			MOUTE IN TIME OF LOT
UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOAR		Case DO NOT V	Date filed
CHARGE CAINST LABOR ORGANIZATIO		0000	
AGENTS		29-CB-25/02	> - -
NSTRUCTIONS: File an original of this charge with courred or is occurring.			
1. LABOR ORGANIZATIO	N OR ITS AGENTS AG	AINST WHICH CHARGE IS B	
Name National Association of Letter Carriers, Bra	nch 3 41	b. Union Representative (b) (6), (b) (7)(C)	to Contact
Address -347 West 41st-St, New York, NY 10036	-	d. Tel. No. (7/8) 373 (212)714-9899- 0(8
2262 Both Ave Brooklyn Ny	1/214	f. Fax No.	g. e-Mail
a. The above-named labor organization or its agents hat 8(b)(1)(A) of the National Labor Relations Act, and the the Act, or are unfair practices affecting commerce with the Act.	nese unfair labor practi	ces are unfair practices affect	ting commerce within the meaning of
Basis of the Charge (set forth a clear and concise sta	atement of the facts co	nstituting the alleged unfair la	abor practices)
Since about six months from the filing of thi			
coerced employees in the exercise of rights			
of employee (b) (6), (b) (7)(C) and refusing			
overtime for arbitrary or discriminatory reas			• • • • • • • • • • • • • • • • • • •
overallie for a block of a boundary reas			
			nation has restorized and
Since about six months from the filing of thi			
coerced employees in the exercise of rights			
of employee (b) (6), (b) (7)(C) and refusing			garding a pay adjustment over
(b) (6), (b) (7)(C) pay for arbitrary or a	discriminatory reas	sons or in bad faith.	
	9204		
Name of Employer		4a. Tel. No.	4b. Cell No.
United States Postal Service			
			4d e-Mail
		4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIF	code)	4c. Fax No. 6. Employer representativ	
	2 code)		
 Location of Plant involved (street, city, state, and ZIF 1915 Fulton Street, Brooklyn, NY 11233 Type of Establishment (factory, mine, wholesaler) 	8. Principal produ	6. Employer representativ	
1915 Fulton Street, Brooklyn, NY 11233		6. Employer representation	ve to contact
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge	8. Principal produ	6. Employer representation	e to contact 9. Number of Workers employed
<u>1915 Fulton Street, Brooklyn, NY 11233</u> Type of Establishment (<i>factory, mine, wholesaler</i>) Postal Office	8. Principal produ	6. Employer representation of or service ce	9. Number of Workers employed
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge	8. Principal produ	6. Employer representativ ct or service ce 11a. Tel. No.	9. Number of Workers employed
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge	8. Principal produ	6. Employer representativ ct or service ce 11a. Tel. No. (b) (6), (b) (7)(C)	9. Number of Workers employed 1000 11b. Cell No.
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge	8. Principal produ Postal Servio	6. Employer representativ ct or service ce 11a. Tel. No. (b) (6), (b) (7)(C)	9. Number of Workers employed 1000 11b. Cell No.
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1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state, and (b) (6), (b) (7)(C)	8. Principal produ Postal Servic	6. Employer representative of or service 20 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No.	9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail
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1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state, and (b) (6), (b) (7)(C) I declare that I have read the above charge and	8. Principal produ Postal Servic	6. Employer representative of or service 20 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. ATION 25 therein are true to the be	e to contact 9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No.
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, stale, and (b) (6), (b) (7)(C) I declare that I have read the above charge and (b) (6), (b) (7)(C)	8. Principal produ Postal Servic (ZIP code) 12. DECLAR/ Ind that the statement (b) (6), (b)	6. Employer representative ct or service 2e 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. ATION 2s therein are true to the be	e to contact 9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail est of my knowledge and belief. Tel No. (b) (6), (b) (7)(C)
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (<i>factory, mine, wholesaler</i>) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (<i>street, city, stale, and</i> (b) (6), (b) (7)(C) I declare that I have read the above charge and (b) (6), (b) (7)(C)	8. Principal produ Postal Servic (ZIP code) 12. DECLAR/ Ind that the statement (b) (6), (b)	6. Employer representative of or service 20 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. ATION 25 therein are true to the be	e to contact 9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No.
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, stale, and (b) (6), (b) (7)(C) I declare that I have read the above charge and (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (c) <	8. Principal produ Postal Servic (ZIP code) 12. DECLAR/ Ind that the statement (b) (6), (b)	6. Employer representative ct or service 2e 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. ATION the there in are true to the best (7)(C) arrie and title or office, if any	e to contact 9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No. (b) (6), (b) (7)(C) Cell No.
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, stale, and (b) (6), (b) (7)(C) I declare that I have read the above charge and (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (c) <	8. Principal produ Postal Servic (ZIP code) 12. DECLAR/ Ind that the statement (b) (6), (b)	6. Employer representative ct or service 2e 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. ATION 2s therein are true to the be	e to contact 9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail est of my knowledge and belief. Tel No. (b) (6), (b) (7)(C)
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, stale, and (b) (6), (b) (7)(C) I declare that I have read the above charge and (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	8. Principal produ Postal Servic (ZIP code) 12. DECLAR/ Ind that the statement (b) (6), (b)	6. Employer representative ct or service 2e 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. ATION the there in are true to the best (7)(C) arrie and title or office, if any	e to contact 9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No. (b) (6), (b) (7)(C) Cen No. Fax No.
1915 Fulton Street, Brooklyn, NY 11233 7. Type of Establishment (factory, mine, wholesaler) Postal Office 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, stale, and (b) (6), (b) (7)(C) I declare that I have read the above charge and (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (c) <	8. Principal produ Postal Servic (ZIP code) 12. DECLAR/ Ind that the statement (b) (6), (b)	6. Employer representative ct or service 2e 11a. Tel. No. (b) (6), (b) (7)(C) 11c. Fax No. ATION the there in are true to the best (7)(C) arrie and title or office, if any	e to contact 9. Number of Workers employed 1000 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No. (b) (6), (b) (7)(C) Cen No.

