UNITED STATES OF AMERICA		DO NOT W	RITE IN THIS SPACE	
NATIONAL LABOR RELATIONS BOARD	)	Case	Date filed	
CHARGE AGAINST LABOR ORGANIZATION	OR ITS		0/12/2010	
AGENTS		29-CB-225546	8/13/2018	
INSTRUCTIONS: File an original of this charge with the occurred or is occurring.	e NLRB Regional I	Director of the region in whic	ch the alleged unfair labor practice	
	OR ITS AGENTS AG	AINST WHICH CHARGE IS BR	OUGHT	
a. Name		b. Union Representative to		
Local 808, International Brotherhood of Tear	nsters	Chris Silvera	_	
			-	
c. Address		d. Tel. No.	e. Cell No.	
22-43 Jackson Avenue		(718) 389-1900	e. Ceil 140.	
Long Island City, NY 11101		(710) 303-1300	g. e-Mail	
Long Island City, NY 11101		1. T AX NO.	g. e-wan	
h. The above-named labor organization or its agents have	engaged in and an	e engaging in unfair labor prac	tices 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				
2. Basis of the Charge (set forth a clear and concise state	ment of the facts co	nstituting the alleged unfair lab	or practices)	
Since about <sup>(b) (b) (c) (C)</sup> 2018, the above-name	ned labor organi	zation has restrained an	d coerced employees in the	
exercise of rights protected by Section 7 of				
regarding discharge for arbitrary or disc				
3. Name of Employer		4a. Tel. No.	4b. Cell No.	
ABM Aviation, Inc.				
		4c. Fax No.	4d. e-Mail	
5. Location of Plant involved (street, city, state, and ZIP co	ode)	6. Employer representative	to contact	
LaGuardia Airport, Terminal B,Queens, NY	,	Jeanine A. Scalero, Attorney		
		ocarinic 71. Ocalere	, valorioy	
Employer's Address:				
14141 Southwest Freeway, Suite 400				
Sugarland, TX 77478				
7. Type of Establishment (factory, mine, wholesaler)	8. Principal produ	ct or service	9. Number of Workers employed	
Airport service	Facilities clea	aning and maintenance	70	
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	
		11c. Fax No.	11d e-Mail	
		110. T 8X 140.	(b) (6), (b) (7)(C)	
11. Address of party filing charge (street, city, state, and ZI	P code)		(b)(0),(b)(1)(0)	
(b) (6), (b) (7)(C)		T/ON		
	12. DECLARA			
I declare that I have read the above charge and t	that the statement	s therein are true to the best		
			Tel No.	
(b) (6), (b) (7)(C)			· ·	
By:	(b) (6), (	b) (7)(C)	(b) (6), (b) (7)(C)	
(sig(b) ire of representative or per n making charge)	Print/type na	ame and title or office, if any	Cell No.	
		<u>.</u>	(b) (6), (b) (7)(C)	
Address:	Da	ate:	Fax No.	
(b) (6), (b) (7)(C)	A	ugust 13, 2018		
			e-Mail	
			(b) (6), (b) (7)(C)	

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

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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.

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INTERNET FORM NLRB-508 (2-08)

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

	FORM EXEMPT UNDER 44 U.S.C 3512			
DO NOT WRITE IN THIS SPACE				
Сазе 29-СВ-224822	Date Filed 8/2/18			

INSTRUCTIONS: File on original with NLRB Regional Director for	x the region in which the	alloged unfair labor practice	occurred or is accuiring.
1. LABOR ORGANIZATION O	R ITS AGENTS AGAINST	WHICH CHARGE IS BRO	UGHT
a. Name Steamfitters Local Union 638	b. Union Represe Pat Dolan, Pro		
c. Address (Street, city, state, and ZIP code) 27-08 40th Avenue, 4th Floor, Long Island City, New	Vork 11101	d. Tel. No. 718-392-3420	e. Cell No.
21-00 4001 Avenue, 4011 1001, Long loland ony, rich		f. Fax No.	g. e-Mail
h. The above-named organization(s) or its agents has (have) eng subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of meaning of the Act and the Postal Reorganization Act.	0	the National Labor Relation	s Act, and these unfair labor practices
disciplining its members(b) (6), (b) (7)(C)		,	iscriminatory, or in bad faith.
3. Name of Employer Maccarone Plumbing		4a. Tel. No. 516-671-3232	and the second s
-		c. Fax No.	d. e-Mail
5. Location of plant involved (street, city, state and ZIP code) 10 Sea Cliff Ave., Glen Cove, NY 11542		1	Employer representative to contact outs J. Maccarone
7: Type of establishment (factory, mine, wholesaler, etc.) Plumbing contractor	8. Identify principa Plumbing		Number of workers employed
10. Full name of party filling charge (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C	b. Cell No.
		c. Fax No.	d. e-Mall
11. Address of party filing charge (street, city, state and ZIP con (b) (6), (b) (7)(C)	de.)		(b) (6), (b) (7)(C)
12. DECLARATION	true to the best of my knowled	Tel. No.	(b) (6), (b) (7)(C)
(b) (6	), (b) (7)(C)	Cell No.	
(signature) (Prince or person making charge) (Prince (b) (6), (b) (7)(C)	titype name and title or of	fice, if any) Fax No.	
Same as above		e-Mail	(b) (6), (b) (7)(C)
Address			

PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001) c 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 I

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

Case
29-CB-224838

Date Filed 8/2/2018

DO NOT WRITE IN THIS SPACE

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

		anogee enter la			
1. LABOR ORGANIZATION OR I	TS AGENTS	AGAINST WHICH CHAR	GE IS BROU	GHT	
a. Name 1199, SEIU				epresentative con, Delegat	
c. Address (Street, city, state, and ZIP code) 310 West 43rd Street New York, NY 10036			d. Tel. No.		e. Cell No.
			f. Fax. No.		
			g. e-mail		
<ul> <li>h. The above-named labor organization has engaged in and is engineering (list subsections) (A)</li> <li>practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.</li> </ul>	of the Act, or the	of the Natio hese unfair labor practice	nal Labor Res affecting co	elations Act, a	and these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of the Since in or around (b), 2018, the above-named labor orgon regarding (6) (6) (6) (6) (6) (6) (6) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7	ganization h	tituting the alleged unfair l as failed and refused to	abor practice o properly 1	is) epresent its	s member <sup>(b) (b) (b) (7XC)</sup>
3. Name of Employer Brooklyn Hospital Center	٢	4a. Tel. No. 718-250-8000 d. e-mail	b. Cell No.		c, Fax No.
		u. e-mai			
5. Location of plant involved (street, city, state and ZIP code) 121 DeKalb Avenue Brooklyn, NY 11206		L	6. Employe HR Direct	r representat tor Tom Fol	ive to contact ley
7. Type of establishment (factory, mine, wholesaler, etc.) hospital center	8. Identify p health care	principal product or service e provider	e	9. Number o over 500	of workers employed
10. Full name of party filing charge (b) (6), (b) (7)(C)	- <u>+</u>				
(b) (6), (b) (7)(C)		11a. Tel. No.	b. Cell No. (b) (6). (b) (7)(C)		c. Fax No.
(b) (6),		d. e-mail (b) (6), (b) (7)(C)			· · · · · · · · · · · · · · · · · · ·
12. DECLARATION (b) (6), (b) (c) (c) (b) (b) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	N and that the dge and belie	statements f.	Ľ	Tel. No.	
(signature (b) presentative or pe(b in making charge)		(7)(C) An-Individual arme and title or office, if any)	(t	Cell No. 5) (6), (b) (7)(0 ————————————————————————————————————	C)
Address Same as above		Date 08/01/2018	-	e-mail b) (6), (b)	(7)(C)
	<i></i>		🕨		

### 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.

INT	ERNET	
FORM	NLRB=008	
1.0	2-08)	

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

FORM EXEMPT UNDER 44 U.S.C 351		FORM	EXEMPT	UNDER	44	US	C 351	2
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DO NOT WRITE IN THIS SPACE

Date Filed

8/3/18

Case	
29-CB-224920	

INSTRUCTIONS: File an original with NLRB Regional Director to 1. LABOR ORGANIZATION OF	· · · · · · · · · · · · · · · · · · ·	CH CHARGE IS I	BROUGH	T.	
a. Name		b. Union Rep	resentativ	e to contact	
Teamsters Local 804			Joe Forcelli		
		Title: Unior	n rep		
c. Address (Street, city, state, and ZIP code)		d. Tel. No. (718) 878-46	524	e. Cell No.	
34-21 Review Ave NY Long Island City 11101		f. Fax No.		g. e-Mail j.forcelli@teamsterslocal804.org	
h. The above-named organization(s) or its agents has (have) enga subsection(s) (list subsections) (1)(A), (3), (2) are unfair practices affecting commerce within the meaning of t meaning of the Act and the Postal Reorganization Act.	of the Na	ational Labor Rel	ations Act	, and these unfair labor practic	
See additional page					
		4a. Tel. No.	150	b. Cell No.	
3. Name of Employer UOS		4a. Tel. No. (718) 706-30 c. Fax No.	50	b. Cell No. d. e-Mail	
UOS		(718) 706-30		d. e-Mail	
		(718) 706-30		d. e-Mail over representative to contact mo	
<ul> <li>UOS</li> <li>5. Location of plant involved (street, city, state and ZIP code)</li> <li>56-13 48th street</li> <li>NY Maspeth 11378</li> <li>7. Type of establishment (factory, mine, wholesaler, etc.)</li> </ul>	8. Identify principal produ delivery	(718) 706-30 c. Fax No.	6. Empl Joe Rer Title: M	d. e-Mail over representative to contact mo	
UOS 5. Location of plant involved (street, city, state and ZIP code) 56-13 48th street NY Maspeth 11378 7. Type of establishment (factory, mine, wholesaler, etc.) Transportation		(718) 706-30 c. Fax No.	6. Emplo Joe Ren Title: M 9. Numb 700	d. e-Mail over representative to contact mo anager	
UOS 5. Location of plant involved (street, city, state and ZIP code) 56-13 48th street NY Maspeth 11378 7. Type of establishment (factory, mine, wholesaler, etc.) Transportation 10. Full name of party filing charge		(718) 706-30 c. Fax No. uct or service 11a. Tel. No. (b) (6), (b) (7)	6. Empli Joe Rer Title: M 9. Numt 700	d. e-Mail over representative to contact mo anager ber of workers employed b. Cell No.	
<ul> <li>UOS</li> <li>5. Location of plant involved (street, city, state and ZIP code)</li> <li>56-13 48th street</li> <li>NY Maspeth 11378</li> <li>7. Type of establishment (factory, mine, wholesaler, etc.)</li> <li>Transportation</li> <li>10. Full name of party filing charge</li> <li>(b) (6), (b) (7)(C)</li> </ul>	delivery	(718) 706-30 c. Fax No.	6. Empli Joe Rer Title: M 9. Numt 700	d. e-Mail over representative to contact mo anager ber of workers employed	
<ul> <li>UOS</li> <li>5. Location of plant involved (street, city, state and ZIP code)</li> <li>56-13 48th street</li> <li>NY Maspeth 11378</li> <li>7. Type of establishment (factory, mine, wholesaler, etc.)</li> <li>Transportation</li> <li>10. Full name of party filing charge</li> <li>(b) (6). (b) (7)(C)</li> <li>11. Address of party filing charge (street, city, state and ZIP code)</li> </ul>	delivery	(718) 706-30 c. Fax No. uct or service 11a. Tel. No. (b) (6), (b) (7)	6. Empli Joe Rer Title: M 9. Numt 700	d. e-Mail over representative to contact mo anager ber of workers employed b. Cell No. d. e-Mail	
<ul> <li>UOS</li> <li>5. Location of plant involved (street, city, state and ZIP code)</li> <li>56-13 48th street NY Maspeth 11378</li> <li>7. Type of establishment (factory, mine, wholesaler, etc.)</li> <li>Transportation</li> <li>10. Full name of party filing charge</li> <li>(b) (6), (b) (7)(C)</li> <li>11. Address of party filing charge (street, city, state and ZIP code</li> <li>(b) (6), (b) (7)(C)</li> <li>12. DECLARATION</li> </ul>	delivery	(718) 706-30 c. Fax No. uct or service 11a. Tel. No. (b) (6), (b) (7) c. Fax No.	6. Empli Joe Rer Title: M 9. Numb 700	d. e-Mail over representative to contact mo anager ber of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)	
<ul> <li>UOS</li> <li>5. Location of plant involved (street, city, state and ZIP code)</li> <li>56-13 48th street</li> <li>NY Maspeth 11378</li> <li>7. Type of establishment (factory, mine, wholesaler, etc.)</li> <li>Transportation</li> <li>10. Full name of party filing charge</li> <li>(b) (6), (b) (7) (C)</li> <li>11. Address of party filing charge (street, city, state and ZIP code)</li> <li>(b) (6), (b) (7) (C)</li> <li>12. DECLARATION</li> <li>declare that I have read the above charge and that the statements therein are to</li> <li>By</li> </ul>	e.) rue to the best of my knowledge and b (b) (6), (b) (7)(C)	(718) 706-30 c. Fax No. uct or service 11a. Tel. No. (b) (6), (b) (7) c. Fax No. velief. Tel. Cell	6. Empl Joe Ren Title: Mi 9. Numb 700 (C)	d. e-Mail over representative to contact mo anager ber of workers employed b. Cell No. d. e-Mail	
<ul> <li>UOS</li> <li>5. Location of plant involved (street, city, state and ZIP code)</li> <li>56-13 48th street NY Maspeth 11378</li> <li>7. Type of establishment (factory, mine, wholesaler, etc.)</li> <li>Transportation</li> <li>10. Full name of party filing charge</li> <li>(b) (6) (7) (C)</li> <li>11. Address of party filing charge (street, city, state and ZIP code)</li> <li>(b) (6), (b) (7) (C)</li> <li>12. DECLARATION</li> <li>declare that I have read the above charge and that the statements therein are to (5) (6) (7) (C)</li> </ul>	e.) rue to the best of my knowledge and b (b) (6), (b) (7)(C)	(718) 706-30 c. Fax No. uct or service 11a. Tel. No. (b) (6), (b) (7) c. Fax No. velief. Tel. Cell	6. Empl Joe Ren Title: M 9. Numb 700 (C)	d. e-Mail over representative to contact mo anager ber of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)	
<ul> <li>UOS</li> <li>5. Location of plant involved (street, city, state and ZIP code)</li> <li>56-13 48th street</li> <li>NY Maspeth 11378</li> <li>7. Type of establishment (factory, mine, wholesaler, etc.)</li> <li>Transportation</li> <li>10. Full name of party filing charge</li> <li>(b) (6), (b) (7) (C)</li> <li>11. Address of party filing charge (street, city, state and ZIP code)</li> <li>(b) (6), (b) (7) (C)</li> <li>12. DECLARATION</li> <li>declare that I have read the above charge and that the statements therein are to</li> </ul>	delivery e.) rue to the best of my knowledge and b (b) (6), (b) (7)(C) (type name and title or office, if a	(718) 706-30 c. Fax No. uct or service 11a. Tel. No. (b) (6), (b) (7) c. Fax No. (c. Fax No. (c. Fax No. (c. Fax No.	6. Emplo Joe Ren Title: M 9. Numb 700 (C) No. No. No.	d. e-Mail over representative to contact mo anager ber of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)	

