fecting commerce within the
Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor i	oractices)	
2. Busis of the oritinge (see forth a doct and correspondence of the	o radio doristitating the alleget	a amaii iaboi j	n dollocs)	
See additional page				
Name of Employer		4a. Tel. No.		b. Cell No.
coca cola of northern new england		(603) 437-35	30	
		c. Fax No.		d. e-Mail
				rbruner@ccnne.com
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	ver representative to contact
7 Symmes Dr			russ brun	er
NH Londonderry 03053-2102			Title:	
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed
Beverages (Nonalcoholic)	coca cola		100	
10. Full name of party filing charge		11a. Tel. No		b. Cell No.
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)	
		c. Fax No.		d. e-Mail
11. Address of party filing charge (street, city, state and ZIP code.)				(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)				
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie	Tel.	No. (b) (6), (b	o) (7)(C)
By (b) (6), (b) (7)(C)	b) (6), (b) (7)(C)	Cell	No.	
	name and title or office, if any	/) Fax	No	
	Title:	FdX	NO.	
(b) (6), (b) (7)(C)		e-M		(L) (Z)(O)
Address	(date)(8 12:02:28	(b) (6)	, (b) (7)(C)

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

8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by refusing to process the Charging Party's grievance for arbitrary or discriminatory reasons or in bad faith.

8(b)(3)

Within the previous six months, the above-named labor organization has failed and refused to bargain in good faith with the employer.

l .				
UNITED STATES OF AMERICA		DO NOT	WRITE IN THIS SPACE	
NATIONAL LABOR RELATIONS BOARD		Case	Date filed	
CHARGE AGAINST LABOR ORGANIZATION	N OR ITS	01-CB-231292	Nov. 19, 2018	
INSTRUCTIONS: File an original of this charge with the	ne NLRB Regional Di	rector of the region in wh		
occurred or is occurring.	LOD ITO ACENTO AC	INCT WILLOW CLARGE IC D	DOUGUET	
1. LABOR ORGANIZATION	OR ITS AGENTS AGE	NNST WHICH CHARGE IS B b. Union Representative		
a. Hamo		D. Omon Noprocontaino	15 55.11 <u>5</u> 0.	
Boilermakers NEAAC, Local 237		Michael T. Pierce, P	resident	
c. Address		d. Tel. No.	e. Cell No.	
007 Durasida Assassa Fast Hadrand OT 0040	•	860.528.9087		
297 Burnside Avenue, East Hartford, CT 0610	8	f. Fax No.	g. e-Mail	
		960 200 2006		
h. The above-named labor organization or its agents hav	e engaged in and are	860.289.3986	actices within the meaning of section	
8(b), subsection(s) (1)(A) of the National Labor Relation				
the meaning of the Act, or are unfair practices affecting	g commerce within the	meaning of the Act and the	Postal Reorganization Act.	
2. Basis of the Charge (set forth a clear and concise state	ement of the facts con	stituting the alleged unfair la	abor practices)	
For the past six months, the above-	named labor org	anization, by its office	cers, agents and	
representatives, has refused to refer (b) (6)	, (b) (7)(C) for em	ployment and failed	to properly represent (0)(6),(0)(7) for	
arbitrary and capricious reasons, and by o	ther acts and co	nduct, restrained ar	nd coerced employees of	
Frank Lill & Son, Inc. in the exercise of the				
Trank Em & Gori, inc. in the exercise of the	s riginto guarante		7 C.	
Name of Employer Frank Lill & Son, Inc.		4a. Tel. No. 585-265-0490	4b. Cell No.	
785 Old Dutch Road		4c. Fax No.	4d. e-Mail	
Victor, New York 14564		585-265-1842		
5. Location of Plant involved (street, city, state, and ZIP c	ode)	6. Employer representativ	ve to contact	
Bridgeport Harbor Mercury Reduction Project	•			
Bridgeport, CT		Mark Royce, Genera	al Foreman	
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	9. Number of Workers employed	
7. Type of Establishment (labely, mino, moleculor)	o. Timospar product	01 0011100	Ø60	
Power Plant	Contractor		860	
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No. (b) (6), (b) (7)(C)	
		(b) (6), (b) (7)(C)	The courter to a series and the series and the series are series are series and the series are ser	
(b) (6), (b) (7)(C)			11de-Mail	
		11c. Fax No.	1 I de-Iviali	
11. Address of party filing charge (street, city, state, and Z	IP code)	J		
(b) (6), (b) (7)(C)				
	12. DECLARAT	TION		
I declare that I have read the above charge and	that the statements	therein are true to the be	st of my knowledge and belief.	
- 1 decide that I have read the above only ge and	uno ottomorito		Tel No.	
(b) (6), (b) (7)(C)				
	(b) (6), (b) (7	(C), an Individual	(b) (6), (b) (7)(C)	
<u>B</u> (\$	Print/type nar	me and title or office, if any	Cell No.	
\\			(b) (6), (b) (7)(C)	
Address:	Date: //	119/2018	Fax No.	
(b) (6) (b) (7)(C)	166	11000		

