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-247582	Date Filed 9/3/2019	

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	oresentative	to contact
Unite Here Local 26		Brian Lan	g	
		Title: Pres	ident	
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
101 Station Landing 4th Floor		(617) 832-60	699	
MA Medford 02155		f. Fax No.		g. e-Mail
				info@local26.org
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 Ac meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor Re	lations Act, a	and these unfair labor practices
Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor i	practices)	
2. Basis of the original foot forth a great and consider statement of the	radio deriodicaling the alleged	a uman labor j	ordotrocoy	
See additional page				
3. Name of Employer		4a. Tel. No.		b. Cell No.
Aramark		- FN-		
		c. Fax No.		d. e-Mail
				barry-joanne@aramark.com
5. Location of plant involved (street, city, state and ZIP code)				er representative to contact
12 Lansdowne			Joanne B	•
MA Boston 02215			Title: Hun	nan Resources Manager
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed
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)				
40. REGUARATION		Tol	No.	
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		(b) (6), (b	o) (7)(C)
(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Cell	No.	
	name and title or office, if any		N-	
	Title:	∣⊦ax	No.	
(b) (6), (b) (7)(C)		e-M	1ail	
Address	(date)_09/1/2019	21 36:12	(b) (6)), (b) (7)(C)
	(ddto)			

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.

Basis of the Charge

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
(b) (6), (b) (7)(C)	on or near 8/9/19

UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE		
NATIONAL LABOR RELATIONS BOARD		Case	Date filed	
CHARGE AGAINST LABOR ORGANIZATION	N OR ITS			
AGENTS		01-CB-247702	9/5/2019	
INSTRUCTIONS: File an original of this charge with the	e NLRB Regional Di	ector of the region in which	n the alleged unfair labor practice	
occurred or is occurring.	OR ITS AGENTS AGA	INST WHICH CHARGE IS BRO	NICHT	
a. Name	ON ITO AGENTO AGA	b. Union Representative to		
PIPEFITTERS ASSOCIATION OF BOSTON	. LOCAL 537.			
AW UNITED ASSOCIATION OF JOURNEY		Paul Campbell, Bus	iness Manager	
APPRENTICES OF THE PLUMBING AND P	PIPEFITTING			
INDUSTRY OF THE UNITED STATES AND				
c. Address		d. Tel. No.	e. Cell No.	
35 Travis St Unit 1, Allston, MA 02134-1251		(617)767-5370		
		f. Fax No.	g. e-Mail	
		(617)767-5373		
h. The above-named labor organization or its agents have	e engaged in and are	engaging in unfair labor pract	ices within the meaning of section	
8(b), subsection(s)(1)(A) of the National Labor Relation				
meaning of the Act, or are unfair practices affecting cor 2. Basis of the Charge (set forth a clear and concise state				
2. Dasis of the Charge (set forth a clear and concise state	ineni or the racis cons	thating the aneged uman labo	practices)	
During the past six months, the Union has de	enied me employn	nent opportunities in vio	lation of its duty of fair	
representation.				
·				
Name of Employer		4a. Tel. No.	4b. Cell No.	
Various Employers		4a. Tel. No.	4b. Cell No.	
various Employers	1	4c. Fax No.	4d. e-Mail	
•		70. Tax 110.	4d. C-Iviali	
5. Location of Plant involved (street, city, state, and ZIP co	ade)	Employer representative to the second s	to contact	
	Jue,	o. Employer representative i	o contact	
VARIOUS	O Drive in all accordant			
7. Type of Establishment (factory, mine, wholesaler)	Principal product	or service	Number of Workers employed	
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)		
		11c. Fax No.	11d e-Mail	
•		110.1 42.110.	Tra Citian	
11. Address of party filing charge (street, city, state, and Zi	IP code)			
	•	-		
(b) (6), (b) (7)(C)	12. DECLARATI	ON		
(h) (0) (h) (7)(0)				
(b) (6), (b) (7)(C) harge and	that the statements	herein are true to the best	of my knowledge and belief. Tel No.	
			Terrio.	
Ву	(b) (6), (b)	(7)(C)	(b) (6), (b) (7)(C)	
(si		e and title or office, if any	Cell No.	
inalge),	1 motype nam	o and this or office, it ally		
Address:		Date:	Fax No.	
Same as above		Date.		
Came as above			e-Mail	
		 		