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

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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 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 operating a hiring hall in a manner that was arbitrary, discriminatory or in bad faith.

### 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 issuing unlawful fines and or internal charges.

### 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 honor a resignation of union membership.

### 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 honor the revocation of dues check-off.

### 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 requiring nonmembers to pay dues and fees that are not related to representational activities.

### 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.

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FORM EXEMPT	UNDER 44	U.S.C 3512
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INTERNET FORM NLRB-508	UNITED STATES OF AME	PICA				FORM EXEMPT UNDER 44 U.S
(2-08)		NATIONAL LABOR RELATIONS BOARD		DO NOT WRITE IN THIS SPACE Date Filed		
	CHARGE AGAINST LABOR OR OR ITS AGENTS	GANIZATION	Case 29-CB-2	25057		8/6/2018
INSTRUCTIONS: File	an original with NLRB Regional Director fo	r the region in which	the alleged unfai	r labor prac	ctice occu	rred or is occurring.
	1. LABOR ORGANIZATION OF	R ITS AGENTS AG	AINST WHICH CH	ARGE IS E	BROUGH	Г
a. Name			b.	Union Rep	resentativ	e to contact
32BJ SEIU				MIKE INDI	A	
				Title:		
c. Address (Street, city,	, state, and ZIP code)			Tel. No.		e. Cell No.
25W 18TH STREET				12) 388-38	00	
NY NEW YORK 10011			T.	Fax No.		g. e-Mail
subsection(s) <i>(list su</i> are unfair practices a meaning of the Act an	ganization(s) or its agents has (have) enga bsections) (1)(A), (2) ffecting commerce within the meaning of t nd the Postal Reorganization Act. e (set forth a clear and concise statement)	he Act, or these unf	_ of the National air labor practices	Labor Relation Relati	ations Act practices	and these unfair labor orac
2. Busie er ale ongige			ing the theyet th	.a 14201 p		
3. Name of Employer			4a	. Tel. No.		b. Cell No.
3. Name of Employer TENNIS VIEW APARTI	MENTS					
	MENTS			. Tel. No. Fax No.		b. Cell No. d. e-Mail
TENNIS VIEW APARTI	MENTS rolved (street, city, state and ZIP code)				6. Emple	
TENNIS VIEW APARTI	rolved (street, city, state and ZIP code)				6. Emple Title:	d. e-Mail
TENNIS VIEW APARTI 5. Location of plant inv 4DARTMOUTH STREE NY FLUSHING 11375-	rolved (street, city, state and ZIP code)	8. Identify prin		Fax No.	Title:	d. e-Mail
TENNIS VIEW APARTI 5. Location of plant inv 4DARTMOUTH STREE NY FLUSHING 11375- 7. Type of establishme 10. Full name of party	rolved (street, city, state and ZIP code) ET  ent (factory, mine, wholesaler, etc.)	8. Identify pri	c. ncipal product or s	Fax No.	Title: 9. Numl 4	d. e-Mail over representative to contain
TENNIS VIEW APARTI 5. Location of plant inv 4DARTMOUTH STREE NY FLUSHING 11375- 7. Type of establishme 10. Full name of party	rolved (street, city, state and ZIP code) ET  ent (factory, mine, wholesaler, etc.)	8. Identify pri	c. ncipal product or s	Fax No. ervice a. Tel. No.	Title: 9. Numl 4	d. e-Mail over representative to conta- per of workers employed
TENNIS VIEW APARTI 5. Location of plant inv 4DARTMOUTH STREE NY FLUSHING 11375- 7. Type of establishme 10. Full name of party t (b) (6), (b) (7)(C)	rolved (street, city, state and ZIP code) ET  ent (factory, mine, wholesaler, etc.) filing charge		c. ncipal product or s	Fax No. ervice a. Tel. No. (6), (b) (7)(	Title: 9. Numl 4	d. e-Mail over representative to conta- per of workers employed b. Cell No.
TENNIS VIEW APARTI 5. Location of plant inv 4DARTMOUTH STREE NY FLUSHING 11375- 7. Type of establishme 10. Full name of party t (b) (6), (b) (7)(C)	rolved (street, city, state and ZIP code) ET  ent (factory, mine, wholesaler, etc.)		c. ncipal product or s	Fax No. ervice a. Tel. No. (6), (b) (7)(	Title: 9. Numl 4	d. e-Mail byer representative to conta- ber of workers employed b. Cell No. d. e-Mail

By (b) (6), (b) (7)(C) (signature of representative or person making charge)	(b) (6), (b) (7)(C) (Print/type name and title or office, if any) Title:	Cell No. Fax No.
(b) (6), (b) (7)(C)	(date) <sup>08/2/2018</sup> 14:45:31	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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# **Basis of the Charge**

## 8(b)(1)(A)

á

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 operating a hiring hall in a manner that was arbitrary, discriminatory or in bad faith.

### 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 requiring nonmembers to pay dues and fees that are not related to representational activities.

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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		29-CB-225127	08/07/2018	
INSTRUCTIONS: File an original of this charge with the occurred or is occurring.	e NLRB Regional Di	rector of the region in whic	ch the alleged unfair labor practice	
1. LABOR ORGANIZATION	OR ITS AGENTS AGA	AINST WHICH CHARGE IS BR	OUGHT	
a. Name International Brotherhood of Electrical Worker	rs, Local 3	b. Union Representative to Rob Olenitck	o Contact	
c. Address 158-11 Jewel Ave, 4th Floor, Flushing, NY 11	365	d. Tel. No. (718)591-4000	e.e. Cell No.	
		f. Fax No.	g. e-Mail	
<ul> <li>h. The above-named labor organization or its agents have 8(b), subsection(s) (1)(A) of the National Labor Relation the meaning of the Act, or are unfair practices affecting</li> <li>2. Resis of the Charge (act for the a clear or or provide state)</li> </ul>	s Act, and these unfa commerce within the	air labor practices are unfair meaning of the Act and the	practices affecting commerce within Postal Reorganization Act.	
<ol> <li>Basis of the Charge (set forth a clear and concise statem Since about (b) (6), 2018, the above-named exercise of rights protected by Section 7 of the regarding of termination for arbitrary or discr</li> </ol>	labor organizatio e Act by refusing	n has restrained and control to process the grievan	oerced employees in the	
3. Name of Employer New York Racing Association	•	4a. Tel. No. 718 -441 4700	4b. Cell No.	
		4c. Fax No.	4d. e-Mail	
5. Location of Plant involved (street, city, state, and ZIP con	de)	6. Employer representative	to contact	
PO Box 90, Ozone Park, NY 11417-0090		Anthony DeMartino		
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product		9. Number of Workers employed	
Entertainment	Horse Racing		1000	
10. Full name of party filing charge (b) (6), (b) (7)(C)		11a. Tel. No.	11b. Cell No. (b) (6), (b) (7)(C)	
		11c. Fax No.	11 <u>d</u> e-Mail (b) (6), (b) (7)(C)	
11. Address of party filing charge (street, city, state, and ZIF	<sup>D</sup> code)			
(b) (6), (b) (7)(C)	12. DECLARAT	ION		
I declare that I have read the above charge and t	hat the statements	therein are true to the best	of my knowledge and belief.	
(b) (6), (b) (7)(C) ( By:	(b) (6), (b) (	7)(C)	NL RB-R DIB AUG- ROOKL	
(signature of representative or person making charge)		ne and title or office, if any	Cell No. (b) (6), (b) (7)(C)	
Address: (b) (6), (b) (7)(C)		July 27	Fax No.	

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.

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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			
29-CB-225142	8/6/18			

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	<b>FS AGENTS</b>	AGAINST WHICH CHAR	GE IS BROU	GHT	
a. Name Communication Workers of America Local 1101	b. Union Representative to contact Al Russo				
c. Address (Street, city, state, and ZIP code)	·		d. Tel. No. 212-633-2		e. Cell No. 917-657-7068
275 7th Avenue New York, NY 10001			f. Fax. No. 212-633-6	3337	<b>L</b>
			g. e-mail arusso@le	ocal1101.org	g
<ul> <li>h. The above-named labor organization has engaged in and is enga (list subsections) 8(b)(3)</li> <li>practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.</li> </ul>	f the Act, or th	of the Natio hese unfair labor practices	nal Labor Re s affecting co	elations Act, a ommerce with	and these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of the Beginning on or about July 23, 2018, the Union failed to ba conditions of the bargaining unit employees' employment a	urgain with t	the Employer regarding	g changes i	t made to th	e terms and
3. Name of Employer USIC Locating Services, LLC		4a. Tel. No. 317-575-7800	b. Cell No.		c. Fax No. 317-575-7881
		d. e-mail			
5. Location of plant involved (street, city, state and ZIP code) 100 Marcus Blvd. Suite 3 Hauppauge, NY 11788 [DO NOT SEND MAIL TO THIS	LOCATIO	N]		r representati . Springer	ive to contact
7. Type of establishment (factory, mine, wholesaler, etc.) Utility Locating Service	8. Identify p Utility Loca	principal product or service ating	•		of workers employed mpanywide
10. Full name of party filing charge Cynthia K. Springer				1	
11. Address of party filing charge (street, city, state and ZIP code) Springer Labor Law, LLC 11806 Sea Star Drive Indianapo	olis, IN 462	11a. Tel. No. 317-753-8789	b. Cell No. 317-753-8	3789 N	c. Fax No.
d. e-mail cindy@springerlaborlaw.com					
12. DECLARATION I declare that I have read the above charge are true to the best of my knowled	and that the		:	Fel. No.	antering the second
Cynthia & Springer	Cynthia	K. Springer, Owner		Cell No< 317-753-8⊽8	<sup>9</sup> N N
(signature of representative or person making charge)	(Print/type na	ame and title or office, if any)	1	Fax No. NA	n N
Springer Labor Law, LLP 11806 Sea Star Drive Address Indianapolis, IN 46256	·	Date 8/1/18		e-mail cindy@sprin	gerlaborlaw.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	NATIONAL LABOR RELATIONS BOARD				
CHARGE AGAINST LABOR ORGANIZATION AGENTS	29-CB-2252f1	8/8/2018			
INSTRUCTIONS: File an original of this charge with th occurred or is occurring.	e NLRB Regional [	Director of the region in wh	nich the alleged unfair labor practice		
	OR ITS AGENTS AG	AINST WHICH CHARGE IS E	ROUGHT		
a. Name		b. Union Representative			
Local 731 Building Concrete Excavating & Co	Herbie Johnson				
Laborers, Laborers' International Union of No					
c. Address		d. Tel. No.	e.e. Cell No.		
34-11 35 <sup>th</sup> Avenue		(718)706-0720			
Astoria, NY 11106		f. Fax No.	g. e-Mail		
h. The above-named labor organization or its agents have	e engaged in and an	e engaging in unfair labor pr	actices within the meaning of section		
8(b), subsection(1)(a) of the National Labor Relations A meaning of the Act, or are unfair practices affecting con- tion of the Act, or are unfair practices affecting con- tional statement of the Act, or are unfair practices affecting con- tional statement of the Act, or are unfair practices affecting con- tional statement of the Act, or are unfair practices affecting con- tional statement of the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affecting to the Act, or are unfair practices affe	Act, and these unfair	labor practices are unfair pr	actices affecting commerce within the		
2. Basis of the Charge (set forth a clear and concise state	ment of the facts co	nstituting the alleged unfair l	abor practices)		
Within the past six months, the above-name		·			
of (b) (6), (b) (7)(C) regarding <sup>(0)(6)</sup> , benefits fo	÷ ,				
or (b) (b), (b) (7)(C) regarding benefits to		re arbitrary, discrittina	çiy çi in badı alını.		
	·				
3. Name of Employer		4a. Tel. No.	4b. Cell No.		
Vali Industries Inc.		(718) 821-5555 4c, Fex No.	4d. e-Mail		
		HU. FEA NO.	-40. C-10kan		
5. Location of Plant Involved (street, city, state, and ZIP co	ode)	6. Employer representativ	ve to contact		
285 Lombardy Street		Vincent Ali			
7. Type of Establishment (factory, mine, wholesaler)	8. Principal produ				
	Construction				
Construction Company 10. Full name of party filing charge	Construction	11a. Tel. No.	11b. Cell No.		
(b) (6), (b) (7)(C)		118, 18, 180,	(b) (6), (b) (7)(C)		
(b) (b), (b) (1)(b)					
		11c, Fax No.	11d e-Mail		
			(b) (6), (b) (7)(C)		
		1			
11. Address of party filing charge (street, city, state, and Zi	(P code)				
			· · · · · · · · · · · · · · · · · · ·		
	12. DEGLARA				
I declare that I have re(b) e above charge and	that the statement	s therein are true to the be	st of my knowledge and belief.		
(b) (6), (b) (7)(b)	· ·		Tel No.		
By: X					
	(b) (6), (b		Call Na		
(signature of r (b) (6), (b) (7)(C)	Print/type he	me and title or office, if any			
Address:		Data	(b) (6), (b) (7)(C)		
		Date:	Fax No.		
(b) (6), (b) (7)(C)		08/20/01	e-Mail		
		0100100			
			(b) (6), (b) (7)(C)		

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### 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.