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

e-Mail

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

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 unfair labor practice 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.

FORM NLRB-508 (6-18) -

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS	SPACE
Case	Date Filed
01-CB-231553	11/26/18

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. LABOR ORGANIZATION OR IT	S AGENTS A	AGAINST WHICH CHAR	GE IS BRO	UGHT		
a. Name IUE-CWA, AFL-CIO, and its Local 81/206				o. Union Representative to contact Robert Holt		
c. Address (Street, city, state, and ZIP code) 2701 Dryden Rd. Moraine, OH 45439			d. Tel. No 937-298	-9985	e. Cell No. 937-298-7084	
Molanic, Off 40409			f. Fax. No 937-298			
			g. e-mail rholt@it	ic-cwa.org		
h. The above-named labor organization has engaged in and is enga (fist subsections) (3) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	f the Act, or th	of the Nationese unfair labor practice	onal Labor F is affecting o	Relations Act, a commerce with	and these unfair labor	
 Basis of the Charge (set forth a clear and concise statement of the Failure to bargain in good faith and failure to confer. Failur September 8, 2018, September 25, 2018, September 28, 2018, which are on-going and continuing. 	re to respon	d to information requ	ests made	on or about A		
3. Name of Employer		4a. Tel. No.	b. Cell No		c. Fax No.	
Management & Training Corporation		801-693-2602 d. e-mail martha.amundsen@i	808-221		801-693-2900	
5. Location of plant involved (street. city, state and ZIP code) Westover Job Corps Center 103 Johnson Rd. Chicopee, MA 01022			6. Employ Martha J	er representat . Amundsen id Employme		
7. Type of establishment (factory, mine, wholesaler, etc.) Services to prime contractor at a U.S. Job Corps Center		tify principal product or service 9. Number of workers employed out for Educational Services 40.			of workers employed	
10. Full name of party filing charge Martha J. Amundsen	<u> </u>			,		
11. Address of party filing charge (street, city, state and ZIP code)		11a. Tel. No. 801-693 - 2602	b. Cell No. c. Fax No. 808-221-0909 801-693-2900		c. Fax No. 801-693-2900	
500 N. Marketplace Dr., Centerville, UT 84014 d. e-mail martha.amundsen@mtctrains.com						
12. DECLARATION I declare that I have read the above charge and that the statements gre true to the best of my knowledge and belief.		Tel. No. 801-693-2602 Cell No.)2		
(signature of reprosentative or person making charge)	sel	en, Labor and Employme		808-221-090 Fax No.		
801-693-2900 801-693-2900			ndsen@mtctrains.com			

WILLFUL FALSE STATEMENTS ON THIS CHARGE 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 unfair labor practice 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.

FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TORNI EXCINIT I GINDER 44 0.3.C 3312	
DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
01-CB-231664	Nov. 27, 2018	