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UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE			
NATIONAL LABOR RELATIONS BOARD		Case	Date filed		
CHARGE AGAINST LABOR ORGANIZATION AGENTS		01-CB-247982	Sept. 10, 2019		
INSTRUCTIONS: File an original of this charge with the NLRB Regional Director of the region in which the alleged unfair labor practice occurred or is occurring.					
	OR ITS AGENTS AGA	INST WHICH CHARGE IS BRO	DUGHT		
a. Name American Postal Workers Union Local 497		(b) (6), (b) (7)(C)	Contact		
c. Address 1124 Berkshire Ave., Springfield, MA 01151		d. Tel. No.	e.e. Cell No:		
1124 Berkshire Ave., Springrielo, WA 01151		(413)543-1146 1. Fex No.	g. e Mail		
		(413)543-1007	1		
h. The above-named labor organization or its agents have engaged in and are engaging in unfair labor practices within the meaning of section 8(b)(1)(A) of the National Labor Relations Act, and these unfair labor practices are unfair practices affecting commerce within the meaning of the Act, or 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 the facts constituting the affected unfair labor practices) Since about 2019 and continuing, 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 grievance of (b) (b) (7)(C) regarding seniority date for arbitrary or discriminatory reasons or in bad faith.					
3. Name of Employer USPS		42. Tel. No.	4b. Cell No.		
		4c. Fax Nó.	4d. e-Mail		
5. Location of Plant involved (street, city, state, and ZIP c	ode)	6. Employer representative to contact			
1883 Main Street, Springfield, MA 01151		Derek Mitchell Posts	naster		
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	Number of Workers employed		
Post Office	Mail delivery		150		
10. Full name of party filing charge (b) (6), (b) (7)(C)	,	11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No. (b) (6), (b) (7)(C)		
_		11c. Fax No.	(b) (6), (b) (7)(C)		
11. Address of party filing charge (streat, city, state, and Z	IP code)	,			
(b) (6), (b) (7)(C)	12. DEGLARAT	ION			
I declare that I have read the above charge and			of my knowledge and belief.		
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)			Tel No:		
By:) (7)(C) Individual	(b) (6), (b) (7)(C)		
(sibarge)	Printippe nam	ne and the or office, if any	Cell No. (b) (6), (b) (7)(C)		
Address: (b) (6), (b) (7)(C)	•	Date:	Fax No.		
		17/10/19	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)

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[Disclosure of this information will cause the NLRB to decline to invoke its processes.

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FORM NLRB-508 (4-19)

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-248083	9-10-19

INSTRUCTIONS: File an original with NLR8 Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

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S AGAINST WHICH CHARG	E IS BROUGHT	
	 Union Representative 	to contact
YEES		
	d. Tel. No. 860	e. Cell No. 660
Į	B24-4000	989 9133
	f, Fax. No.	
ļ	860 224 3	041
	g. e-mall	,
	abentoeco	uncily.org
of the Nation of the Nation	meaning or section 8(b) at Labor Relations Act, a affecting commerce with	and (list subsections) [[4] and these unfair labor ain the meaning of
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•		
DEMOTE ME	75 My	LURRENT
4a. Tel. No. 960	b. Cell No. Sec. O	c. Fax No. 860
224.4000	B19 -3639	224.3041
d. e-mail		
1 Darre	COUNCILY.O	rq
	6. Employer representat	tvd to contact
AN, CT. 06051	JODY BA	RR
principal product or service	9. Number	of workers employed
W KEPRESONTA	TION	48
	(b) (6), (b) (7)(C)	
11a. Tel. No. 860	b. Cell No.	c. Fax No. 860
224-4000		224-3041
d. e-mall (b) (6), (b) (7)(0		
ne statements	1	
(C) (b) (6), (b) (7)(C)	Cell No.	
name and title or office. If any)		
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T Date 12 Aug 1	9 e-mail	
	fair labor practices within the of the Nation of the Natio	### ### ##############################

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 NLRB-508 (4-19)

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-248158	9/10/19		

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 ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT a. Name b. Union Representative to contact **UNITE HERE Local 217** Connie Holt, Secretary Treasurer c. Address (Street, city, state, and ZIP code) d. Tel. No. e. Cell No. 425 College Street 203-865-3259 New Haven, CT 06511 f. Fax. No. o. e-mail h. The above-named labor organization has engaged in and is engaging in unfair labor practices within the meaning of section 8(b) and (list subsections) (1)(A)of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor 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 the facts constituting the alleged unfair labor practices) Within the previous six months, the above-named labor organization has restrained and coerced employees of Sodexo in the exercise of rights protected by Section 7 of the Act by charging excessive dues rates. 3. Name of Employer 4a. Tel. No. b. Cell No. c. Fax No. Sodexo 203-837-8670 d. e-mail Location of plant involved (street, city, state and ZIP code)
 White Street, Danbury, CT 06810 Employer representative to contact Don Grayson, General Manager

7. Type of establishment (factory, mine, wholesaler, etc.) Dining Hall	Identify principal product or sen Food Service	rice	9. Number of workers employed 70+
10. Full name of party filing charge (b) (6), (b) (7)(C)			J
11. Address of party filing charge (street, city, state and ZIP code) (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	b. Cell No.	c. Fax No.
	d. e-mail		

12. DECLARATION

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

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

(signature of representations or person making charge)

(Print/type name and title or office, if any)

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

Cell No.