FORM NLRB-508 (4-19)

	L.	JNITED S	STATE	SOF	AMER	ICA	
1	NATI	ONAL LA	BOR	RELAT	TIONS	BOAR	D
CHAI	RGE	AGAIN	ST L/	ABOR	ORG	ANIZA	ATION
		OR	ITS	AGEN	ITS		

Case 29-CB-251274 Date Filed

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

	TO ACENTO	A CAINET MUICH CHAR		CUT		
1. LABOR ORGANIZATION OR IT	S AGENTS A	AGAINST WHICH CHAR	-			
				Inion Representative to contact ristopher S. Baluzy, Esq.		
c. Address (Street, city, state, and ZIP code) 370 Seventh Avenue			d. Tel. No. 212-871-0)535	e. Cell No.	
14th Floor New York, NY 10001			f. Fax. No. 646-599-9575			
			g. e-mail cbaluzy@	carykanelav	w.com	
 h. The above-named labor organization has engaged in and is enga (1)(A) and (b)(2) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 		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 the See attached "Basis of the Charge."	he facts const	lituting the alleged unfair	labor practice	95)	.» Э	
3. Name of Employer Housing Works, Inc.		4a. Tel. No.	b. Cell No.		c. Fax No.	
		d. e-mail				
 5. Location of plant involved (street, city, state and ZIP code) 57 Willoughby Street, 2nd Floor Brooklyn, NY 11201 			6. Employe Glenn Sm		ive to contact	
7. Type of establishment (factory, mine, wholesaler, etc.) Non-profit community-based social services organization		principal product or servic , healthcare and suppo		9. Number 600+	of workers employed	
10. Full name of party filing charge Glenn Smith, Esq.	1	2				
11. Address of party filing charge (street, city, state and ZIP code) Seyfarth Shaw LLP, 620 Eighth Avenue, New York, NY 10	0018	11a. Tel. No. 212-218-3502	b. Cell No.	b. Cell No. c. Fax No. 917-344-1399		
		d.e-mail gsmith@seyfarth.com	n			
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. 212-218-3502		
/s/ Glenn Smith	10 Tool 10 Tool 10	enn Smith, Esq.		Cell No.		
(signature of representative or person making charge)	(Print/type na	ame and title or office, if any)		Fax No. 917-344-1399		
Seyfarth Shaw LLP, 620 Eighth Avenue, New York, NY Address 10018 Date 11/01/2019				e-mail gsmith@seyfarth.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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DO NOT WRITE IN THIS SPACE					
29-CB-251127	Date Filed				

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 I	TS AGENTS /	AGAINST WHICH CHAR	GE IS BROU	GHT	
a. Name 32BJ SEIU			b. Union Representative to contact Carlos Garcia		
c. Address (Street, city, state, and ZIP code) 25 West 18th St.,			d. Tel. No. 212/388-3		e. Cell No.
New York, NY 10011			f. Fax. No.		
			g. e-mail		
 h. The above-named labor organization has engaged in and is eng I(A) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 	of the Act, or th	of the Natio	nal Labor Re s affecting co	elations Act, a mmerce with	ind these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of t During the last 6 months prior to the filing of this charge t and 2019, greivances of the below-named employ	the above-na	med labor organizatio	n has failed	and refused	d to process the
3. Name of Employer NYC SSS, Inc.		4a. Tel. No.	b. Cell No.		c. Fax No.
321 West 44th Street NY, NY 10036		d. e-mail			
5. Location of plant involved (street, city, state and ZIP code) Q 129, College Point			6. Employe	r representati	ive to contact
7. Type of establishment (factory, mine, wholesaler, etc.) support services	8. Identify p custodial	rincipal product or service services	9	9. Number (100+	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, Cell No. (b) (6), (b) (7		c. Fax No.
(b) (6), (b) (7)(C)		d. e-mail			
(b) (6), (b) (7)(C) ave read the above charge e to the best of my knowle	e and that the	statements f.		Fel. No.	
		an individual		Cell No. b) (6), (b) (7)(C	3)
(signature of representative or person making charge)	(нтицуре па			Fax No.	·····
Address	<u>-</u>	Date	'	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