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NATIONAL LADOR RELATIONS BOARD         Case         Date filed           CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS         29-CB-225264         8/7/2018           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.         1. LBOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT           a. Name         1. LBOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT         a. Name           1199 SEIU Unitad Health Workers East         L. Union Representative to Contact         Lloyd Maul           c. Address         310 West 43rd Street, 5th Floor, New York, NY 10036         g. e-Mail         f. Tel No.         g. e-Mail           h. The above-named labor organization or its agents have engaged in and are engaging in unfair labor practices are unfair practices affecting commerce within the reasing orsanica within th	UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE		
AGENTS     29-CB-225264     8/7/2018       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.     1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT       a. Name     1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT     2. Onlino Representative to Contact       1.199 SEIU United Health Workers East     L. Union Representative to Contact     Loyd Maul       c. Address     310 West 43rd Street, 5th Floor, New York, NY 10038     g. e-Mail       h. The above-named labor organization or its agents have engaged in and are engaging in unfair labor practices affecting commerce within the meaning of section 8(b), subsection(s) (11(A) of the National Labor Relations Act, and these unfair labor practices affecting commerce within the meaning of section 8(b), subsection(s) (11(A) of the National Labor Relations Act, and these unfair labor practices affecting commerce within the meaning of beact and the Act and the Postal Recognatization Act.       2. Basis of the Charge (set forth a clear and practices affecting commerce within the meaning of section 7 of the Act by refusing to process the grievance of [D100] (D10760)       screen engloyer     4a. Tel. No. 718 228-3600       3. Name of Employer     4a. Tel. No. 718 228-3600       4b Cell NO.     100+       10. Full name of party filing charge     8. Principiar product a service       11. Address of party filing charge     9. Principiar product a service       11. Address of party filing charge     114. Tel. No. </td <td>NATIONAL LABOR RELATIONS BOAR</td> <td colspan="3"></td>	NATIONAL LABOR RELATIONS BOAR				
i       LABOR ORGANIZATION OR IT'S AGENTS AGAINST WHICH CHARGE IS BROUGHT         a. Name       1.199 SEIU United Health Workers East         Loyd Maul       b. Union Representative to Contact         1.99 SEIU United Health Workers East       Loyd Maul         c. Address       d. Tel. No.       g. e. Mail         310 West 43rd Street, 5th Floor, New York, NY 10036       d. Tel. No.       g. e.Mail         h. The above-named labor organization or its agents have engaged in and are engaging in unfair labor practices affecting commerce within the meaning of the Act and the Postal Recognization Act.         2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices affecting commerce within the exercise of fights protected by Section 7 of the Act by refusing to process the grievance of 100(0)(0)(0)(0)(0)(0)(0)(0)(0)(0)(0)(0)(0		N OR ITS	29-CB-225264	8/7/2018	
a. Name 1199 SEIU United Health Workers East       b. Union Representative to Contact Licyd Maul         c. Address 310 West 43rd Straet, 5th Floor, New York, NY 10035		he NLRB Regional Di	rector of the region in whi	ch the alleged unfair labor practice	
1199 SEIU United Health Workers East       Lloyd Maul         c. Address       310 West 43rd Street, 5th Floor, New York, NY 10036	9	OR ITS AGENTS AGA	AINST WHICH CHARGE IS BI	ROUGHT	
c. Address 310 West 43rd Street, 5th Floor, New York, NY 10036       d. Tel. No.       e.e. Call No.         f. Fax No.       g. e-Mail         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), subsection(s) (1/A) of the National Labor Relations Act, and these unfair labor practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         2. Basis of the Charge care unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         3. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)         Since about (D)(G), 2018, 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 (D)(G)(C)(C)(C) regarding (D) one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith.         3. Name of Employer BUENA VIDA NURSING HOME       4a. Tel. No. 4b. Cell No. 718 928-3600 4c. Fax No. 4b. Cell No. 718 928-3600 4c. Fax No. 4c. Fax	a. Name		b. Union Representative	to Contact	
c. Address 310 West 43rd Street, 5th Floor, New York, NY 10036       d. Tel. No.       e.e. Cell No.         f. Fax No.       g. e-Mail         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), subsection(s) (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.         z. Basis of the Charge (streat, or are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         z. Basis of the Charge (streat, or are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         z. Basis of the Charge (streat, or are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         z. Basis of the Charge (streat, or are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         z. Basis of the Charge (streat, or are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         z. Basis of the Charge (streat, or are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         z. Basis of the Charge (streat, or are unfair practices affecting commerce or ganization has restrained and coerced employees in the exercise of ingits protected by Section 7 of the Act by refusing to process the grievance of [10,(0)(0)(7)(7)         z. Locati	1199 SEIU United Health Workers East				
310 West 43rd Street, 5th Floor, New York, NY 10036       r. Fax No			Lloyd Maul		
310 West 43rd Street, 5th Floor, New York, NY 10036       r. Fax No	c. Address	····· .	d. Tel No	e.e. Cell No	
f. Fax No.       g. e-Mail         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), subsection(s) (1)(A) of the National Labor Relations Act, and these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Recognization Act.         2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)         Since about (b)(G).       2018, 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)(G)(7)(G) regarding one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith.         3. Name of Employer       4a. Tel. No.         BUENA VIDA NURSING HOME       4a. Tel. No.         4b. Cell No.       718 928-3600         4c. Fax No.       4d. e-Mail         6. Employer       9. Number of Workers employed         7. Type of Establishment (factory, mine, whiclessier)       8. Princpal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.       10b. (b) (7)(C)         11. Address of party filing charge (street, city, state, and 2IP code)       11a. Tel. No.       11b. Cell No.       11b. Cell No.         (b) (6), (b) (7)(C)       12. DECLARATION       11d e-Mail       (b) (6), (b) (7)(C) <td></td> <td>NY 10036-</td> <td></td> <td></td>		NY 10036-			
h. The above-named labor organization or its agents have engaged in and are engaging in unfair labor practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.         2. Basis of the Charge ( <i>et forth a clear and concies affecting commerce within the meaning of the Act and the Postal Reorganization Act.</i> 2. Basis of the Charge ( <i>et forth a clear and concies statement of the facts constituting the alleged unfair labor practices</i> )         Since about ( <b>b)</b> ( <b>6</b> ).       2018, 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)</b> ( <b>(b)</b> ( <b>(7)</b> ( <b>C)</b> )         regarding one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith.         3. Name of Employer         BUENA VIDA NURSING HOME         4a. Tel. No.         718 928-3600         4c. Fax No.         4d. e-Mail         5. Location of Plant involved (street, city, state, and 2/P code) <b>(b)</b> ( <b>(b)</b> ( <b>(7)</b> ( <b>C)</b> ) <b>11a.</b> Tel. No. <b>(b)</b> ( <b>(b)</b> ( <b>(b)</b> ( <b>(7)</b> ( <b>C)</b> ) <b>11a.</b> Tel. No. <b>(b)</b> ( <b>(b)</b> ( <b>(b)</b> ( <b>(7)</b> ( <b>C</b> )) <b>11b.</b> Cell No. <b>(b)</b> ( <b>(b)</b> ( <b>(b)</b> ( <b>(f)</b> )( <b>(C)</b> ) <b>11c.</b> Fax No. <b>11d.</b> Cater, wind, windesaier) <b>11d.</b> Class of party filing charge (street, city, state, and 2/P code) <b>(b)</b> ( <b>(b)</b> ,			f. Fax No.	g. e-Mail	
8(b), subsection(s) (1)(A) of the National Labor Relations Act, and these unfair infor 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 alleged unfair labor practices)         3. Since about (0)(6), 2018, 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 (0)(0)(0)(700) regarding one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith.         3. Name of Employer       4a. Tel. No.       4b. Cell No.         BUENA VIDA NURSING HOME       718 928-3600       4c. e-Mail         5. Location of Plant involved (street, city, state, and ZIP code)       8. Employer representative to contact       Nicole Joseph         7. Type of Establishment (factory, mine, whiclesaler)       8. Principal product or service       9. Number of Workers employed         100+       10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11a. Tel. No.       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       (b) (6), (b) (7)(C)       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       (b) (6), (b) (7)(C)				3. 5	
8(b), subsection(s) (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 alleged unfair labor practices)         Since about (b) (b), 2018, the above-named labor organization has restrained and coerced employees in the exercise of fights protected by Section 7 of the Act by refusing to process the grievance of (b) (b) (b) (c) (c) (c)         3. Name of Employer grading one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith.         3. Name of Employer BUENA VIDA NURSING HOME       4a. Tel. No.         4b. Cell NC.         7. Type of Establishment (factory, mine, wholesaler) nursing home       8. Principal product or service         9. Number of Workers employed 100-0+         10. Full name of party filing charge (street, city, state, and ZIP code)         (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)         (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)         (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)         (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)         (b) (6), (b) (7)(C)	h. The above-named labor organization or its agents hav	e engaged in and are	engaging in unfair labor pra	ctices within the meaning of section	
the meaning of the Ad, or are unfar practices affecting commerce within the meaning of the Ad and the Postal Reorganization Ad.         2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)         Since about (D) (G).       2018, the above-named labor organization has restrained and coerced employees in the exercise of fights protected by Section 7 of the Act by refusing to process the grievance of (D) (G) (D) (7)(G) regarding (D) one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith.         3. Name of Employer       4a. Tel. No.         BUENA VIDA NURSING HOME       4b. Cell No.         7.18 922-3600       4c. Fax No.         48 Cedar St, Brooklyn, NY 11221-3253       8. Principal product or service         7. Type of Establishment (factory, mine, wholesaler) nursing home       8. Principal product or service         10. Full name of party filing charge (street, city, state, and ZIP code)       11a. Tel. No.         11a. Tel. No.       11b. Cell No.         (D) (G), (b) (7) (C)       11a. Tel. No.         11a. Tel. No.       11d e-Mail         (b) (G), (b) (7) (C)       12. DECLARATION         11. Address of party filing charge (street, city, state, and ZIP code)       (D) (G), (b) (7) (C)         (b) (G), (b) (7) (C)       12. DECLARATION         14 declare that 1 have read the above charge and that the statements therein are true to the best of my knowledge and belief.					
Since about (b) (c), 2018, 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) (c), (D) (7) (C) regarding one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith. 3. Name of Employer BUENA VIDA NURSING HOME  4. Tel. No.  5. Location of Plant involved (street, city, state, and ZIP code)  4. Cell No.  4. C	the meaning of the Act, or are unfair practices affecting	g commerce within the	e meaning of the Act and the	Postal Reorganization Act.	
exercise of rights protected by Section 7 of the Act by refusing to process the grievance of (1)(6), (b)(7)(C) regarding one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith. 3. Name of Employer BUENA VIDA NURSING HOME 4. Tel. No. 7.18 928-3600 4. Fax No. 4. Cell No. 7.18 928-3600 4. e-Mail 5. Location of Plant involved (street, city, state, and ZIP code) 4. Cell No. 7. Type of Establishment (factory, mine, wholesaler) nursing home 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) 12. DECLARATION 1 declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. By: (b) (6), (b) (7)(C) (c) Address: (b) (6), (b) (7)(C) Address: (b) (6), (b) (7)(C) Address: (c) (6), (b) (7)(C) 10. Et 21T XX*NXTX (c) (6), (b) (7)(C)	2. Basis of the Charge (set forth a clear and concise state	ement of the facts con	stituting the alleged unfair la	bor practices)	
exercise of rights protected by Section 7 of the Act by refusing to process the grievance of (1)(6), (b)(7)(C) regarding one-day suspension without pay for arbitrary or discriminatory reasons or in bad faith. 3. Name of Employer BUENA VIDA NURSING HOME 4. Tel. No. 7.18 928-3600 4. Fax No. 4. Cell No. 7.18 928-3600 4. e-Mail 5. Location of Plant involved (street, city, state, and ZIP code) 4. Cell No. 7. Type of Establishment (factory, mine, wholesaler) nursing home 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) 12. DECLARATION 1 declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. By: (b) (6), (b) (7)(C) (c) Address: (b) (6), (b) (7)(C) Address: (b) (6), (b) (7)(C) Address: (c) (6), (b) (7)(C) 10. Et 21T XX*NXTX (c) (6), (b) (7)(C)					
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regarding cone-day suspension without pay for arbitrary or discriminatory reasons or in bad faith. 3. Name of Employer BUENA VIDA NURSING HOME 4a. Tel. No. 718 928-3600 4c. Fax No. 4d. e-Mail 5. Location of Plant involved ( <i>sireet, city, state, and ZIP code</i> ) 48 Cedar St, Brooklyn, NY 11221-3253 7. Type of Establishment ( <i>factory, mine, wholesaler</i> ) nursing home 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge ( <i>street, city, state, and ZIP code</i> ) (b) (6), (b) (7)(C) 11. Address of party filing charge ( <i>street, city, state, and ZIP code</i> ) (b) (6), (b) (7)(C) 12. DECLARATION 1 declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. By: (b) (6), (b) (7)(C) ( <i>signature or</i> (b) <i>intenive or person making charge</i> ) Address: (b) (6), (b) (7)(C) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c					