Fax No.

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

Date 9/10/19

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

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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-248266	9/13/2019

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

a. Name United Steel Workers, L., 900. c. Address (Street, city, state, and ZIP code) D. Union Representative to contact Cary (tewningway, Pres.) d. Tel. No. 207-364-596 2.07357 1710 B. Fax No. C. Address (Street, city, state, and ZIP code) D. 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), lift subsection(s) and section(s). D. 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), or the National Labor Relations Act, and these unfair labor practices are unfair processes allocation commerce within the meaning of the Act, or these unfair labor practices are unfair processes allocation and concisions statement of the facts constituting the alleged unfair factor practices. During the past dix months, the Union has finited its outsy of fair representative to contact Tepresentation by fair unvolved (street, city, state and ZIP code) 3. Name of Employer N. D. Paper 3. Name of Employer N. D. Paper 4a. Tel No. 20.7-369-3298 4a. Tel No. 4c. edital 4c.			A CHADGE 16 (PROJECUT
United Steel Workers, L. 900 C. Address (Street, city, state, and ZIP code) C. Fax No. C. Cell No. C. Fax No. C. Cell No. C.		S AGENTS AGAINST WHIC		
Remove named organization(s) or its agents has (have) engaged in and is (are) engaging in unfair labor practices within the meaning of section &(b), subsection(s). If sax No. 1. Fax No.			1 '	
Remoters we out a the process of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) During the past six months; the Union has failed its description. 3. Name of Employer ND Paper 3. Name of Employer 3. Name of Employer ND Paper 3. Name of Employer 3. Name of Employer	c. Address (Street. city. state. and ZIP code)		d. Tel. No.	e. Cell No.
h. The above-named organization(s) or its gents has (have) engaged in and is (are) engaging in unfair labor practices within the meaning of section 8(b), subsection(s) [itst subsection(s)] 1. A. and these unifair patients affecting commerce within the meaning of the Act, or these unifair patients affecting commerce within the meaning of the Act, or these unifair patients affecting commerce within the meaning of the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and conceives statement of the fects constituting the alleged unfair labor practices) During the past six months; the Union has failed its other of fair sepresentation by failing to procees a grievance in a timely manner. 3. Name of Employer ND Paper 3. Name of Employer ND Paper 3. Name of Employer ND Paper 4. Tel No. 4. Tel No. 5. Location of plant involved (street, city, state and ZIP code) 7. Type of establishment (factory, mine, wholesaler, etc.) 7. Type of establishment (factory, mine, wholesaler, etc.) 8. Identify principal product or service Paper Mill 1. Address of party filing charge (b) (6), (b) (7)(c) 1. Decl. Ray (b) (7)(c) 1. Decl. Ray (b) (7)(c) 1. Decl. Ray (c) (c) (d), (b) (7)(c) 1. Decl. Ray (c) (d), (d), (d), (d), (d), (d), (d), (d)			207-364	
subsection(s) (list subsections) 1. At a continuous commerce within the meaning of the Act, or these unfair labor 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 the facts constituting the alleged unfair labor practices) During the past Six Months, the Union has finited its duty of fair representation by failing to procees a gricovance in a finely manner. 3. Name of Employer ND Paper 3. Name of Employer ND Paper 4a. Tel. No. 201-246-2235 C. Fax No. 4a. Tel. No. 201-364-2276 C. Fax No. 6. Employer representative to contact Tank 1 So Ky. 7. Type of establishment (factory, mine, wholesaler, etc.) Paper Will 10. Full name of party filing charge (DYO) (DYO) (DYO) (DYO) (DYO) (DYO) (DYO) (DYO) (DYO) (DYO) (DYO) (DYO) (DYO)			f. Fax No.	g. e-Mail
During the past six months, the Union has failed its duty of fair representation by failing to process a grievance in a timely manner. 3. Name of Employer ND Paper S. Location of plant involved (street, city, state and ZIP code) Tanet So Ski 7. Type of establishment (factory, mine, wholesaler, etc.) Paper Mill Tanet So Ski Tanet So Ski Tanet So Ski 11. Address of party filing charge (D)(6), (b) (7)(C) (D) (6), (b) (7)(C) (D) (C) (D) (C) (D) (C) (C) (D) (C) (D) (C) (D) (C) (C) (D) (E) (D) (F)(C) (D) (E) (D) (E) (D) (E) (D) (E) (D) (E) (D)	subsection(s) (list subsections) 4 A are unfair practices affecting commerce within the meaning of the A	of the Na	ational Labor Rel	ations Act, and these unfair labor practices