TNTERNET FORM NLRB-508 (2-08)

FORM EX	EMPT UN	DER 44 U	S.C	3512
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Date Filed

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NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST LABOR ORGANIZATION
OR ITS AGENTS

UNITED STATES OF AMERICA

29-CB-251802

Case

INSTRUCTIONS: File an original with NLRB Regional Director for the					ed or is occurring.		
1. LABOR ORGANIZATION OR ITS	S AGENTS AGAINST WHICH						
a. Name 1199 SEIU				esentative	to contact		
1188 3210				Patrick Clarke			
		Title:	Union	Organizer			
c. Address (Street, city, state, and ZIP code)		d. Tel. (212) 20		3	e. Cell No.		
310 West 43rd St		f. Fax N		•	g. e-Mail		
NY New York 10036							
 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. 	of the Natio	onal Labo	r Rela	tions 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 alleged	d unfair la	abor pr	actices)			
See additional page							
2. See							
3. Name of Employer		4a. Tel.			b. Cell No.		
SC & BP Services		(908) 912-2700		0	d. e-Mail		
		c. Fax I	NO.		u. e-mai		
5. Location of start involved (street site state and 7/0 code)				C. Employ			
 Location of plant involved (street, city, state and ZIP code) 1420 East Linden Ave 				Peter Y G	ver representative to contact Gerges		
NJ Linden 07036				Title: Hun	nan Resources Director		
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or servic	e	9. Numbe	er of workers employed		
10. Full name of party filing charge		11a. Te	I. No.		b. Cell No.		
Peter Y Gerges		(908) 91		0			
SC & BP Services	×	c. Fax I	No.		d. e-Mail pgerges@confidencems.com		
11. Address of party filing charge (street, city, state and ZIP code.)		L			pgerges@conndencents.com		
1420 East Linden Ave NJ Linden 07036-							
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to	o the best of my knowledge and belie	ef.	Tel. N		12-2700		
By Peter Y Gerges	Peter Y Gerges		Cell N	10.			
	e name and title or office, if any Title: Human Resources D		Fax N	lo.			
1100 Fact Linder Ave	Title: Furnari Resources L	ALCOLUL					
1420 East Linden Ave Linden NJ 07036	11/2004	12-40-42	e-Ma		es@confidencems.com		
Address	(date)_11/7/2019	12.40.42		pgerge			

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

Basis of the Charge

8(b)(3)