3. Name of Employer BUENA VIDA NURSING HOME       4a. Tel. No. 718 928-3600       4b. Cell No.         5. Location of Plant involved (street, city, state, and ZIP code)       6. Employer representative to contact Nicole Joseph       4d. e-Mail         5. Location of Plant involved (street, city, state, and ZIP code)       6. Employer representative to contact Nicole Joseph       9. Number of Workers employed         7. Type of Establishment (factory, mine, wholesaler) nursing home       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11c. Fax No.       11d e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d e-Mail       (b) (6), (b) (7)(C)         1 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)       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       Print/type name and title or office, if any       Cell No.         Address:       Date: 8/7/18       Fax No.       Fax No.         (b) (6), (b) (7)(C)       Tel XN NLTN       Mail       (b) (6), (b) (7)(C) <td></td> <td>-</td> <td></td> <td></td>		-			
BUENA VIDA NURSING HOME       718 928-3600         4c. Fax No.       4d. e-Mail         5. Location of Plant involved (street, city, state, and ZIP code)       6. Employer representative to contact         A8 Cedar St, Brooklyn, NY 11221-3253       Nicole Joseph         7. Type of Establishment (factory, mine, wholesaler)       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       12. DECLARATION       11d e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d e-Mail       (b) (6), (b) (7)(C)         12. DECLARATION       1 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.       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         Address:       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         Address:       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         (c) (b) (6), (b) (7)(C)       Tel No.       Tel No.	regarding one-day suspension without	pay for arbitrary of	or discriminatory reaso	ns or in bad faith.	
BUENA VIDA NURSING HOME       718 928-3600         4c. Fax No.       4d. e-Mail         5. Location of Plant involved (street, city, state, and ZIP code)       6. Employer representative to contact         A8 Cedar St, Brooklyn, NY 11221-3253       Nicole Joseph         7. Type of Establishment (factory, mine, wholesaler)       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       12. DECLARATION       11d e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d e-Mail       (b) (6), (b) (7)(C)         12. DECLARATION       1 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.       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         Address:       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         Address:       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         (c) (b) (6), (b) (7)(C)       Tel No.       Tel No.					
4c. Fax No.       4d. e-Mail         5. Location of Plant involved (street, city, state, and ZIP code)       6. Employer representative to contact         48 Cedar St, Brooklyn, NY 11221-3253       Nicole Joseph         7. Type of Establishment (factory, mine, wholesaler)       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11c. Fax No.       11d e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d e-Mail         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.         (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         Address:       (b) (6), (b) (7)(C)       Print/type name and title or office, if any         Cell No.       11e: 8/7/18       Fax No.         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       11f (c) (f) (c)	3. Name of Employer		4a. Tel. No.	4b. Cell No.	
5. Location of Plant involved (street, city, state, and ZIP code)       6. Employer representative to contact         48 Cedar St, Brooklyn, NY 11221-3253       Nicole Joseph         7. Type of Establishment (factory, mine, wholesaler)       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       100+         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11c. Fax No.       11d e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d e-Mail         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)       (b) (6), (b) (7)(C)       (cell No.         Address:       (b) (6), (b) (7)(C)       Print/type name and title or office, if any       Cell No.         Address:       (b) (6), (b) (7)(C)       Fax No.       (cell No.         Address:       (b) (6), (b) (7)(C)       Fax No.       (cell No.	BUENA VIDA NURSING HOME		718 928-3600		
48 Cedar St, Brooklyn, NY 11221-3253       Nicole Joseph         7. Type of Establishment ( <i>factory, mine, wholesaler</i> )       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11d. Fax No.       11d. e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d. e-Mail       (b) (6), (b) (7)(C)         11. 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)       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       Tel No.       Cell No.			4c. Fax No.	4d. e-Mail	
48 Cedar St, Brooklyn, NY 11221-3253       Nicole Joseph         7. Type of Establishment ( <i>factory, mine, wholesaler</i> )       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11d. Fax No.       11d. e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d. e-Mail       (b) (6), (b) (7)(C)         11. 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)       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       Tel No.       Cell No.					
7. Type of Establishment ( <i>factory, mine, wholesaler</i> )       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       100+         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11c. Fax No.       11d. e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d. e-Mail       (b) (6), (b) (7)(C)         12. DECLARATION       1 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.       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)       (c) (6), (b) (7)(C)         Address:       (b) (6), (b) (7)(C)       (c) (6), (b) (7)(C)       (c) (6), (b) (7)(C)         Address:       Date: 8/7/18       Fax No.       Fax No.         (b) (6), (b) (7)(C)       Tel NO.       (b) (6), (b) (7)(C)       (c) (6), (b) (7)(C)	5. Location of Plant involved (street, city, state, and ZIP c	code)	6. Employer representativ	e to contact	
7. Type of Establishment ( <i>factory, mine, wholesaler</i> )       8. Principal product or service       9. Number of Workers employed         10. Full name of party filing charge       11a. Tel. No.       100+         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d. e-Mail       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11c. Fax No.       11d. e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d. e-Mail       (b) (6), (b) (7)(C)         12. DECLARATION       1 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.       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)       (c) (b) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)       (c) (6), (b) (7)(C)         Address:       (b) (6), (b) (7)(C)       (c) (6), (b) (7)(C)       (c) (6), (b) (7)(C)         Address:       Date: 8/7/18       Fax No.       Fax No.         (b) (6), (b) (7)(C)       Tel NO.       (b) (6), (b) (7)(C)       (c) (6), (b) (7)(C)	48 Cedar St Brooklyn NY 11221-3253		Nicole Joseph		
nursing home       100+         10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11d. Fax No.       11d. Fax No.         11. Address of party filing charge (street, city, state, and ZIP code)       11c. Fax No.       11d. e-Mail         (b) (6), (b) (7)(C)       11c. Fax No.       11d. e-Mail         11. Address of party filing charge (street, city, state, and ZIP code)       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11c. Fax No.       11d. e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       11d. e-Mail       (b) (6), (b) (7)(C)         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)       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         (signature or (b)       anterive or person maxing energe)       Print/type name and title or office, if any       Cell No.         Address:       Date: 8/7/18       Fax No.       Fax No.       (b) (6), (b) (7)(C)         I 2 I I A N N X N V       (b) (6), (b) (7)(C)       I 2 I I A N N X N V       (b) (b) (6), (b) (7)(C)		8 Principal product		9. Number of Workers employed	
10. Full name of party filing charge       11a. Tel. No.       11b. Cell No.         (b) (6), (b) (7)(C)       11c. Fax No.       11d e-Mail         (b) (6), (b) (7)(C)       11c. Fax No.       11d e-Mail         (b) (6), (b) (7)(C)       12. DECLARATION       16b. (6), (b) (7)(C)         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)       (c) (6), (b) (7)(C)         By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         (c) (b) (a) (b) (a) (b) (b) (b) (c) (c)       (c) (c) (c)         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       Takes in the statement of the best of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my knowledge in the statement of the best of my k					
(b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11d e-Mail         (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         11. Address of party filing charge (street, city, state, and ZIP code)       11d e-Mail         (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 belief.         Tel No.         By:         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)         By:         (b) (6), (b) (7)(C)         (c) (a) (b) (7)(C)         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)         Address:         (b) (6), (b) (7)(C)         Address:         (b) (6), (b) (7)(C)         Tel NO.         Tel NO.         Address:         (b) (6), (b) (7)(C)         Tel X:         Tel X:         Tel X:         Tel X:         (b) (6), (b) (7)(C)		.l.,	144 T-1 N		
Inc. Fax No.       Ind. e-Mail         Inc. Fax No.       Ind. e-Mail         (b) (6), (b) (7)(C)       Ind. e-Mail         Inc. Fax No.       Ind. e-Mail         (b) (6), (b) (7)(C)       Ind. e-Mail         Inc. Fax No.       Ind. e-Mail         (b) (6), (b) (7)(C)       Ind. e-Mail         Inc. Fax No.       Ind. e-Mail         Inc. Fax No.       Ind. e-Mail         (b) (6), (b) (7)(C)       Ind. e-Mail         By:       (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         Address:       Date: 8/7/18         (b) (6), (b) (7)(C)       Fax No.         (b) (6), (b) (7)(C)       Index Parameters				11b. Cell No.	
11. Address of party filing charge (street, city, state, and ZIP code)         (b) (6), (b) (7)(C)         12. DECLARATION         1 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.         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)         (c) (a) (b) (a) (b) (b) (c) (c)         (c) (c) (c) (c)         (c) (c) (c) (c)         (c) (c) (c) (c)         Address:         (b) (6), (b) (7)(C)         (c) (c) (c) (c)         Tel XN 'N XT):         (c) (c) (c) (c)         (c) (c) (c) (c)	(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)		
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(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 belief.         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)         (c)	11. Address of party filing charge (street, city, state, and 2	ZIP code)			
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 belief.         Tel No.         (b) (6), (b) (7)(C)         Address:         (b) (6), (b) (7)(C)         Address:         (b) (6), (b) (7)(C)       Date: 8/7/18         Fax No.         T 2 [T L N 'N L]); 0 (6), (b) (7)(C)			i		
I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.         I declare that I have read the above charge and that the statement and title or office, if any         Address:       Date: 8/7/18         I declare the above charge and the above charge	(b) (b), (b) (1) (c)				
$\begin{array}{c c} (b) (6), (b) (7)(C) \\ \hline (b) (6), (b) (7)(C) \\ \hline (signature or (b) = matrixe or person maxing charge) \\ \hline (b) (6), (b) (7)(C) \\ \hline (c) \hline (c) \\ \hline (c) \\ \hline (c) \\ \hline (c) \hline $					
By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         (signature or (b) anterive or person maxing charge)       Print/type name and title or office, if any       Cell No.         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       Tri ZTT AN 'NAT):       Stall	I declare that I have read the above charge and	that the statements	therein are true to the bes		
By:       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         (signature or (b) entative or person maxing charge)       Print/type name and title or office, if any       Cell No.         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       TOTEL AN 'NATILE COMPARENT (b) (6), (b) (7)(C)				Tel No.	
By:         (b) (6), (b) (7)(C)         (b) (6), (b) (7)(C)           (signature or (b) entative or person maxing charge)         Print/type name and title or office, if any         Cell No.           Address:         Date: 8/7/18         Fax No.           (b) (6), (b) (7)(C)         Image: 8/7/18         Fax No.	(b) (6) (b) (7) (C)				
(signature or (b)       antative or person making charge)       (b) (6), (b) (7)(C)       (b) (6), (b) (7)(C)         (signature or (b)       antative or person making charge)       Print/type name and title or office, if any       Cell No.         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       Image: 0.000 (0.000)       Image: 0.000 (0.000)         Address:       Date: 8/7/18       Fax No.         (b) (6), (b) (7)(C)       Image: 0.000 (0.000)       Image: 0.000 (0.000)				<u> </u>	
(signature or (b)         Interve or person making charge)         Print/type name and title or office, if any         Cell No.           Address:         Date: 8/7/18         Fax No.           (b) (6), (b) (7)(C)         TI ZII AN NATH         State		(b) (6), (b	o) (7)(C)	(b) (6), (b) (7)(C)	
Address: (b) (6), (b) (7)(C) TOZET AN 'NATIO (b) (6), (b) (7)(C)	(signature or (b) antative or person making charge)	Print/type nar	me and title or office, if any	Cell No.	
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(b) (6), (b) (7)(C) エロマエエムド・ハムコバロ (b) (6), (b) (7)(C)	Address:		Date: 8/7/18	Fax No.	
TUSICAN, NY 11201					
	$(\mathbf{b})(\mathbf{c}), (\mathbf{b})(\mathbf{r})(\mathbf{c})^{-}$			e-Mail	
			(TAN'NA ITSAT	(b) (b) (b) (7) (c)	
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## WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND INPRISONMENT (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 er seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings of 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 the 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.