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3. Name of Employer ND Paper 4a. Tel. No. 2017-249-2305 3. Scell No. 2017-364-2305 3. C. Fax No. 2018-364-2305 3. C. Fax No. 4. C. Fax No. 5. Cell No. 6. Employer representative to contact Translative to co	representation by failing to proce	ess a grievar	ue in a	Amely manner.
3. Name of Employer ND Paper 14. Tel. No. 207-369-2305 207-364-950 15. Location of plant involved (street, city, state and ZIP code) 25. Location of plant involved (street, city, state and ZIP code) 35. Location of plant involved (street, city, state and ZIP code) 36. Employer representative to contact 37. Type of establishment (factory, mine, wholesaler, etc.) 38. Identify principal product or service 39. Number of workers employed 200 10. Full name of party filing charge (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (c) Fax No. 11. Address of party filing charge (street city state and ZIP code.) (b) (6), (b) (7)(C) (c) Fax No. (d) (e) (f) (f) (f) (f) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	prostatilities of	J		/
3. Name of Employer ND Paper 14. Tel. No. 207-369-2365 3. Employer representative to contact 3. Location of plant involved (street, city, state and ZIP code) 3. Location of plant involved (street, city, state and ZIP code) 3. Location of plant involved (street, city, state and ZIP code) 3. Location of plant involved (street, city, state and ZIP code) 4. Tel. No. 4. Employer representative to contact 3. Type of establishment (factory, mine, wholesaler, etc.) 4. Description of plant involved (street city, state and ZIP code) 4. Tel. No. 5. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 8. Identify principal product or service 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 7. Type of establishment (factory, mine, wholesaler, etc.) 9. Number of workers employed 6. Employer representative to contact 6. Employer representative to contact 9. Number of workers employed 6. Employer representative to contact 9				
3. Name of Employer ND Paper 14. Tel. No. 207-369-2365 C. Fax No. 5. Location of plant involved (street, city, state and ZIP code) 3. Type of establishment (factory, mine, wholesaler, etc.) 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 11. Address of party filing charge (street city state and ZIP code.) (b) (6), (b) (7)(C) (c) Fax No. (d) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f				
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Address (date) 4-5-10	5. Location of plant involved (street, city, state and ZIP code) 35 fartford St., Rumford ME 7. Type of establishment (factory, mine, wholesaler, etc.) Paper Mill 10. Full name of party filing charge (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 11. Address of party filing charge (street city state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION ements therein (b) (6), By (sis	8. Identify principal production page: Production (b) (6), (b) (7)(c) (b) (6), (b) (7)(c) (c) (d) (d), (e) (d) (d), (e) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	4a. Tel. No. 207-369 c. Fax No. ct or service (b) (6), (b) c. Fax No.	b. Cell No. 364-950 d. e-Mail 6. Employer representative to contact Janet Iso S K 9. Number of workers employed 600 b. Cell No. (7)(C) d. e-Mail
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	5. Location of plant involved (street, city, state and ZIP code) 35 fartford St., Rumford ME 7. Type of establishment (factory, mine, wholesaler, etc.) Paper Will 10. Full name of party filing charge (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 11. Address of party filing charge (street city state and ZIP code.) (b) (6), (b) (7)(C) (c) (b) (6), (b) (7)(C) 12. DECLARATION ements therein (b) (6), By (signature (street city state and ZIP code.) (c) (c) (d) (d), (d) (d), (e) (f), (f), (f), (f), (f), (f), (f), (f)	8. Identify principal production pager production (b) (6), (b) (7)(c) (b) (6), (b) (7)(c) (c) (d) (d), (e) (d) (d)	4a. Tel. No. 207-369 c. Fax No. ct or service (b) (6), (b) c. Fax No. (b) (C) (c)	b. Cell No. 364-950 d. e-Mail 6. Employer representative to contact Janet Isoski 9. Number of workers employed 600 b. Cell No. 17)(C) d. 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 will cause the NLRB to decline to invoke its processes.