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

UNITED STATES OF AMERICA		DO NOT W	RITE IN THIS SPACE				
NATIONAL LABOR RELATIONS BOARD			Date filed				
CHARGE AGAINST LABOR ORGANIZATIO		Case 29-CB-25/750	HALA				
INSTRUCTIONS: File an original of this charge with the occurred or is occurring.	ne NLRB Regional Di	rector of the region in whic	h the alleged unfair labor practice				
1. LABOR ORGANIZATION	OR ITS AGENTS AGA	INST WHICH CHARGE IS BR					
a. Name		 b. Union Representative to 	Contact				
1199 SEIU United Healthcare Workers East		Joan Steaddler Union Representativ	ve				
c. Address 310 West 43rd Street, New York, NY 10036		d. Tel. No. (212)585-1890	e.e. Cell No.				
		f. Fax No.	g. e-Mail				
 h. The above-named labor organization or its agents hav 8(b)(1)(A) of the National Labor Relations Act, and the the Act, or are unfair practices affecting commerce with 	se unfair labor practic hin the meaning of the	es are unfair practices affecti Act and the Postal Reorgan	ng commerce within the meaning of ization Act.				
2. Basis of the Charge (set forth a clear and concise state	ement of the facts con	stituting the alleged unfair lab	oor practices)				
in the exercise of rights protected by Section 7 of retro-pay for the period of December 2018 to Aug arbitrary or discriminatory reasons or in bad faith. Since on or about 2019 the above-named la rights protected by Section 7 of the Act by refusin position based on seniority, for arbitrary or dis Since about 6 months from the filing of this charge in the exercise of rights protected by Section 7 of	Since about 6 months from 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 process the grievance of (b) (6), (b) (7)(C) regarding retro-pay for the period of December 2018 to August 2019 owed for a modification of work that occurred at the workplace, for arbitrary or discriminatory reasons or in bad faith. Since on or about 2019 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) (6), (b) (7)(C) regarding bid for a new position based or seniority, for arbitrary or discriminatory reasons or in bad faith. Since about 6 months from the filing of this charge the above-named labor organization has restrained and coerced employees in the exercise of in the exercise of rights protected by Section 7 of the Act by refusing to process the grievance of (b) (6), (b) (7)(C) regarding bid for a new position based or bid faith. Since about 6 months from 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 process the grievance of (b) (6), (b) (7)(C) regarding bid for a new position based or bid faith.						
3. Name of Employer Southside Hospital, part of Northwell Health		4a. Tel. No.	4b. Cell No.				
		4c. Fax No.	4d. e-Mail				
5. Location of Plant involved (street, city, state, and ZIP c	ode)	6. Employer representative	to contact				
301 East Main St., Bay Shore, NY 11706	,	Irene Faronda Direc	,				
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product		9. Number of Workers employed				
Hospital		lealth Services	100				
10. Full name of party filing charge	incurour and i	11a. Tel. No.	11b. Cell No.				
(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 (<i>street, city, state, and Z</i>	(IP code)	·					
(b) (6), (b) (7)(C)	12. DECLARAT	ION					
(b) (6), (b) (7)(C)			of my knowledge and belief.				
	(b) (6), (b)	(7)(C)	Tel No. (b) (6), (b) (7)(C)				
e)	Print/type nar	ne and title or office, if any	Cell No. ((b) (6), (b) (7)(C)				
	I	Date:	Fax No.				
(b) (6), (b) (7)(C)		11/4/19	e-Mail (b) (6), (b) (7)(C)				

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

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 *et seq.* The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related 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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DO NOT WRITE IN THIS	SPACE
	Date Filed
29-CB-251763	11/14/19

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

1. LABOR ORGANIZATION OR	ITS AGENTS AGAINST WHICH CH	ARGE IS BROUGHT	
a. Name	· · · · ·	b. Union Represer	ntative to contact
IAM, District 15		Kevin Diaz	
<u></u>			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	e. Cell No.
652 4th Avenue		718 422 0090	
Brooklyn, NY 11232		f. Fax. No.	
		g. e-mail	
h. The above-named labor organization has engaged in and is en	gaging in unfair labor practices withi	n the meaning of section	n 8(b) and (list subsections)
(1)(A)		-	Act, and these unfair labor
practices are practices affecting commerce within the meaning			
the Act and the Postal Reorganization Act.			o maning of
2. Basis of the Charge (set forth a clear and concise statement of	the facto especification the allocad up	fair (abor prodices)	
Since on or about (0) (6), (b) (7)(C) 2010, the above named la	bor organization by its officers	agents and represent	atives has failed to
Since on or about (b) (6) (b) $(7)(C)$ 2010, the shown named la process the grievance of its member	sons that are arbitrary and capri	agents, and represent	auves, has laned to
	sons that are aroundly and capit	cious.	
			28
			NLF ISN BR
3. Name of Employer	4a. Tel. No.	b. Cell No.	
Dnata	718 244 1398	D. Centino.	
	d. e-mail		RE-REGIO
5. Location of plant involved (street, city, state and ZIP code)		6. Employer repres	sentative topontation ~
Terminal 1, JFK Airport Jamaica, NY 11432		Janiri Espinol	5 0
Jamaica, NT 11452			
	· · · · · · · · · · · · · · · · · · ·		
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product or se		mber of workers employed
lugage services	lugage services	100+	
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. Cell No.	c. Fax No.
	(b) (6), (b) (7)(C)		
(b) (6), (b) (7)(C)	d. e-mail		
	(b) (6), (b) (7)(C)	
12. DECLARATIO		Tel. No.	
I declare that I have read the above charge		(b) (6), (b	
(b) (6), (b) (7)(C) best of my knowl			
	am individual	Cell No.	
(signature of representative or person making charge)	(Print/type name and title or office, if a	any) Fax No.	
(b) (6), (b) (7)(C)	11/14/19	e-mail	
Address	Date	(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

FORM EXEMPT UNDER 44 U.S.C 3512

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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 29-CB-252173	Date Filed				