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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
29-CB-225323	8/7/2018

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	ITS AGENTS	AGAINST WHICH CHAR	GE IS BROL	GHT			
a. Name New York State Nurses Association				b. Union Representative to contact (b) (6), (b) (7)(C)			
z. Address <i>(Street, city, state, and ZIP code)</i> 131 West 33rd Street, 4th Floor New York, NY 10001				0157	e. Cell No.		
			g. e-mail				
<ul> <li>h. The above-named labor organization has engaged in and is englished (list subsections) (1)(A)</li> <li>practices are practices affecting commerce within the meaning the Act and the Postal Reorganization Act.</li> </ul>		of the Natio	onal Labor Re	elations Act, a	and these unfair labor		
2. Basis of the Charge (set forth a clear and concise statement of Since a date within the last six months, the above na is arbitrary and capricious and not consistent with the	amed labor	organization has bee	en bumpin	g employee	es in a manner that		
3. Name of Employed T		4a. Tel. No. 718 858 6675 d. e-mail	b. Cell No.	,	c. Fax No.		
10 F		u. e-man					
5. Location of plant involved (street, city, state and ZIP code) 362 4th Avenue Brooklyn, NY 11215		L	6. Employe Grace A		ive to contact		
7. Type of establishment (factory, mine, wholesaler, etc.) dialysis clinic	8. Identify p dialysis	principal product or service	9	9. Number 20	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	)		a:		
12. DECLARATIO (b) (6), (b) (7)(C) <sup>L</sup> declare that I have read the above charg are true to the best of my knowle	e and that the edge and belie	statements if. an individual	C	Tel. No. b) (6), (b) (7) Cell No.	(C)		
alive or person making charge)	(Print/type na	ame and title or office, if any)		Fax No.			
Address (b) (6), (b) (7)(C)		Date August 7, 2018		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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UNITED STATES OF AMERICA		DO NO	T WRITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOAR		Case	Date filed
CHARGE AGAINST LABOR ORGANIZATIO AGENTS	ON OR ITS	29-CB-225359	8/9/2018
INSTRUCTIONS: File an original of this charge with occurred or is occurring.	the NLRB Region	al Director of the region in v	which the alleged unfair labor practice
	N OR ITS AGENTS	AGAINST WHICH CHARGE IS	S BROUGHT
a. Name		b. Union Representation	ve to Contact
The Law Enforcement Officers Professiona	al Association	(b) (6), (b) (7)(C	
c. Address	I	d. Tel. No.	e.e. Cell No.
80 Broad St, New York NY 10004-2203		(b) (6), (b) (7)	
		f. Fax No.	g. e-Mail
h. The above-named labor organization or its agents ha			leopa.org
the meaning of the Act. or are unfair practices affecting 2. Basis of the Charge (set forth a clear and concise state Since about 2018, the above-named to exercise of rights protected by Section 7 of the termination of 2000 employment for arbitration	tement of the facts Labor Organiza the Act by refus	constituting the alleged unfai tion has restrained and sing to process the grie	<i>r labor practices</i> ) coerced employees in the vance of <mark>(b) (6), (b) (7)(C)</mark> regardin
3. Name of Employer		4a. Tel. No.	4b, Cell No,
Allied Universal		(516) 815-6949	ND. Cell ND.
		4c. Fax No.	4c. e-Mail
5. Location of Plant involved (street, city, state, and ZIP	code)		
	code)	4c. Fax No. 6. Employer representa	ative to contact
199 Water Street, New York, NY 10038	code) 8. Principal pro	4c. Fax No. 6. Employer representa Antoine Mason	ative to contact
199 Water Street, New York, NY 10038		4c. Fax No. 6. Employer representa Antoine Mason duct or service	ative to contact MANSON
199 Water Street, New York, NY 10038 7. Type of Establishment ( <i>factory, mine, wholesaler</i> ) Security 10. Full name of party filing charge (b) (6), (b) (7)	8. Principal pro	4c. Fax No. 6. Employer representa Antoine Mason duct or service	ative to contact MANSON
199 Water Street, New York, NY 10038 7. Type of Establishment ( <i>factory, mine, wholesaler</i> ) Security 10. Full name of party filing charge	8. Principal pro	4c. Fax No. 6. Employer representa Antoine Mason duct or service ervices 11a. Tel. No.	ative to contact MANS6N 9. Number of Workers employed
199 Water Street, New York, NY 10038 7. Type of Establishment ( <i>factory, mine, wholesaler</i> ) Security 10. Full name of party filing charge (b) (6), (b) (7)	8. Principal pro Security Se	4c. Fax No. 6. Employer representa Antoine Mason duct or service ervices 11a. Tel. No. (b) (6), (b) (7)(C)	ative to contact MANSON 9. Number of Workers employed 11b. Cell No.
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199 Water Street, New York, NY 10038 7. Type of Establishment ( <i>factory, mine, wholesaler</i> ) Security 10. Full name of party filing charge (b) (6), (b) (7) (C) 11. Address of party filing charge ( <i>street, city, state, and</i> (b) (6), (b) (7)(C)	8. Principal pro Security St ZIP code) 12. DECLA	4c. Fax No. 6. Employer representa Antoine Massen duct or service ervices 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. RATION ents therein are true to the b	ative to contact MANSON 9. Number of Workers employed 11b. Cell No. 11d e-Mail
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199 Water Street, New York, NY 10038 7. Type of Establishment ( <i>factory, mine, wholesaler</i> ) Security 10. Full name of party filing charge (b) (6), (b) (7) (C) 11: Address of party filing charge ( <i>street, city, state, and</i> (b) (6), (b) (7)(C) I declare that I have read the above charge an By: (b) (6), (b) (7)(C)	8. Principal pro Security St ZIP code) 12. DECLAI d that the stateme (b) (6), (b) (b) (6), (b)	4c. Fax No. 6. Employer representa Antoine Mason duct or service ervices 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. RATION ents therein are true to the b b) (7)(C)	ative to contact          MANSON         9. Number of Workers employed         11b. Cell No.         11d e-Mail         Dest of my knowledge and belief.         Tel No.
<ul> <li>199 Water Street, New York, NY 10038</li> <li>7. Type of Establishment (<i>factory, mine, wholesaler</i>) Security</li> <li>10. Full name of party filing charge (b) (6), (b) (7) (C)</li> <li>14. Address of party filing charge (<i>street, city, state, and</i> (b) (6), (b) (7)(C)</li> <li>I declare that I have read the above charge an</li> </ul>	8. Principal pro Security St ZIP code) 12. DECLAI d that the stateme (b) (6), (b) (b) (6), (b)	4c. Fax No. 6. Employer representa Antoine Massen duct or service ervices 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. RATION ents therein are true to the b b) (7)(C) An Individual	ative to contact          MANSON       9. Number of Workers employed         11b. Cell No.         11d e-Mail         Dest of my knowledge and belief.         Tel No.         y         Cell No.

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

WILLFLL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (C.S. CODE, TITLE IS, 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. (b) (6), (b)

FORM EXEMPT UNDER 44 U.S.C 3512 INTERNET UNITED STATES OF AMERICA FORM NLRB-508 DO NOT WRITE IN THIS SPACE (2-08)NATIONAL LABOR RELATIONS BOARD Case Date Filed CHARGE AGAINST LABOR ORGANIZATION 29-CB-225449 8/13/18 OR ITS AGENTS 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 Branch 41 Brooklyn Letter Carriers NALC Union Representative to contact John P Murphy, President c. Address (Street, city, state, and ZIP code) 2262 Bath Avenue e. Cell No. d. Tel. No. 7183730618 6465096644 g. e-Mail f. Fax No. branch41@aol.com 7183735326 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) 8b1A 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 the facts constituting the alleged unfair labor practices) The Union (Branch 41) did not properly represent (b) (6), (b) (7)(C), who filed a grievance (b) (6), (b) (7)(C), when (b) (6), (b) (7)(C) was involuntarily transfered by Employer six (6) miles away, while a junior employee with same skills and limitations was not reassigned to another office. The grievance was mis-handled as 1) a relevant document clarifying contentions [016/01]/18 [016/01] letter) was not included in moving papers, 2) [0] (6), (b) (7)(C) faxed relevant evidence to Branch 41 office which was not included in case file, 3) Branch 41 officials had first hand knowledge that (b)(6), (b) (7)(C) had been (even utilizing office refrigerator during the grievance reassigned (b) (6), (b) (7)(C) process) yet the grievance paperwork cites many times, falsely " has not been transfered". The Union and USPS (b) (6), (b) (7)(C) grievance at Step B, <sup>D(G), (0)</sup>/18, including quoting a provision which does not exist: "JCAM PAGE 3-6" including, citing, falsely, several times: "grievant is still working in the (b) (6), (b) (7) including, citing irrelevant language " a third (b) will be selected" (2) including, citing irrelevant language " a third (b) will be selected" (7) including, total disreguard of (b) (6), (b) (7)(C) discrimination charge (b) (6), (b) treated differently than (b) (6), (b) (7)(C) discrimination charge (b) (6), (b) treated differently than (b) (6), (b) (7)(C) including rretaliation of (b) (6), (b) companion EEO Appeal, identified on Form 8190 emailed to (b) (6), (b) (7)(C) 4a. Tel. No. 3. Name of Employer USPS 7183483000 1050 Forbell Street c. Fax No. d. e-Mail Brooklyn, NY 11256 5. Location of plant involved (street, city, state and ZIP code) 1050 Forbell Street 6. Employer representative to contact A/Postmaster Scott Farrar Brooklyn, NY 11256 9. Number of workers employed 7. Type of establishment (factory, mine, wholesaler, etc.) 8. Identify principal product or service Thousands Mail Delivery Mail Delivery 11a. Tel. No. b. Cell No. filing charge (b) (6), (b) (7)(C (b) (6), (b) (7)(C) d. e-Mail c. Fax No. code.) (b) (6), (b) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Tel. No DECLARATION he statements therein are true to the best of my knowledge and belief. (b) (6), (b) (7)(C) łd Cell No. (b) (6), (b) (7)(C) naking charge) (Print/type name and title or office, if any) Fax No. (b) (6), (b) (7)(C) e-Mail (date)<u>8/8/18</u> Address

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 CHARGE CONTINUED

On (b) 10, 2018, (b)(6),(b)(7)(C) notified Branch 41 (b)(6),(b)(7)(C) (b)(6),(b)(7) of irregularities with the grievance decision and the Union and requested that the Union seek to have grievance reheard; Branch 41 NALC ignored the member's correspondence and did not advocate for contractual rights.

FORM NLRB-508						FORMEXE	MPT UNDER 44 U.S.C 3512	
(6-14)	UNITED STATES OF AMERICA					DO NOT WRITE IN THIS SPACE		
- K	NATIONAL LABOR RELATIONS BO			Case			Date Filed	
<b>N</b>	CHARGE AGAINST LABOR ORGAN OR ITS AGENTS	IZATION			225520		8/10/2018	
INSTRUCTIONS: F	ile an original with NLRB Regional Director for th	e region in w	hich the allec	ied unfair la	hor practice of	courred or is		
[	1. LABOR ORGANIZATION OR IT							
a. Name		OROLING				oresentative	to contact	
	ational Union of Industrial, Service, Transp	ort & Heal	th Employe	es	(b) (6), (b	) (7)(C)		
c. Address (Street (b) (6), (b) (7)(C	city state and ZIP code)				d. Tel. No.		e. Cell No. (b) (6), (b)	
					L Fax. No.		1	
					q. e-mail			
					(b) (6), (b	) (7)(C)	l.	
h. The above-name	d labor organization has engaged in and is enga	ging in unfai	r labor practic	es within th	e meaning of	section 8(b).	subsections (1) and	
(list subsections)	(A)			of the Natio	mal Labor Re	lations Act, a	and these unfair labor	
practices are pr	clices affecting commerce within the meaning of	the Act, or th	hese unfair lai	bor practice	s affecting co	mmerce with	in the meaning of	
the Act and the P	Postal Reorganization Act.							
Since on or aroun	nge (set forth a clear and concise statement of th ad become, 2018, be above-named labor org	e facts consi ganization a	lituting the all accepted uni	eged unfair i on dues fre	abor practice	s) w employe	r when it was not	
authorized to do a	so.		-					
}								
[								
3. Name of Employ			4a. Tel. No.		b. Cell No.		c. Fax No.	
SCO Family of S	iervices		516-759-1	844			516-609-9217	
1			d, e-mail					
1			dperone@:	sco.org				
	involved (street, city, state and ZIP code)						ive to contact	
1 Alexander Plac	-				Diane Per	one		
Glen Cove, NY 1	11342							
					1			
7. Type of establish School	nment (factory, mine, wholesaler, etc.)	8. Identify p Education	vincipal produ	lct or service	e	9. Number 49	of workers employed	
10. Full name of pa	ty films chame	L						
(b) (6), (b) (7)(C)	a tà rinn ở muai Ro							
11 Address of party	tiling aburno (stragt city state and 7/0 code)		11a, Tel. N		b. Cell No.		c. Fax No.	
(b) (6), (b) (7)	filing charge (street, city, state and ZIP code)			0.	(b) (6), (b) (7	<b>(C)</b>		
			d'a mail		1		<u> </u>	
			(b) (6), (	b) (7)(C)				
·····	12. DECLARATION					fel. No.		
	I declare that I have read the above charge	and that the	statements					
$(\mathbf{b})$ $(\mathbf{c})$ $(\mathbf{b})$	are true to the best of my knowled	-				Cell No.		
$X^{(b)(6),(b)}$	(1)(C)	(b) (6), (b)	(7)(C) An-In	ndividual		o) (6), (b) (7)(0	C)	
(signature of re	presentative or person making charge)	(Print/type na	ame and title or	office, if any)		ax No.		
	en e				1'	MA 110.		
					H	mail		
Address (b) (6), (b	b) (7)(C)		Date X	110/10		<del>⊳mail</del> b) (6), (b)	(7)(C)	
· · · · · · · · · · · · · · · · · · ·						s) (s), (s)		

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### 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 lifigation. The mutine 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 (6-18)

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FORM EXEMPT UNDER 44 U.S.C 3512

r.