FORM NLRB-508 (4-19)

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-248308	9/16/19

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

1 LAPOR ORGANIZATION OF						
1. LABOR ORGANIZATION OF a. Name	CIIS AGENIS	AGAINST WHICH CHAR				
Amalgamated Transit Union, AFL-CIO, Local 443			Veronica	epresentative Chavers	to contact	
c. Address (Street, city, state, and ZIP code) 447 Glenbrook Road			d. Tel. No. *301-431		e. Celi No.	
Stamford, CT 06906 * International Headquarters- Amalgamated Transit Unio Silver Spring, MD 20903	al Headquarters- Amalgamated Transit Union 1000 New Hampshire Avenue		f, Fax, No. *301-431-7117			
., <i>u</i> ,, = =			g. e-mail			
h. The above-named labor organization has engaged in and is engled (b) (1) (A), (b) (2) practices are practices affecting commerce within the meaning the Act and the Postal Reorganization Act.		of the Natio	nal Labor R	elations Act, a	nd these unfair labor	
threatened petitioner's job by advising could be "gon- employer, CT Transit's "Supervisor's Training Program" into to represent the restoration of employee certified and first class letters to the the Union representant not returned.	(hereinafter, Syment to the S	STP) without a reason STP. Petioner after rec	given. Peti civing no n	tioner reque esponse had	sted the assistance of ttorney mail	
3. Name of Employer		4a. Tel. No.	b. Cell No.		c. Fax No.	
Connecticut Transit		203-327-7433 d. e-mail	<u></u>			
5. Location of plant involved (street, city, state and ZIP code) 30 Station Place Stamford, CT 06902			Hector B	er representati etancourt ivera -left co	ompany 5/15/2019	
7. Type of establishment (factory, mine, wholesaler, etc.) Bus Company		rincipal product or service	<u></u>	9. Number of 100-150	of workers employed	
10. Full name of party filing charge (b) (6), (b) (7)(C)		,				
11. Address of party filing charge (street, city, state and ZIP code)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No.		c. Fax No.	
(b) (6), (b) (7)(C)		d. e-mail (b) (6), (b) (7)(C				
12. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.				Tel. No. 203-838-5566		
	tty. Allen L. Williams, III, LLC, Attorney			4		
(signature of representative or person making charge)	(Print/type name and title or office, if any) Fax No. 1-203-286-1916			916		
9 Mott Avenue, Suite 310, Norwalk, CT 06850 Date 09/13/2019			e-mail allenlwilliamsiii@yahoo.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.

UNITED STATES OF AMERICA	DO NOT WRITE IN THIS SPACE			
NATIONAL LABOR RELATIONS BOARD	Case	Date filed		
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS	01-CB-248403	Sept. 17, 2019		
INSTRUCTIONS: File an original of this charge with the NLRB Regional Doccurred or is occurring.	irector of the region in whi	ch the alleged unfair labor practice		
LABOR ORGANIZATION OR ITS AGENTS AGA	INST WHICH CHARGE IS BR	OUGHT		
a. Name UNITE HERE Local 34	b. Union Representative to Contact President Laurie Kennington			
c. Address\	d. Tel. No. (203) 865-3529	e.e. Cell No.		
25 College St, New Haven, CT 06511	f. Fax No. (203)	g. e-Mail		
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 unthe meaning of the Act, or are unfair practices affecting commerce within the	fair labor practices are unfair	practices affecting commerce within		
2. Basis of the Charge (set forth a clear and concise statement of the facts con	nstituting the alleged unfair la	bor practices)		
Since on or about (b) (6). (b) (7)(C) 2019, UNITE HERE, Local during meetings about (a) layoff from (b) position in the discriminatory reasons.				

3. Name of Employer		4a. Tel. No. (203) 562-2221	4b. Cell No.
Yale University (TAC Center)		4c. Fax No	4d. e-Maiil
5. Location of Plant involved (street, city, state, and ZIP co	ode)	6. Employer representative	e to contact
155 Whitney Avenue, New Haven 06511		Donna Espenberg	
7. Type of Establishment (factory, mine, wholesaler)	Principal product or service		Number of Workers employed
University	Academics		
10. Full name of party filing charge	, , , , , ,	11a. Tel. No. (b) (6), (b) (7)(C)	Cell No. (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 Z	(IP code)		
155 Whitney Avenue, New Haven 06511			
,	12. DECLARATI	ION	
I declare that I have read the above charge and	that the statements	therein are true to the bes	
			Tel No.
(b) (6), (b) (7)(C) (b) (6), (b) (6), (b) (7)(C)	(b) (6), (b) (7)	all illuividual	(b) (6), (b) (7)(C)
(sig	Print/type name and title or office, if any		(b) (6), (b) (7)(C)
Address:		Date:	Fax No.
155 Whitney Avenue, New Haven 06511		9/16/19	e-Mail
			1

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.