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	R ITS AGENTS	AGAINST WHICH CHA	RGE IS BROU	GHT		
a. Name 1199 SEIU United Healtcare Workers East			b. Union Representative to contact Steve Kramer			
c. Address (Street, city, state, and ZIP code) 310 WEst 43rd Street New York, NY 10036		-	d. Tel. No. 212 582 1	890	e. Cell No.	
100 101k, 111 10050			f. Fax. No.			
			g. e-mail			
 h. The above-named labor organization has engaged in and is er (1)(A) practices are practices affecting commerce within the meaning the Act and the Postal Reorganization Act. 		of the Na	tional Labor Re	lations 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 named regarding the Employer's refusal to transfer	labor orgaiza					
3. Name of Employer Wykoff Heights Medical Center		4a. Tel. No. 718 963 7272	b. Cell No.	BF	Tax No. Z	
		d. e-mail		BROOK	ECE	
5. Location of plant involved (street, city, state and ZIP code) 374 Stockholm Street Brooklyn NY 11237			6. Employe	r representat	ive to contact M 3: 10	
7. Type of establishment (factory, mine, wholesaler, etc.) hospital	8. Identify p hospital	principal product or serv	ice	9. Number 100+	of workers employed	
10. Full name of party filing charge (b) (6), (b) (7)(C)					11	
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) (b) (6), (b) (7)(C)		d. e-mail (b) (6), (b) (7)(C				
	ge and that the ledge and belie	statements	T (t	el. No.) (6), (b) (7)(0 Cell No.	3	
ge)	(Print/type na	ame and title or office, if an	V) F	ax No.		
(b) (6), (b) (7)(C)		Date		-mail b) (6), (b)	(7)(C)	

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

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 *et seq.* The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

•

FORM	NL	R	B-	508
(4-1	9)		

DO NOT WRITE IN THIS SPACE					
	Date Filed				
29-03-252231	11/20/19				

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

1. LABOR ORGANIZATION OR IT	S AGENTS A	AGAINST WHICH CHARG	SE IS BROU	GHT	
a. Name National Association of Letter Carriers, Branch 41			h ∐nion R∉ (b) (6), (b)	(7)(C)	to contact
c. Address (Street, city, state, and ZIP code) 2262 Bath Avenue			d. Tel. No. 718-373-0	0618	e. Cell No.
Brooklyn, NY 11214			f. Fax. No.		
			g. e-mail		
h. The above-named labor organization has engaged in and is enga	aging in unfair	•			
(1)(A)					nd these unfair labor
practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	the Act, of th	tese untair labor practices	affecting co	mmerce with	n the meaning of
2. Basis of the Charge (set forth a clear and concise statement of th					
On or about (b) (6), (b) (7)(C) 2019, the above-named labor or	ganization, I		sentatives,	refused to p	process grievances
3. Name of Employer		4a. Tel. No.	b. Cell No.		c. Fax No.
United States Postal Service		347-294-1320			
		d. e-mail			
5. Location of plant involved (street, city, state and ZIP code) 1915 Fulton Street, Brooklyn, NY 11233				r representati ozado, Mana	
7. Type of establishment (factory, mine, wholesaler, etc.) Postal Office	8. Identify p Postal Ser	rincipal product or service		9. Number o 1000	f 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. Cell No. (b) (6), (b)		c. Fax No.
(b) (6), (b) (7)(C)		d. e-mail			
12. DECLARATION				Tel. No.	
I declare that I have read the above charge (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)o the best of my knowled	tao and holiot	4			
	(b) (6), (b)	(7)(C) An-Individual	(b	Cell No.) (6), (b) (7)	(C)
es king charge)	(Print/type na	ame and title or office, if any)	5	Fax No.	
Address		11/20/2019 Date		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

	DO NOT WRITE IN THIS	SPACE
Case		Date Fil

Date Filed

1. LABOR ORGANIZATION	OR ITS AGENTS	AGAINST WHICH CH	ARGE IS BROU	JGHT	
a. Name District Council 1707					
c. Address (Street, city, state, and ZIP code) 420 West 45th Street			d. Tel. No 212 219		e. Cell No.
New York, NY 10036			f. Fax. No	k:	
			g. e-mail		
 h. The above-named labor organization has engaged in and is (1)(A) practices are practices affecting commerce within the mean the Act and the Postal Reorganization Act. 		of the Na	ational Labor R	elations Act, a	and these unfair labor
regarding harassment and suspension.	ed labor organiz	ation has failed to p	rocess the gri	evances of i	ts member,
3. Name of Employer		4a. Tel. No.	b. Cell No		ATTAX No. 2
Friend of Crown Heights Educational Inc.		929 234 2850 d. e-mail		BROO	RB-RE RECE
5. Location of plant involved (street, city, state and ZIP code) 2505 Pitkin Avenue Brooklyn, NY 11208	- 0.				ive to contact ON the S. Hancots N
7. Type of establishment (factory, mine, wholesaler, etc.) educational contractor	8. Identify p education	rincipal product or serv	vice	9. Number 10+	of workers employed
10. Full name of party filing charge (b) (6), (b) (7)(C)					
11. Address of party filing charge (street, city, state and ZIP code)		11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No		c. Fax No.
(b) (6), (b) (7)(C)		d. e-mail (b) (6), (b) (7)(C)			
12. DECLARA (b) (6), (b) (7)(C) (b) (b) (b) (c), (b) (c) (c) (b) (c) (c) (c)	arge and that the wledge and belie	statements		Tel. No. (b) (6), (b) (7)(0 Cell No.	C)
(signatule or representative of percent making energy)	(Print/type na	me and title or office, if an	(yr	Fax No.	
Address (b) (6), (b) (7)(C)		Date 11/20/19		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