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

DO NOT WRITE IN THIS SPACECaseDate Filed29-CB-2255238/10/2018

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

1. LABOR ORGANIZATION OR I		AGAINST WHICH CHAR	GE IS BROU	GHT	
a. Name District 6, International Union of Industrial, Service, Trans	,		b. Union Re	epresentative , President	
c. Address (Street, city, state, and ZIP code) 610, 601 US HWY 206, Unit 26 Hillsborough, NJ 08844			d. Tel. No.		e. Cell No. 908-581-2787
			g. e-mail	9@aol.com	· · · · · · · · · · · · · · · · · · ·
<ul> <li>h. The above-named labor organization has engaged in and is eng (list subsections) (A)</li> <li>practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.</li> </ul>		of the Natio	nal Labor Re	ations Act, a	and these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of the Since a date within 6 months of the filing of this charge, the has unlawfully failed and refused to provide bargaining un employer and the union.	ie above-nam	ted labor organization	by (b) offic	ers, agents,	
3. Name of Employer SCO Family of Services		4a. Tel. No. 516-759-1844 d. e-mail	b. Cell No.		c. Fax No. 516-609-9217
5. Location of plant involved (street, city, state and ZIP code) I Alexander Place Glen Cove, NY 11542		dperone@sco.org	6. Employe Dianc Per	r representati one	ve to contact
7. Type of establishment (factory, mine, wholesaler, etc.) School	8. Identify p Education	rincipal product or service	2	9. Number o 49	of workers employed
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)		11a. Tel. No.	b Cell No (b) (6), (b) (7)(C)		c. Fax No.
×		d. e-mail (b) (6), (b) (7)(C)			
12. DECLARATION i declare that I have read the above charge ate true to the best of my(b) (6), (b) (6), (b) (7)(C) (signal (the or representative or person making charge)	e and that the (b) (7)(C)	statements	(1	Tel. No. Cell No. b) (6), (b) (7)(0 Fax No.	C)
Address Same as above		Date X Sliolis		rax ND. 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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UNITED STATES OF AMERICA	DO NOT	WRITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD	. Case	Date filed
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS	29-CB-225541	08/13/2018
INSTRUCTIONS: File an original of this charge with the NLRB Regional occurred or is occurring.		
1. LABOR ORGANIZATION OR ITS AGENTS A	GAINST WHICH CHARGE IS	BROUGHT
a. Name	b. Union Representativ	e to Contact
SEIU 32BJ	(b) (6), (b) (7)(C)	
c. Address	d. Tel. No.	e.e. Cell No.
25 West 18th Street, New York, NY 10011	(b) (6), (b) (7)(C)	
	f. Fax No.	g. e-Mail
<ul> <li>h. The above-named labor organization or its agents have engaged in and a 8(b), subsection(s) (1)(A) of the National Labor Relations Act, and these up</li> </ul>		<b>C</b> 1.11
the meaning of the Act, or are unfair practices affecting commerce within		
2. Basis of the Charge (set forth a clear and concise statement of the facts co	onstituting the alleged unfair	labor practices)

Since about a date within six months prior to the filing of this charge, 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 arbitrate the grievance of (b) (6), (b) (7)(C) regarding the loss of seniority for arbitrary or discriminatory reasons or in bad faith.

Work location: 155-10 Jamaica Ave, Queens, NY

3. Name of Employer		4a. Tel. No.	4b. Cell No.
ALANTE SECURITY GROUP INC	ALANTE SECURITY GROUP INC		
			4d. e-Mail
		516 997-8855	
5. Location of Plant involved (street, city, state, and ZIP c	code)	6. Employer representativ	e to contact
522 Grand Blvd, Westbury, NY 11590-4742			
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	9. Number of Workers employed
	security servic	es	50 +
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
11. Address of party filing charge (street, city, state, and 2	IP code)		
(b) (6), (b) (7)(C)			
	12. DECLARAT	ION	
I declare that I have read the above charge and	I that the statements	therein are true to the bes	st of my knowledge and belief.
			Tel No.
(b) (6), (b) (7)(C)			
By:	(b)(6)(b)	(7)(C) , An	
	Individual		(b) (6), (b) (7)(C)
(b) (signature of representative or person making charge)		ne and title or office, if any	Cell No.
(signature of representative of person making charge)	Thirtype ha		
Address:		Date: 8/13/18	Fax No.
(b) (6), (b) (7)(C)	I YH.	11-11000	
	60.0.0		e-Mail
	60 :E H9 6	CI SUA BIOS	

### 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 (NERA), 29 U.S.C. § 151 et seq. The principal use of the information is to

Solicitation of the information on this form is authorized by the National Labor Relations Act (NERA), i29 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

FORM EXEMPT UNDER 44 U.S.C 3512

DO NOT WRITE IN THIS SPACE

Date Filed

8/14/2018

Case 29-CB-225598

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

	5			ed or is occurring.		
1. LABOR ORGANIZATION OR ITS AGENT				ttt		
a. Name Sheet Metal Worker's International Association Local Union No. 28 Metropolitan New York & Long Island			b. Union Representative to contact (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.		
		(212) 941-77	00	(646) 893-4132		
500 Greenwich Street Rm 502 NY New York 10013	[	f. Fax No.		g. e-Mail		
		(212) 226-03	04	OCC@LOCAL28OCC.COM		
h. The above-named organization(s) or its agents has (have) engaged in and is subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the Act, or the meaning of the Act and the Postal Reorganization Act.	of the Natio	nal Labor Rela	ations Act a	and these unfair labor practices		
2. Basis of the Charge (set forth a clear and concise statement of the facts co	onstituting the alleged	unfair labor p	ractices)			
		-				
See additional page						
3. Name of Employer		4a. Tel. No.		b. Cell No.		
Various Employers Delta Sheet Metal		(718) 429-87	81			
	Γ	c. Fax No.		d. e-Mail		
		(718) 429-220	04			
5. Location of plant involved (street, city, state and ZIP code)	1		6. Employ	ver representative to contact		
3935 Skillman Avenue						
NY Long Island City 11104			Title:			
7. Type of establishment (factory, mine, wholesaler, etc.) 8. Ident	tify principal product o	or service	9. Numbe	er of workers employed		
Construction Ductwo	rk					
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		
11. Address of party filing charge (street, city, state and ZIP code.)				(b) (6), (b) (7)(C)		
(b) (6), (b) (7)(C)						
		1	Na			
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 belief	Tel.	No. (b) (6), (b	b) (7)(C)		
(b) (6) (b) (7)(C) (b) (6) (c)	(b) (7)(C)	Cell	No.			
(signature of representative or person making charge) (Print/type name an		)	(b) (6), (b	o) (7)(C)		
Title:	,	Fax	No.			
(b) (6), (b) (7)(C)		e-Ma	oil			

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 refusing to process the Charging Party's grievance for arbitrary or discriminatory reasons or in bad faith.

FORM EXEMPT UNDER 44 U.S.C 3512

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FORM NLRB-508					
(6-18) UNITED STATES OF AMERICA			DO NOT I	NRITE IN T	HIS SPACE
NATIONAL LABOR RELATIONS BO CHARGE AGAINST LABOR ORGAN OR ITS AGENTS		Case	29-CB-2		Date Filed 08/16/2018
INSTRUCTIONS: File an original with NLRB Regional Director for th	he region in which the e	lleged unfair la	ibor practice o	ocurred or i	s occurring.
1. LABOR ORGANIZATION OR I	TS AGENTS AGAINST	WHICH CHAF	GE IS BROU	GHT	
a. Name United Production Workes Union, Local 17-18			b. Union Re (b) (6), (b	oresentativ ) (7)(C)	e to contect ·
c. Address (Street, city, state, and ZIP code) 735 Wythe Avenue		·	d. Tel. No. 718-875-2	140.	s. Cell No.
Brooklyn, NY11211			f. Fax. No. 718-875-2	292	
			(b) (6), (b)	(7)(C)	
h. The above-named labor organization has engaged in and is engi	aging in unfair labor, pra	ctices within U	ne meaning of	section 8(b	), subsections (1) and
(list subsections) (A) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Act, or these unfai				and these unfeir labor Nin the meaning of
2. Basis of the Charge fort forth a clear and concise statement of the Since on of around (b) (6), 2018, the above-named labor of represent its member (b) (6), (b) (7)(C) regarding monies owed to	he facts constituting the organization by its ag to <sup>women</sup> by by the belo	alleged unfair ents and repr w-employer	labor practice esentatives h in vacation	s) as failed a pay.	ad refused to
Work location: Long Island City					
3. Name of Employer Liberty House Trading Inc.	4a. Tel. 212-334	No. 1-98888	b. Cell No.		c. Fax No.
	d. e-mai	1			· ·
5. Location of plant involved (street, city, state and ZIP code) 10-16 Aquarium Drive Secaucus, N.J. 07094	<b>-</b>	<u></u>	6. Employe Bill, Own		stive IO contact
7. Type of establishment (factory, mine, wholesaler, etc.) factory	8. Identify principal pr garment manufactu	oduct or servic	;e	9. Number approxim	of workers employed ately 15
10. Full name of party filing charge (b) (6), (b) (7)(C)					
11. Address of party films charge (areat city, state and ZIP code) b) (6), (b) (7)(C)	11a. Tel	No.	b: Cett No. (b) (6), (b) (7	7)(C)	c. Fax No.
	d.e-ma (b) (6),	i (b) (7)(C)			
12. DECU: RATION I declare that I have read the above charge	N a and that the statement			iel. No.	~ ·
(b) (6), (b) (7)(C) e best of my knowle	rdge and beliaf. (b) (6), (b) (7)(C) An			Cell No. (6), (b) (7)	(C)
(b) (Signature of representative or (b) , making charge)	(PrinVtypo name and titl	e or office, il any	<i>»</i>	ex No.	• • •

-Solicitation of the information on this form is suthorized by the National Lebor Relations Act (NLRA), 29 U.S.C. § 151 et sud. The principal use of the information is to assist the National Lebor Relations Board (NLRB) in processing unfair labor practice and related proceedings or libigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2008). The NLRB will further explain these uses upon request. Disclosure of the 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 VO			FORM EXEM	PT UNDER 44 U.S.C. 3512
UNITED STATES OF AMERICA	۱	Then the P	DOFNOT WRITE	
NATIONAL LABOR RELATIONS BO		Case		Date Filed
CHARGE AGAINST LABOR ORC	GANIZATION	29-C	B-225776	9/16/2019
OR ITS AGENTS		2,20	D-223770	8/16/2018
INSTRUCTIONS:		L		
File an original anti 4 copies of this charge and an addition	al copy for each organizat	lon, each	local, and each indi	vidual named
In item 1 with the NLRB Regional Director of the region in	which the alleged unfair la R ITS AGENTS AGAINST W			
a. Name	A TO AGENTS AGAINST		b. Union Represent	
Special & Superior Officers Benevolent A	Association			drizzi, President
	city, state and ZIP code)		Tronaid 7 s. r d	
	ellwood Ave., Linde	enhurst	NY 11757	
Fax: (631) 587-3780				
e. The above-named organization(s) or its agents has (have	engaged in and is (are) eng	aning In u	nfair labor practices y	within the
meaning of section 8(b), subsection(s) (1)(A) of the Na				
practices affecting commerce within the meaning of the A				
2. Basis of the Charge (set forth a clear and concise stateme		e alleged	unfair labor practices	)
•				]
Since on or about (b) (6), (b) 2018, the	above-named labor	r organ	ization, by its a	agents, officers
and representatives, has failed and refus	ed to process the o	rievan	ce of (b) (6), (b)	(7)(C) concerning
Dist discharge, for arbitrary, capricious or				
	outorning and main	100001	10.	
				1
3. Name of Employer				ne No. & Fax No.
Rochdale Village, Inc.			r I el.: (7	18) 276-5700
5. Location of plant involved (street, city, state and ZIP code	N		6 Employo	r representative to contact
169-65 137 <sup>th</sup> Ave., Jamaica, NY 11437	9			ms, Assistant
1 109-05 137" Ave., Jamaica, NY 11437				· ·
			Director	
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal prod			of workers employed
Residential	Cooperative Apa	arumen	ts Approx.	500
10. Full name of party filing charge				
(b) (6), (b) (7)(C)				
11. Address of party filing charge (street, city, state and ZIP	code)			one No. & Fax No.
(b) (6), (b) (7)(C)			(b) (6), (l	b) (7)(C)
			1	
(b) (6), (b) (7)(C)				
(b) (6), (b) (7)(C)	ATION			
	nts therein :	are true to	the best of my knowl	edge and bellef.
ву			⊤itte An Indivi	idual
Signa				
Addre(b) (6), (b) (7)	Telephone i	No.	Date	dulan
Same as above	Same a			0 81 [ 6] 201.8
	ww			1
WILLFUL FALSE STATEMENTS ON T	HIS CHARGE CAN BE PUN	SHED B	FINE AND IMPRISO	NMENT

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(U.S. CODE, TITLE 18, SECTION 1001) 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.