UNITED STATES OF AMERICA

NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE I	N THIS SPACE
Case	Date Filed
01-CB-248495	9/18/19

INSTRUCTIONS: File an original with NLRB Regional Director for the	e region in wh	ich the alleged unfair	abor practice	occurred or is	occurring.
1. LABOR ORGANIZATION OR IT	S AGENTS A	AGAINST WHICH CHA	RGE IS BRO	UGHT	
a Name. International Longshoreman's Association, Local 1329 (the "Union")			Corey 1	Representativ Tabor nt/Dispatche	
c. Address (Street, city, state, and ZIP code) Physical Address:			d. Tel. I 401-94	No. 1-6108	e Cell No. 401-952-7134
1157 Eddy St					
Providence, RI 02905			f. Fax. f	40.	
Mailing Address:			g. e-ma	ıil	
PO Box 2036			coreyt.	7155@gmail.	com
Providence, RI 02905-0036		late a same and a same and a same a			
h. The above-named labor organization has engaged in and is engaged subsections) (1)(A), (2)	ging in unfair i	'			and these unfair labor
practices are practices affecting commerce within the meaning of	the Act, or the	* *			
the Act and the Postal Reorganization Act.	· · ·	, , , , , , , , , , , , , , , , , , , ,	J		g
2 Basis of the Charge (set forth a clear and concise statement of the	e facts constit	tuting the alleged unfai	r labor practio	es)	
Within the previous six months, the above-named labor org protected by Section 7 of the Act by operating a hiring hall					
Within the previous six months, and continuing, the Union vio	lated its refe	rral rules regarding	non-member	"dollar-a-day	" workers.
On September 18, 2019, the Union, through its agents and/or of publicly for engaging in protected and concerted activities, inclinvestigation, and for filing charges with the Board. The Union exercising their Section 7 rights. This conduct has a substantial additional retaliation.	luding seeki	ng assistance from t	ne Board by	participating	in an ongoing
The charging party requests all appropriate relief under Section	10(j) of the	Act.			
3. Name of Employer		4a. Tel. No.	b. Cell I	10.	c. Fax No.
Various Employers		d. e-mail	l		<u> </u>
5. Location of plant involved (street, city, state and ZIP code)			6. Emplo	oyer representa	itive to contact
7. Type of establishment (factory, mine, wholesaler, etc.) Port Cargo Transportation	8. Identify p	rincipal product or sen	vice	9. Number	of workers employed
10. Full name of party filing charge	1.510111001				
(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. Cell (b) (6), (l	o) (7)(C)	c. Fax No. (b) (6), (b) (7)(C)
		d. e-mail (b) (6), (b) (7)(C)			
(b) (6) (b) (7)(C)				Tal No	
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (ARATION (b) (6), (b) (7)(C) (c) (c) (c) (c) (d) (d) (d) (d) (d) (d) (d) (d) (d) (d	and that the	statements		Tel. No.	
(b) (c) (b) (7)(c) contradiction					
		ame and title or office, if a	ny)	(b) (6), (b) (7)(Fax No.	
		ja 1		(b) (6), (b) (7)(C)
Address (b) (6), (b) (7)(C)	Da	ite 9 / 8/	19_	e-mail (b) (6), (b) (7	7)(C)

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-248628	9/20/2019				

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 CHAR	CE IS BROUGHT	
a. Name	S AGENTS AGAINST WHICH CHAR	b. Union Representativ	a to contact
Teamsterg Local 653		1 .	w. Clark
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	e. Cell No.
		(508/807-767	7
4A Hampden Drive		f. Fax. No.	
South Easton, MA 02375		(508) 230	2417 -0
11 = 12,0M) 11H 043/15		g. e-mail	653,000
· · · · · · · · · · · · · · · · · · ·		mike.c@t	eamsters local
h. The above-named labor organization has engaged in and is enga	•	e meaning of section 8(b) and (list subsections)
practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.		nal Labor Relations Act, s affecting commerce wit	
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged unfair	labor practices)	
From the intended of scheduling a once (b) (6), (b) (7)(c) to bring about a red	and Co-worker (b) (ting as promised resolution, (Please	allowed. 6), (b) (7)(C) to e uth anywelf, see attach le	harasement scalate and Her)
3. Name of Employer	4a, Tel. No.	b. Cell No.	c. Fax No.
Lucini, Bus company	584-3181 d. e-mail	<u> </u>	
5. Location of plant involved (street, city, state and ZIP code)	WITHOUTH	6. Employer representa	J 5 CO M
5. Education of plant involved (Sireer, dity, State and Zir Code)		o. Linging or represent	5417 10 00 mao.
East Bridgewater, MA			
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product or service	e 9. Numbe	r of workers employed
School Bus Industry			
10. Full name of party filing charge (b) (6), (b) (7)(c) (b) (6), (b) (7)(C)			
11. Address of party filling ch (b) (6), (b) (7)(C)	11a. Tel. No.	b. Cell No. (b) (6), (b) (7)(C	c. Fax No.
(b) (6), (b) (7)(C)	d, e-mail (b) (6), (b) (7)(C)		
12. DECLARATION			
l declare that I have read the above charge (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	and that the statements (b) (6)	(b) (7)(C)	
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)), (b) (7)(C) (b) (6), (b) (7)(C)	Cell No.	
	/Orient/hung		
n making charge)	(Print/type ce, if any)	Fax No.	
Address	Date 9-9- 20	19 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