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

143 170 C 110143. The an original with 1421/2 Regional Director for the	region in which the alleged u	man labo	n prac	aice occurre	d or is occurring.		
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARG	E IS E	BROUGHT			
Name International Union, Security, Police & Fire Professionals of America (SPFPA)			b. Union Representative to contact				
			David Hickey				
		Title: President / Organizing Director					
c. Address (Street, city, state, and ZIP code)		d. Tel. l	No.		e. Cell No.		
25510 Kally Bd		(800) 2:	28-74	92	(586) 709-9563		
25510 Kelly Rd MI Roseville 48066-4994		f. Fax No.			g. e-Mail		
		(586) 77	72-96	14	DLHICKEY01@AOL.COM		
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the A meaning of the Act and the Postal Reorganization Act.							
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair la	bor p	ractices)			
See additional page					;		
					!		
3. Name of Employer			No.	50	b. Cell No.		
Blue Tarp Redevelopment LLC D/B/A/ MGM Springfield		c. Fax 1			(301) 265-6392 d. e-Mail		
		G. Tax Ho.			jrucker@mgmspringfield.com		
5. Location of plant involved (street, city, state and ZIP code)				6. Employe Jason Rue	er representative to contact		
One MGM Way, MA Springfield 01103					urity Director		
7. Type of establishment (factory, mine, wholesaler, etc.)	Identify principal product	or conde		Number of workers employed			
•	Casino & Gaming	oi seivia	200		or workers employed		
Casinos & Gaming	Casillo & Garring	11a To	l No	200	b. Cell No.		
10. Full name of party filing charge		11a. Tel. No. (202) 595-3510			(202) 486-8558		
Steve Maritas Law Enforcement Officers Security Unions LEOSU, LEOS-PBA		c. Fax No.			d. e-Mail		
			95-35°	10	LEOSUNIONS@GMAIL.COM		
11. Address of party filing charge (street, city, state and ZIP code.) 1155 F St NW Ste 1050	!	<u> </u>		<u>.</u>			
DC Washington 20004-	,						
12. DECLARATION declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.			Tel. No. (202) 595-3510				
Steve Maritas Steve Maritas			Cell No.				
(signature of representative or person making charge) (Print/type	1)	(202) 486-8558					
Title: Organizing Director				Fax No. (202) 595-3510			
1155 F St NW Ste 1050 Washington DC 20004-					e-Mail LEOSUNIONS@GMAIL.COM		
Address	Mashington DC 20004(date) 11/27/2018 11:54:5						

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

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8(b)(1)(A)

Within the previous six months, the above-named labor organization has restrained and coerced employees in the exercise of rights

protected by Section 7 of the Act by threatening to retaliate against employees if they did not join or support the union.

Name of the Union Agent/Representative who made the threat	Date the threats were made			
SPFPA(b) (6), (b) (7)(C)	11/27/18			
SPFPA(b) (6), (b) (7)(C)	11/27/18			
SPFPA Agents & Represenatives	11/27/18			

FORM NLRE-508 (6-18)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE					
Case	Date Filed				
01-CB-232102	11/30/2018				

INSTRUCTIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1

1. LABOR ORGANIZATION OR	ITS AGENTS	AGAINST WHICH CHAR	GE IS BROL	IGHT			
Name American Postal Workers Union Local 497 Member AFL-CIO			b. Union Representative to contact Richard Peabody				
c. Address (Street, city, state, and 2IP code) 1124 Berkshire Ave Springfield, MA 01151		(413)543-	d. Tel. No. (413)543-1146 e. Cell No.				
			g. e-mail spwu497@gmail.com				
h. The above-named labor organization has engaged in and is english subsections) (1)(A) practices are practices affecting commerce within the meaning the Act and the Postal Reorganization Act.		of the Natio	nal Labor Ro	elations Act, a	and these unfair labor		
 Basis of the Charge (set forth a clear and concise statement of On 11/07/18, the APWU has failed to represent me for 	the facts const promotional	iluting the alleged unlair i opportunity.	labor practice	es)			
3. Name of Employer		4a. Tel. No.	b. Cell No.	·	c. Fex No.		
United States Postal Service	(413)785-6311 d. e-mail						
5. Location of plant involved (street, city, state and ZIP code) 190 Fiberloid St., Springfield, MA 01151	(e)			Employer representative to contact Eric Koestner			
7. Type of establishment (factory, mine, wholesaler, etc.) Postal Installation	8. Identify p U.S. Mail	rincipal product or service	e e	9. Number Approx. 4	of workers employed 00 +		
10. Full name of party filing charge (b) (6), (b) (7)(C)							
11. Address of party filing charge (street, city, state and ZIP code) (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No.		c. Fax No.		
		d. e-mail (b) (6), (b) (7)(C)				
DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.			10	Tel. No. (b) (6), (b) (7)(C)			
(b) (6), (b) (7)(C) (Print/type name and title or office, If any)				Cell Na.			
	Fax No.						
Address (b) (6), (b) (7)(C)	Date Nov 21, 2018			e-mall (b) (6), (b) (7)(C)			

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

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