	UNITED STATES OF AMERICA	* * J		DO NOT	WRITE IN THIS SPACE
L	NATIONAL LABOR RELATIONS BOARI		Case	and the second	Date filed
	CHARGE AGAINST LABOR ORGANIZATIO AGENTS	N OR ITS	29-0	CB-'252264	11/20/2019
	NSTRUCTIONS: File an original of this charge with the occurred or is occurring.	e NLRB Regional	Director	of the region in wh	ch the alleged unfair labor practi
_	1. LABOR ORGANIZATION	OR ITS AGENTS A			
2	Local 32BJ			ion Representative (6), (b) (7)(C)	to Contact
C	Address 25 West 18th Street, New York, NY 10011		d. Te	L No. 2)388-3800	e.e. Cell No.
		*** * * *	f. Fax		g. e-Mail
	- Basis of the Charge (set forth a clear and concise state - Since about (b) (6), (b) (7)(C) 2019, the above-n _exercise of rights protected by Section 7 of the protected by Section 7 of the discharge for arbitrary or discriminatory m	amed labor org	anization ng to pro	has restrained	and coerced employees in
1					
3	Name of Employer		4a T	el No	4b. Cell No
3	Allied Universal		(2	el. No. 12)481-5777	4b. Cell No.
3	and the second		(2	Contractor and the second second	4b. Cell No. 4d. e-Mail
1.1	Allied Universal	and the second se	(2 4c. P 6. Em	12)481-5777 ax No.	
-5	Allied Universal	and the second se	(2 4c. P 6. Em Ab	12)481-5777 ax No. ployer representativ	4d. e-Mail re to contact Craig
-5	Allied Universal . Location of Plant involved (street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler)	NY 10018 8. Principal produ	(2 4c. F 6. Em Ab uct or serv	12)481-5777 ax No. ployer representativ	4d. e-Mail re to contact Craig 9. Number of Workers employe
-5	Allied Universal . Location of Plant involved (Street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge	NY 10018 8. Principal produ	(2 4c. F 6. Em Ab uct or serv 11a. (b)	12)481-5777 ax No. ployer representativ rUZZO lica	4d. e-Mail re to contact Craig 9. Number of Workers employe 40
	Allied Universal . Location of Plant involved (street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge (b) (6), (b) (7)(C) 1. Address of party filing charge (street, city, state, and Z	NY 10018 8. Principal prod security	(2 4c. F 6. Em Ab uct or serv 11a. (b)	12)481-5777 ax No. ployer representativ ruzzo lica Fel. No. (6), (b) (7)(C)	4d. e-Mail re to contact Craig 9. Number of Workers employe 40 11b. Cell No.
5	Allied Universal . Location of Plant involved (street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge (b) (6), (b) (7)(C)	NY 10018 8. Principal produ security	(2 4c. F 6. Em Ab uct or serv 11a (b) 11c. J	12)481-5777 ax No. ployer representativ ruzzo lica Fel. No. (6), (b) (7)(C)	4d. e-Mail re to contact Craig 9. Number of Workers employe 40 11b. Cell No.
	Allied Universal . Location of Plant involved (street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge (b) (6), (b) (7)(C) 1. Address of party filing charge (street, city, state, and Z	NY 10018 8. Principal prod security (IP code) 12. DECLAR	(2 4c. F 6. Em Ab uct or serv 11a. (b) 11c. 1	12)481-5777 ax No. ployer representativ rUZZO Ica Fel. No. (6), (b) (7)(C) Fax No.	4d. e-Mail re to contact Craig 9. Number of Workers employe 40 11b. Cell No. 11d e-Mail
5	Allied Universal . Location of Plant involved (street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge (b) (6), (b) (7)(C) 1. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C)	NY 10018 8. Principal produsecurity 20 code) 12. DECLAR I that the statement	(2 4c. P 6. Em Ab uct or serv 11a. (b) 11c. I 11c. I	12)481-5777 ax No. ployer representativ rUZZO Ica Fel. No. (6), (b) (7)(C) Fax No.	4d. e-Mail re to contact Craig 9. Number of Workers employed 40 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No.
	Allied Universal . Location of Plant involved (Street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge (b) (6), (b) (7)(C) 1. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C) I declare that I have read the above charge and	NY 10018 8. Principal produsecurity 2.1P code) 12. DECLAR 1 that the statement (b) (6), (b)	(2 4c. F 6. Em Ab uct or serv 11a. (b) 11c. 1 11c. 1 2 3 3 4 5 4 7 (C)	12)481-5777 ax No. ployer representativ rUZZO Ica Fel. No. (6), (b) (7)(C) Fax No.	4d. e-Mail re to contact Craig 9. Number of Workers employe 40 11b. Cell No. 11d e-Mail st of my knowledge and belief.
7	Allied Universal Control of Plant Involved (Street, City, state, and ZIP of 229 West 36th Street, 11th Floor, New York, Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge (b) (6), (b) (7)(C) 1. Address of party filing charge (street, city, state, and Z (b) (6), (b) (7)(C) I declare that I have read the above charge and b) (6), (b) (7)(C) charge)	NY 10018 8. Principal produsecurity 2.1P code) 12. DECLAR 1 that the statement (b) (6), (b)	(2 4c. P 6. Em Ab uct or serv 11a. (b) 11c. I 11c. I 11c. I (7)(C) name and	12)481-5777 ax No. ployer representativ rUZZO ica Fel. No. (6), (b) (7)(C) Fax No.	4d. e-Mail re to contact Craig 9. Number of Workers employ 40 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No. (b) (6), (b) (7)(C) Cell No. Fax No.
7	Allied Universal . Location of Plant involved (street, city, state, and ZIP of 229 West 36th Street, 11th Floor, New York, . Type of Establishment (factory, mine, wholesaler) Security services 0. Full name of party filing charge (b) (6), (b) (7)(C) 1. Address of party filing charge (street, city, state, and z (b) (6), (b) (7)(C) I declare that I have read the above charge and b) (6), (b) (7)(C)	NY 10018 8. Principal produsecurity 2.1P code) 12. DECLAR 1 that the statement (b) (6), (b)	(2 4c. P 6. Em Ab uct or serv 11a. (b) 11c. I 11c. I 11c. I (7)(C) name and	12)481-5777 ax No. ployer representativ rUZZO ica Fel. No. (6), (b) (7)(C) Fax No.	4d. e-Mail re to contact Craig 9. Number of Workers employs 40 11b. Cell No. 11d e-Mail st of my knowledge and belief. Tel No. (b) (6), (b) (7)(C) Cell No.