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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-248898	9/26/2019			

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	nfair labor pra	ctice occurr	ed or is occurring.	
1. LABOR ORGANIZATION OR IT	S AGENTS AGAINST WHICH	CHARGE IS	BROUGHT		
a. Name		b. Union Rep	resentative	to contact	
AFSCME, Council 93		Mark Bernard, Executive Director			
		}			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.	
8 Beacon St., Boston, MA, 02108		617-367-6	5000		
		f. Fax No.		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.	of the Alette	and Labor Dal	ations Ast s	and those wefair labor are ations	
2. Basis of the Charge (set forth a clear and concise statement of th	e facts constituting the alleged	d unfair labor p	ractices)	,	
In the past six months, the Union has failed to represen	(b) (6), (b) (7)(C) _{by n}	ot taking	ermina	tion grievance to	
arbitration.	,			J	
•					
•					
3. Name of Employer		4a, Tel. No.		b. Cell No.	
Boston Medical Center		617-414-7	130		
		c. Fax No.	•	d. e-Mail	
			-	john.hickey@bmc.org	
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	er representative to contact	
One Boston Medical Center Place, Boston, MA 02118			John Hid	ckey, Director of Labor	
			Relation	s .	
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed	
Hospital	Healthcare		3000		
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)	-1				
					
declare (b) (6), (b) (7)(C) and (b) (6), (b) (7)(C) ere in are true to	the best of my knowledge and belie	Tel.	No. (b) (6), ((b) (7)(C)	
(b) (6) (Cell			
(Signature or representative or person making charge) (Print/type		-			
		Fax	No.		
(b) (c) (b) (7)(c)		-	ail mark		
(b) (6), (b) (7)(C)	(date) 9 - 2	Lep B	ati (b) (6),	(b) (7)(C)	
Address	(date)1 &	10-07			

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 LINDER 44 LLS C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

		TOTAL EXEMIT TOTALER 44 0.0.0 0012			
DO NOT WRITE IN THIS SPACE					
Case	01-CB-248983	Date Filed 9/26/2019			

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	S AGENTS AGAINST WHICH			
a. Name		b. Union Rep	resentative	to contact
american postal workers union		dana clolle	eeti	
		Title: pres	local 230 m	nanchester nh
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
450 hanover st manchester nh 03104		(603) 644-40	98	
NH manchester 03104		f. Fax No.		g. e-Mail
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A), (2), (3) are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor Rel	ations Act, a	and 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 labor p	oractices)	
See additional page				
- oce additional page-				
3. Name of Employer		4a. Tel. No.		b. Cell No.
apwu manchester nh		c. Fax No.		d. e-Mail
Location of plant involved (street, city, state and ZIP code)			6. Employ	rer representative to contact
350 hanover st				
NH manchster 03104			Title: man	chster apwu pres/ e -board members
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	r of workers employed
Basic Materials	mail		2	
10. Full name of party filing charge		11a. Tel. No.		b. Cell No.
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(c. Fax No.	(C)	(b) (6), (b) (7)(C) d. e-Mail
		C. Fax NO.		(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)				(e) (e) (e) (e) (e)
		1		
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to			(b) (6), (b	o) (7)(C)
By (signature of representative or person making charge) (Print/type	(b) (6), (b) (7)(C)	Cell	No. (b) (6), (b)	o) (7)(C)
(Signature of representative of person making charge) (PHIII/I)pe	Title:	Fax		_
(b) (6), (b) (7)(C)		e-M	ail	
Address	(date)_09/26/201	9 16:14:40	(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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Basis of the Charge

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.

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.