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UNITED STATES OF AMERICA		DONOTY	RITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD		Case	Date filed
CHARGE AGAINST LABOR ORGANIZATION	ORITS	29-CB-225881	8/17/2018
INSTRUCTIONS: File an original of this charge with the occurred or is occurring.			
	OR ITS AGENTS AG	VINST WHICH CHARGE IS BR	OUGHT
a. Name Unite HERE Local 100		<ul> <li>b. Union Representative to Fernando Figueroa</li> </ul>	
Offile HERE LOCAL 100		Union Representati	
c. Address		d. Tel. No.	e.e. Cell No.
275 7th Ave, FI 16, New York, NY 10001-840	8	(212)541-4226	
		f. Fax No.	g. e-Mail
h. The above-named labor organization or its agents have	aning and in and and	(212)399-3005	tions within the meaning of contion
B(b), subsection(s) 1(A) of the National Labor Relations	s Act, and these unfai	ir labor practices are unfair o	ractices affecting commerce within the
meaning of the Act, or are unfair practices affecting con	nmerce within the me	eaning of the Act and the Pos	tal Reorganization Act.
2. Basis of the Charge (set forth a clear and concise state	ment of the facts con	stituting the alleged unfair la	bor practices)
Since about 2018, the above-named lab	or organization h	has restrained and coer	ced employees in the exercise
of rights protected by Section 7 of the Act by	refusing to corre	ct its seniority list as it a	applies to (b) (6), (b) (7)(C) for
reasons that are arbitrary or discriminatory re			
3. Name of Employer		4a. Tel. No.	4b. Cell No.
Compass Group		42 10. 10.	40. Gen 140.
Compass Group		4c. Fax No.	4d. e-Mai
5. Location of Plant involved (street, city, state, and 2IP or	ode)	6. Employer representative	e to contact
2400 Yorkmont Rd, Charlotte, NC 28217-451			
7. Type of Establishment (factory, mine, wholesaler)	8. Principal produc	t or service	9. Number of Workers employed
Food Service company	Food service		100 +
10. Full name of party filing charge		11a, Tel. No.	11b. Cell No.
(b) (6), (b) (7)(C)			(b) (6), (b) (7)(C)
		(b) (6), (b) (7)(C)	
ł		11c. Fax No.	11d e-Mail,;
a Address of such ( films shows ( stands site state and 7	D anda	J	(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state, and Zi			
(b) (6), (b) (7)(C)	10 0001 100		
	12. DECLARA	HON	
I declare that I have read the above charge and	that the statements	s therein are true to the bes	
(h) (G) (h) (7)(C)			Tel No.
(b) (6), (b) (7)(C)		•	
B			
	(b) (6), (b) (		(b) (6), (b) (7)(C)
(signature or representative or person making charge)	Рпплуре па	me and title or office, if any	Cell No. (b) (6), (b) (7)(C)
Address:		Date:	Fax No.
(b) (6), (b) (7)(C)		8/17/2018	
		0/11/0010	e-Maii (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 say. 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.

DBOOKFAN'NA JISOJ SOIBANC IJ EH F: 12 MECEIAED MEBECEIAED .

(6-18)		·			
UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD		<u>.</u>	DO NOT	WRITE IN TH	IIS SPACE
CHARGE AGAINST LABOR ORGA OR ITS AGENTS	Case	29-CB	-226043	Date Filed 08/20/2018	
INSTRUCTIONS: File an original with NLRB Regional Director for 1	the region in v	which the alleged unfair	abor practice	occurred or is	occuming.
1. LABOR ORGANIZATION OR I	ITS AGENTS	AGAINST WHICH CHA	RGE IS BRO	UGHT	
a. Name LOCAL 713 I.B.O.T.U			b. Union F Robert V	tepresentative ella	to contact
c. Address (Street, city, state, and ZIP code) 400 Garden City Plaza, Plaza, Suite 106, Garden City, New York 11530			d. Tel. No 516.741.	5564	e. Cell No.
			f. Fax. No 516.741		
			g. e-mail Local713	@optonline.	net
h. The above-named labor organization has engaged in and is eng (list subsections) 8(B)(1)(A) practices are practices affecting commerce within the meaning o the Act and the Postal Reorganization Act.		of the Nat	Ional Labor R	elations Act, a	nd these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of the	he facts cons	tituting the alleged unfai	labor practic	es)	<u></u>
Within the last 6 months the above union has violated the A Street in Long Island City, NY by refusing to provide them off cards purportedly signed by the employees; records of t amount of financial core membership fees, the method of the fees calculation.	a copy of t the employe	be union's constitutio es' dues remittances ;	n and bylaw from the em	s; members) ployer to the	union; and the
3. Name of Employer Platinum Amenity Services LTD		4a. Tel. No. 718.576.0795	b. Cell No		c. Fax No.
		d. <del>e</del> -mail HJ@pbsfacilityservi	ce.com		
5. Location of plant involved (straet, city, state and ZIP code) 42-12 28th St. Queens, NY 11101		L	6. Employe Hasani Jo	er representativ Des	ve to contact
7. Type of establishment <i>(factory, mine, wholesaler, etc.)</i> Residential apartment building	8. Identify p Building s	rincipal product or servic ervices	e	9. Number o About 13	f workers employed
10. Full name of party filing charge Service Employees International Union, Local 32BJ					
11. Address of party filing charge (street, city, state and ZIP code) 25 West 18th St., New York, NY 10011		11a. Tel. No. 347.534.5067	b. Cell No.		c. Fax No. 212.388.2062
		d. e-mail alang@seiu32bj.org			
12. DECLARATION I declare that I have read the above change are true to the best of my knowled	and that the :	statements	3	Tel. No. 47.534.5067 Cell No.	
(signature of regressentative coperson making charge)		v Lang, Organizer			
set and a set of the source of	үсттокур <del>е</del> па	me and the of othice, it any		<sup>г</sup> ах No. 12.388.2062	
Address 25 West 18th St., New York, NY 10011	(	Date 08/20/2018		⊢mail lang@seiu32	bj.org

### 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 NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE

Date Filed

08/21/2018

Case	
29-CB-226075	

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

	с С	•		ed of 13 occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	I CHARGE IS E	BROUGHT	
a. Name		b. Union Rep	resentative	to contact
Teamsters local 707		Kevin McC	affrey	
		Title: Unior	n nresident/	My delegate
			rprosidenti	ing dologato
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
		(800) 366-37	07	
14 Front St Ste 301 NY Hempstead 11550-3602		f. Fax No.		g. e-Mail
NT Hempsteau 11550-5002				kmccaffrey@ BT707 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 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	ractices)	
See additional page				
3. Name of Employer		4a. Tel. No.		b. Cell No.
YRC FREIGHT		(631) 242-52 c. Fax No.	01	d, e-Mail
		C. TAXINO.		u. e-ividii
5. Location of plant involved (street, city, state and ZIP code)				ver representative to contact
50 Burt Dr			John Sch	
NY Deer Park 11729-5786				minal manager
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed
Trucking	Delivery of goods		50	
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
11. Address of party filing charge (street, city, state and ZIP code.)				(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)				
		Tel.	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), (t	b) (7)(C)
	$(\mathbf{b}) (0) (\mathbf{b}) (7) (0)$	Cell	No.	
<sub>By</sub> (b) (6), (b) (7)(C)	b) (b), (b) (7)(C)			
By (b) (6), (b) (7)(C) (signature of representative or person making charge) (Print/type	b) (6), (b) (7)(C) name and title or office, if any		(b) (6), (b	b) (7)(C)
By (b) (6), (b) (7)(C) (signature of representative or person making charge) (Print/type	name and title or office, if any Title:	y) Fax		b) (7)(C)
(signature of representative or person making charge) (Print/type	name and title or office, if any	Fax	No.	b) (7)(C)
By (b) (6), (b) (7)(C) (signature of representative or person making charge) (Print/type (b) (6), (b) (7)(C) Address	name and title or office, if any	Fax e-M	No. ail	b) (7)(C) ), (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)

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.

UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE			
NATIONAL LABOR RELATIONS BOARD		Case	Date filed		
CHARGE AGAINST LABOR ORGANIZATIO	N OR ITS	29-CB-226138	8/21/2018		
INSTRUCTIONS: File an original of this charge with the occurred or is occurring.	e NLRB Regional D	Director of the region in which	ch the alleged unfair labor practice		
1. LABOR ORGANIZATION	OR ITS AGENTS AG	AINST WHICH CHARGE IS BR			
a. Name		<ul> <li>b. Union Representative to</li> </ul>			
Local 153, OPEIU		Seth Gok	Istein		
c. Address		d. Tel. No.	e. Cell No.		
265 W 14 <sup>th</sup> Street #610		212-741-8282			
New York, NY 10011		f. Fax No.	g. e-Mail		
<ul> <li>h. The above-named labor organization or its agents hav 8(b), (1)(A) of the National Labor Relations Act, and th the Act, or are unfair practices affecting commerce with</li> <li>2. Basis of the Charge (set forth a clear and concise state</li> </ul>	ese unfair labor prac hin the meaning of th	tices are unfair practices affect the Act and the Postal Reorgan	ting commerce within the meaning of ization Act.		
Within the past six months, the above-name reasons that are arbitrary, discriminatory, o		ation has failed to proce			
3. Name of Employer		4a. Tel. No.	4b. Cell No.		
UVV 82 CO		646-997-3840 4c. Fax No.	4d. e-Mail		
120 <u>₹</u> 1201		HU. T AX NO.			
5. Location of Plant involved (street, city, state, and ZIP c	ode)	6. Employer representative	to contact		
6 MetroTech Center, 3 <sup>rd</sup> Floor Brooklyn, NY 11201		Steven Weisenhol			
7. Type of Establishment (factory, mine, wholesaler)	8. Principal produc	ct or service	9. Number of Workers employed		
Universit	Education				
10. Full name opparty filing charge (b) (6), (b) (7)(C)		11a. Tel. No.	11b. Cell No. (b) (6), (b) (7)(C)		
		11c. Fax No.	11d e-Mail		
11. Address of party filing charge ( <i>street, city, state, and</i> Z (b) (6), (b) (7)(C)	IP code)	1			
I declare that I have read the above charge and	12. DECLARA		t of my knowledge and belief		
(b) (6), (b) (7)(C)	that the statement	s merein are une to the bes	Tel No.		
	(b) (6), (b)	(7)(C) an individual			
By 	Print/type na	ame and title or office, if any	Cell No.		
			Same as above		
Address: Same as above		Date:	Fax No.		
		8/71/18	e-Mail		

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# 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		DO NOT W	RITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD		Case	Date filed
CHARGE AGAINST LABOR ORGANIZATION AGENTS		29-CB-226150	8/21/2018
NSTRUCTIONS: File an original of this charge with the occurred or is occurring.			
	OR ITS AGENTS AGA	INST WHICH CHARGE IS BR	
a. Name National Association of Letter Carriers, Branc	h 41	<ul> <li>b. Union Representative to John P. Murphy, Ur</li> </ul>	
c. Address 2262 Bath Ave		d. Tel. No. 718-373-0681	e. Cell No.
Brooklyn, NY 11214		f. Fax No.	g. e-Mail
h. The above-named labor organization or its agents have 8(b), (1)(A) of the National Labor Relations Act, and the the Act, or are unfair practices affecting commerce with	ese unfair labor practi in the meaning of the	ces are unfair practices affect Act and the Postal Reorgani	ting commerce within the meaning of ization Act.
2. Basis of the Charge, (set forth a clear and concise stater			
Since on or about provide 2018, the Union h placed off duty without pay for reasons that			
Since on or about <sup>(b) (6), (b) (7)(C)</sup> 2018, the Un of removal for reasons that are arbitrary, di			grievance related to my notice
3. Name of Employer United States Postal Service		4a. Tel. No. 347-893-9353	4b. Cell No.
		4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP co	ode)	6. Employer representative	to contact
1200 51 <sup>st</sup> Street, Brooklyn, NY 11219		Amy Guitonez, Su	pervisor
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	t or service	9. Number of Workers employed
Postal Service	Mail Service		
10. Full name of party filing charge (b) (6), (b) (7)(C)		11a. Tel. No.	11 <u>b Cell No</u> (b) (6), (b) (7)(C)
		11c. Fax No.	$\frac{11d \text{ e-Mail}}{(b) (6), (b) (7)(C)}$
11. Address of party filing charge (street, city, state, and Zi	P code)		
(b) (6), (b) (7)(C)	10 0501 40 47		•
	12. DECLARAT		
I declare that I have read the above charge and	that the statements	therein are true to the best	Tel No.
(b) (6), (b) (7)(C)	(b) (6), (b	(7)(C)	
By: (signature of representative or person making charge)		me and tille or office, if any	Cell No. (b) (6), (b) (7)(C)
Address: (b) (6), (b) (7)(C)	, · · la · · · · · · · · · · · · · · · ·	Date:	Fax No.
		8/21/18	e- <u>Mail</u> (b) (6), (b) (7)(C)
LLFUL FALSE STATEMENTS ON THIS CHARGE CAN B	E PUNISHED BY FR	NE AND IMPRISONMENT (	U.S. CODE. TITLE 18. SECTION 1001)

PRIVACY ACT STATEMENT

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 untail 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 of vill cause the NLRB to processes.