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

FORM EXEMPT UNDER 44 U.S.C 3512

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

DO NOT WRITE IN THIS SPACE

Date Filed 11/25/2019

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

29-CC-252441

1. LABOR ORGANIZATION OR ITS					ed of is occurring.
a. Name	SAGENTS AGAINST WHICH				to contact
Brandworkers International			_		to contact
brandworkers international		(b) (6),	(b) (7)(C)	
c. Address (Street, city, state, and ZIP code)		d. Tel. N		070	e. Cell No.
43-32 22nd St. Suite 202		(646)		870	N/A
Long Island City, NY 11101		f. Fax N	0.		g. e-Mail info@brandworkers.org
		N/A			into @brandworkers.org
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) 4(B) are unfair practices affecting commerce within the meaning of the A meaning of the Act and the Postal Reorganization Act.	of the Nati	onal Labo	r Relat	ions Act	and these unfair labor practices
2. Basis of the Charge (set forth a clear and concise statement of th	e facts constituting the allege	d unfair la	bor pr	actices)	
Brandworkers International ("BWI"), by and through its	agents, has violated Se	ction 8(b)(4)(B) of the	Act by forcing or
attempting to force Dr. Smood, a customer of Tom Cat	-			-	
During the last week, BWI and its agents, including (b) (6					
pressure Dr. Smood to cease doing business with TCB.					
Saturday, November 30 in Manhattan "for helping prop					-
			-		er protection policy.
BWI is acting as a labor organization, demanding differe			• •		t and has stars to mistact
On or about September 5, 2017, BWI settled charge 29					, , ,
threaten, coerce, or restrain Le Bernadin, (b)(0)(0)(0)					
Tom Cat Bakery, Inc. or other persons engaged in com	merce." The conduct di	rected a	igain	st Dr. Sr	nood also violates this
settlement agreement.					
TCB is requesting that the Region seek immediate injur	octive relief under Section	on 10(L)	of th	e Act to	enjoin the illegal
conduct aimed at neutral parties.					
3. Name of Employer		4a. Tel.			b. Cell No.
Tom Cat Bakery, Inc.		(718) 7		224	
		c. Fax N	lo.		 d. e-Mail peter@tomcatbakery.com
		(718) 7	786-9	084	peter (@torncatbakery.com
5. Location of plant involved (street, city, state and ZIP code)		1(110)1			er representative to contact
43-05 Tenth Street, Long Island City, NY 11101					onenstein
7 Turn of establishment (fester, mins, wholesalar, etc.)	Q Identify principal product	er e e e e e e e e	-	0 Numbe	er of workers employed
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service			of workers employed
Bakery	Bread			175	
10. Full name of party filing charge		11a. Tel		504	b. Cell No.
Paul Galligan, Esq.		(212) 2	_	521	
		c. Fax N	0		d. e-Mail
11. Address of party filing charge (street, city, state and ZIP code.)		(212) 2	218-5	526	pgalligan@seyfarth.co
Seyfarth Shaw LLP		(= / -			Pg
620 Eighth Avepue New York, NY 10018					
12. DECLARATION			Tel. N		
I declare that I have read the above charge and that the statements therein are true to		et.			218-5521
By MAR PAU	L CALLIGAN	- 1	Cell N	0.	
(signature of representative or person making charge) (Print/type	name and title or office, if any		Eav H	0	
V			Fax N	0.	
Seyfarth Shaw LLP		ŀ	e-Mai		n@seyfarth.com
Address 620 Eighth Avenue, New York, NY 10018	(date) 11/25	/19		Pyaniya	a a a a a a a a a a a a a a a a a a a
	24 .0				
WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUN	NISHED BY FINE AND IMPR	SONMEN	IT (U.S	S. CODE,	TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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-252420	11/22/2019