UNITED STATES OF AMERICA

NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST LABOR ORGANIZATION**

FORM EXEMPT UNDER 44 U.S.C 3512 DO NOT WRITE IN THIS SPACE Case Date Filed 01-CB-248991 9/27/2019

OR ITS AGENTS

INSTRUCTIONS: File an original with NLRB Regional Director for th	e region in which the alleged u	infair labor pra	actice occur	red or is occurring.	
1. LABOR ORGANIZATION OR IT	S AGENTS AGAINST WHICH	CHARGE IS	BROUGHT		
a. Name b. Union Representative to contact					
Teamsters, Local 653	Teamsters, Local 653		Brian Voci, Business Agent		
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	J., Buo	oo rigoni	
		}			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.	
4-A Hampden Drive		508-230-	7140	San 110.	
S. Easton, MA 02375		f. Fax No.		g. e-Mail	
O. Laston, IVIA 02373		1			
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.	of the Natio	onal Labor Re	lations Act.	and these unfair labor practices	
2. Basis of the Charge (set forth a clear and concise statement of the	ne facts constituting the alleged	d unfair labor p	practices)		
Beginning or or about 2019, the Union, acting by	and through its agents o	r officers, b	reached i	its duty of fair	
representation in connection with grievances on my bel	nalf.				
3. Name of Employer Sysco Boston 5. Location of plant involved (street, city, state and ZIP code) 99Spring St., Plympton, MA 62367	-	4a. Tel. No. 781-422-2 c. Fax No. 877204	(6603	b. Coll No. 781-422-2369 d. e-Mail June + @ boston Sysa Ver representative to contact Human Ces / Jane + Dungan	
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed	
Distributor	Food products distribut	ion	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.	1	d. e-Mail	
(b) (6), (b) (7)(C)		·		(b) (6), (b) (7)(C)	
By(b) (6), (the best of my knowledge and belief (b) (7)(C) name and title or office, if any,	Cell	No. (b) (6),	(b) (7)(C)), (b) (7)(C)	
Address	(date)9/2				

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 NLRB-508 (4-19)

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

DO NOT WRITE IN THIS SPACE			
Case	01-CB-249130	Date Filed 9/30/19	

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 ITS AGENTS	AGAINST WHICH CHAR	GE IS BROUGHT	
a. Name		b. Union Representative	to contact
UGSON International 1	Inion	Desiree	Su // 1091
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	e. Cell No.
2879 Cranberry Highway:	M		303-842-9866
		f. Fax. No.	11
East 1 James bone 1M A an	デ ラク	Na 774-678	-4630
East Wareham, M.A. 02	J 3 8	g. e-mail	
h. The above-named labor organization has engaged in and is engaging in unfa	air labor practices within the	meaning of section 8(b)	and (list subsections)
	of the Natio	nal Labor Relations Act, a	nd these unfair labor
practices are practices affecting commerce within the meaning of the Act, or	these unfair labor practices	affecting commerce with	in the meaning of
the Act and the Postal Reorganization Act.			
2. Basis of the Charge (set forth a clear and concise statement of the facts cons	stituting the alleged unfair l	abor practices)	110 = 1
2. Basis of the Charge (set forth a clear and concise statement of the facts cons Age avoid Y Solutions USA which the on my behalf. Hool to use	maton ag	ainst G	45 Deurit
y Stutions USA which the	Union re	fuses to	grieve
balala la la Laure	the Folder	ra SEOC	instead,
on my Denoit Hon to use	,		
,			
3. Name of Employer	4a. Tel. No.	b. Cell No.	c. Fax No.
A v.	860-4471971		
G45 secure solutions USa	d. e-mail		
	Taylor, Me	6. Employer representati	ON ENCUEY YILLON
5. Location of plant involved (street, city, state and ZIP code)		Employer representation	ve to contact
Dominion Nuclear Conn Inc.	r	Taylor L. 1 845 Projec	Melton
314 Kope Ferry Kol,		845 Projec	t. Man
Water ford, Ct.06385		860-444-3	5424
7. Type of establishment (factory, prine, wholesaler, etc.) 8. Identity	principal product or ecryice	9: Number o	f workers employed
Ducteur Plant E	fection 10	wer 100	0 +
(b) (6), (b) (7)(C)			
11 Address of party him chame /street_city_state and ZIP code) (b) (6), (b) (7)(C)	11a. Tel. No.	b. Cell No.	c. Fax No.
	_	(b) (6), (b) (7)(C	
(b) (6), (b) (7)(C) (v), (v), (v) (7)(C)	(b) (6), (b) (7)(C)		
	(B) (O), (B) (1)(C)		
(b) (6), (b) (7)(C) DECLARATION a share and that the			
te above chame and that the st of my knd(b) (6), (b) (7	7)(C)		
st of my kind-7 (-7) (-7)	/	Cell No.	
		(b) (6), (b) (7)(C)
re) (Printitype n	name and title or office, if any)	Fax No.	
		:	
(b) (6), (b) (7)(C)	w litar	e-mail (b) (6), (b) (7)/0)
Address	Jake TO TO JO	<u>ペイフ (b) (6), (b) (</u>	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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