RECEIVED NLRB-REGION 29

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

DO NOT WRITE IN THIS SPACE Case Date Filed 29-CB-226351 8/27/2018

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

	ie region in wi	the blieged dringin lab	or practice		occurring.	
1. LABOR ORGANIZATION OR IT	S AGENTS A	GAINST WHICH CHARC				
a. Name District Council 1707, AFSCME				epresentative lian, Executi		
c. Address (Street, city, state, and ZIP code) 420 West 45th Street UNION ATTORNEY: Thomas Murray, Esquire New York, NY 10036 900 Third Avenue, Suite 2100			d. Tel. No 212-219-		e. Cell No.	
New York, NY 10022- Telephone: 212-356-02	4869 225		f. Fax. No			
Fax Number: 646-473- Email: tinurray@cwsr			g. e-mail			
h. The above-named labor organization has engaged in and is enga (list subsections) 8(b) (2) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.		of the Nation	nal Labor R	elations Act, a	nd these unfair labor	
2. Basis of the Charge (set forth a clear and concise statement of th UFCW Local 2013 ("UFCW") is party to a collective barga covering home health care employees. MZL entered into an assets of MZL which included work performed by UFCW's then engaged in unlawful acts of recognition and bargaining violation of Section 8(b) (2) of the Act.	ining agree n agreement s bargaining	ment ("CBA") with M with Allen Health Car unit members. District	ZL Home re Service ct Council	Care Agency s ("Allen") to 1707, AFSC	o acquire certain CME ("AFSCME")	
3. Name of Employer Allen Health Services		4a. Tel. No.	b. Cell No. c. Fax No.		c. Fax No.	
MZL Home Care Agency		d. e-mail				
5. Location of plant involved (street, city, state and ZIP code) Marie Adreacchio, President 201 70-00 Austin Street Forest Hills, NY 11375				6. Employer representative to contact Scott A. Faust, Esq/ Proskauer Rose LLP One International Place Boston, MA 02110		
7. Type of establishment <i>(factory, mine, wholesaler, etc.)</i> Home health care	8. Identify p Home hea	rincipal product or service Ith care aids	í	9. Number o	of workers employed	
10. Full name of party filing charge United Food and Commercial Workers Union Local 2013						
11. Address of party filing charge; (street, city, state and ZIP code) 9235 4th Avenue, Brooklyn, NY 11209		11a. Tel. No. 1-800-393-1135	b. Cell No	b. Cell No. c. Fax No. 718-745-4690		
		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.			-	Tel. No. 856-795-218	31	
Mark E. Billano/ml	Mark I	E. Belland, Esquire		Cell No.		
(signature of representative or person making charge)	(Print/type na	ame and lille or office, if any)		Fax No.		
Address 1526 Berlin Road, Cherry Hill, NJ 08003		Date Aug 24, 2018		e-mail mbelland@c	obbblaw.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.

Case		Dat
	29-CB-226428	

DO NOT WRITE IN THIS SPACE

te Filed 08/29/2018

INSTRUCTIONS: File an original with NLRB Regional Director for th	e region in which the alleged	unfair labor p	ractice occur	red or is occurring.	
1. LABOR ORGANIZATION OR IT	S AGENTS AGAINST WHIC	- CHARGE	S BROUGHT	Г	
a. Name		b. Union R	epresentativ	e to contact	
International Union Painters and Allied Trades DC9			w	I	
	Title: Die	anton of Son	icina		
			ector of Serv	acing	
c. Address (Street, city, state, and ZIP code)	•	d. Tel. No.		e. Cell No.	
	(212) 255-	2950			
45 West 14th Street, NY, NY NY New York 10011		f. Fax No.		g. e-Mail	
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (3) are unfair practices affecting commerce within the meaning of the A meaning of the Act and the Postal Reorganization Act.		ional Labor R lices are unfa	elations Act, ir practices a		
2. Basis of the Charge (set forth a clear and concise statement of the	he facts constituting the allege	d unfair labo	r practices)		
See additional page		4a. Tel. Nc			
3. Name of Employer		1		b. Cell No.	
Sol Rubin Painting Corp.		(631) 454-2500 c. Fax No.		d. e-Mail	
			- <u>r</u>		
5. Location of plant involved (street, city, state and ZIP code)			6. Employer representative to contact		
88 Toledo Street NY Farmingdale 11735		Laurence Rubin Title: President			
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product			er of workers employed	
		Of Service		,	
	L	11a. Tel. N	<u> </u>	h Coll No	
10. Full name of party filing charge				b. Cell No.	
Laurence Rubin Sol Rubin Pointing Corn		(631) 454-2500 c. Fax No.		d. e-Mail	
Sol Rubin Painting Corp.			LRubin@solrubin.com		
11. Address of party filing charge (street, city, state and ZIP code.)		·			
88 Toledo Street					
NY Farmingdale 11735 12. DECLARATION			I. No.		
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 belief. (914) 949-9075					
ByChristopher Smith Christopher Smith Cell No.					
(signature of representative or person making charge) (Print/type name and title or office, if any) Title: Fax No.					
1311 Mamaroneck Ave Ste 170		<u> </u>			
White Plains NY 10605-5225				mith111@gmail.com	
Address	(date)				
WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUI	NISHED BY FINE AND IMPR	ISONMENT (	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)(3)

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

FORM EXEMPT UNDER 44 U.S.C 3512

FORM NLRB-508						WFT ONDER 44 Q.3.0 3312
(6-18) UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION			DO NOT WRITE IN THIS SPACE			
			Case		Date Filed	
OR ITS AGENTS 29-CB-			-226468		6/29/2018	
INSTRUCTIONS: File an original with NLRB'Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.						occurring.
1. LABOR ORGANIZATION OR IT	S AGENTS A	GAINST WI	HICH CHARC	SE IS BROU	GHT	
a. Name United Food & Commercial Workers Union Local 1500				b. Union Representative to contact Aly Waddy		
c. Address (Street, city, state, and ZIP code) 425 Merrick Ave.			d. Tel. No. 1-800-522	-0456	e. Cell No.	
Westbury, NY 11590			f. Fax. No.			
			g. e-mail Awaddy@ufcw1500.org			
h. The above-named labor organization has engaged in and is enga	ing in unfall	labor practi	ces within the	meaning of	section 8(b),	subsections (1) and
(list subsections)						nd these unfair labor
practices are practices affecting commerce within the meaning of	the Act, or th	nese unfair la	bor practices	affecting co	mmerce 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 facts constituting the alleged unfair tabor practices) During the past six months, the Union has engaged in conduct that restrained, coerced, and threatened employees in the exercise of the rights guaranteed by Section 7 of the Act, including, but not limited to, utilizing an individual, while employed by Target as a supervisor within the meaning of Section 2(11) of the Act, as an agent for organizing, with said individual unlawfully pressuring employees to sign union authorization cards, among other things, and subsequently utilizing the same individual as an agent or employee of the Union to threaten, mislead, and coerce Target employees in the exercise of their Section 7 rights.						
3. Name of Employer Target Corporation		4a. Tel. No (631) 760		b. Cell No. (917) 732	-3504	c. Fax No. (631) 760-3281
		d. e-mail Kenneth.H	igueroa@ta	arget.com		
5. Location of plant involved (street, city, state and ZIP code) 124 E. Jericho Turnpike Huntington Station, New York 11746			6. Employer representative to contact Kenneth Figueroa			
7. Type of establishment (factory, mine, wholesaler, etc.) Retail store	8. Identify p Retail sale		uct or service	) ?	9. Number of 234	of workers employed
10. Full name of party filing charge Target Corporation						
11. Address of party filing charge (street, city, state and ZIP code) 124 E. Jericho Turnpike Huntington Station, New York 11746		11a. Tel. N (631) 760		b. Cell No. (917) 732	b. Cell No. (917) 732-3504 c. Fax No: (631) 760-3281	
d. e-mail Kenneth.Figueroa@			ltarget.com			
12. DECLARATION I declare that I have read the above charge and that the statements				Tel. No. (612) 313-7602		
Brow B. Kalis, Attorney				Cell No. (952) 240-4558		
(signature of representative or person making charge) (Print/type name and title or office, if any)				Fax No. (612) 395-5568		
Littler Mendelson, PC Address 80 S. 8th Street, Suite 1300, Minneapolis, MN 55402 Date Aug 29, 2018				e-mail kalis@little	r.com	

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

DO NOT WRITE IN THIS SPACE				
Case	Date Filed			
29-CB-226609	8/30/2018			

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

					occurring.		
1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT							
a. Name Retail, Wholesale & Department Store Union, UFCW				b. Union Representative to contact David Jimenez			
c. Address (Street, city, state, and ZIP code) 370 7th Ave, Fl 14, New York, NY 10001-3980			d. Tel. No. (212)684-		e. Çell No.		
			f. Fax. No.		• • • • • • • • • • • • • • • • • • • •		
			g. e-mail				
h. The above-named labor organization has engaged in and is engagin	ng in unfair	labor practices within the	e meaning of	section 8(b),	subsections (1) and		
(list subsections) 8(b)(1)(A)		of the Natio	nal Labor Re	ations Act, a	and these unfair labor		
practices are practices affecting commerce within the meaning of th the Act and the Postal Reorganization Act.	e Act, or th	nese unfair labor practices	affecting co	mmerce with	in the meaning of		
2. Basis of the Charge (set forth a clear and concise statement of the I	facts consti	ituting the alleged unfair l	abor practice	s)			
Since about August 2018, the above named labor organization has restrained and coerced employees in the exercise of rights protected by Section 7 of the Act by Union (b) (6), (b) (7)(C) stating that employees are taking bribes from the Employer in exchange for renouncing their Union support.							
		4a. Tel. No. (718)275-6704	b. Cell No. c. Fax N		c. Fax No.		
		d. e-mail					
5. Location of plant involved (street, city, state and ZIP code) 5734 Main St, Flushing, NY 11355-5334			6. Employer representative to contact Aristeo Paredez				
7. Type of establishment (factory, mine, wholesaler, etc.)8. Identify principal product or serviceCar WashCar Wash Services			e 9. Number of workers employed 20				
10. Full name of party filing charge (b) (6), (b) (7)(C) an individual							
11. Address of party filing charge (street, city, state and ZIP code)11a. Tel. No.(b) (6), (b) (7)(C)11a. Tel. No.				b. Cell No. (b) (6), (b) (7)(C)			
		d. e-mail					
12. DECLARATION I declare that I have read the above charge and that the statements (b) (c) (c) (c) are true to the best of my knowledge and belief.							
(b) (6), (b) (7)(C)       an individual         (signature of representative or person making charge)       (Print/type name and litle or office, if any)    Fax No.							
				Fax No.			
Address same as 11 Date 8/24/18				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.

UNITED STATES OF AMERICA	DO NOT WRITE IN THIS SPACE					
NATIONAL LABOR RELATIONS BOAR	Case	Date filed				
CHARGE AGAINST LABOR ORGANIZATIO AGENTS	N OR ITS	29-CB-226727	8/29/2018			
INSTRUCTIONS: File an original of this charge with the	ne NLRB Regional Di	irector of the region in whic	the alleged unfair labor practice			
occurred or is occurring.						
a. Name	OR 113 AGENTS AG	BAINST WHICH CHARGE IS BROUGHT b. Union Representative to Contact				
SEIU 32BJ		Dania Blanco				
c. Address	d. Tel. No.	e. Cell No.				
25 West 18th Street, 5th Floor	(212) 388-3800					
New York, NY 10011-4676		f. Fax No.	g. e-Mail			
h. The above-named labor organization or its agents hav	e engaged in and are	engaging in unfair labor prac	L ctices within the meaning of section			
8(b), subsection(s) (1)(A) of the National Labor Relation	ons Act, and these unf	air labor practices are unfair	practices affecting commerce within			
the meaning of the Act, or are unfair practices affectin						
2. Basis of the Charge (set forth a clear and concise state	ement of the facts con	stituting the alleged unfair lat	bor practices)			
Since about (b) (6), 2018, the above-nam	ed labor organiza	ation has restrained and	coerced employees in the			
exercise of rights protected by Section 7 of						
regarding <sup>1000</sup> discharge for arbitrary or dis	•					
discharge for arbitrary of this	chiminatory reaso	ns of in bag faith.				
3. Name of Employer		4a. Tel. No.	4b. Cell No.			
NYC School Support Services, Inc.		(718) 614-3400				
Address: 321 West 44 <sup>th</sup> Street, Suite 601		4c. Fax No.	4d. e-Mail			
New York, NY 10036						
5. Location of Plant involved (street, city, state, and ZIP of	vode)	6 Employer representative	to contact			
		6. Employer representative to contact				
P.SI.S. 270Q		Stephen Brennan				
233-15 Merrick Blvd.						
Laurelton, NY						
7. Type of Establishment (factory, mine, wholesaler)	8. Principal produc		9. Number of Workers employed			
School support service provider	Custodial serv					
10. Full name of party filing charge	······································	11a. Cell. No.	11b. Alt. No.			
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)			
		11c. Fax No.	11d e-Mail			
			(b) (6), (b) (7)(C)			
11. Address of party filing charge (street, city, state, and 2	(IP code)	<u></u>				
(b) (6), (b) (7)(C)						
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.			
(b) (6), (b) $(7)(C)$						
By:	(b) (6), (	b) (7)(C)				
(b)						
(signature of represel(b)ve or person making charge)	me and title or office, if any	Cell No.				
		(b) (6), (b) (7)(C)				
Address:		Fax No.				
(b) (6), (b) (7)(C)	l.					
	, 2018	e-Mail				
		(b) (6), (b) (7)(C)				

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### 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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