NSTRUCTIONS: File an original of this charge with the NLRB Re occurred or is occurring.	egional Director of the region in wh	ich the alleged unfair labor practice
1. LABOR ORGANIZATION OR ITS AGE		
Local 621 United Workers of America	b. Union Representative Stephen Sombrott	
. Address 367 Long Beach Rd, Island Park, NY 11558	d. Tel. No. (516)807-3716	e.e. Cell No.
	f. Fax No. (516)706-0879	g. e-Mail
8(b)(1)(A) of the National Labor Relations Act, and these unfair lab the Act, or are unfair practices affecting commerce within the mean Basis of the Charge (set forth a clear and concise statement of the Since about (b)(6),(b)(7)(C) 2019, the above-named labor exercise of rights protected by Section 7 of the Act by the Employer's termination of	ning of the Act and the Postal Reorga facts constituting the alleged unfair la organization has restrained a	anization Act. abor practices) and coerced employees in the ance of (b) (6), (b) (7)(C) regarding
. Name of Employer Skipp to My Killy, LLC/ Lisa Management Inc.	4a. Tel. No.	4b. Cell No.
onpp to my niny, EEO/ Eloa Management no.	4c. Fax No.	
	40. Fax NO.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP code)	6. Employer representation	
 Location of Plant involved (street, city, state, and ZIP code) Vernon Ave., Basement, Brooklyn, NY 11206 		
12 Vernon Ave., Basement, Brooklyn, NY 11206	6. Employer representativ	ing ing
12 Vernon Ave., Basement, Brooklyn, NY 11206 Type of Establishment (factory, mine, wholesaler) 8. Princip	6. Employer representation Allison Sachs	ve to contact
12 Vernon Ave., Basement, Brooklyn, NY 11206 7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten	6. Employer representation Allison Sachs al product or service	9. Number of Workers employed
12 Vernon Ave., Basement, Brooklyn, NY 11206 7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten 10. Full name of party filing charge	6. Employer representation Allison Sachs al product or service ance Services	9. Number of Workers employed 50 11b. Cell No.
12 Vernon Ave., Basement, Brooklyn, NY 11206 7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten 10. Full name of party filing charge (b) (6), (b) (7)(C)	6. Employer representation Allison Sachs al product or service ance Services 11a. Tel. No.	9. Number of Workers employed 50 11b. Cell No. (b) (6), (b) (7)(C)
12 Vernon Ave., Basement, Brooklyn, NY 11206 7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten 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)	6. Employer representation Allison Sachs ance Services 11a. Tel. No. 11c. Fax No.	9. Number of Workers employed 50 11b. Cell No. (b) (6), (b) (7)(C)
12 Vernon Ave., Basement, Brooklyn, NY 11206 7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten 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. D 12. D	6. Employer representation Allison Sachs ance Services 11a. Tel. No. 11c. Fax No.	9. Number of Workers employed 50 11b. Cell No. (b) (6), (b) (7)(C) 11d. e-Mail (b) (6), (b) (7)(C)
12 Vernon Ave., Basement, Brooklyn, NY 11206 7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten 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. D I declare that I have read the above charge and that the s (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	6. Employer representative Allison Sachs al product or service ance Services 11a. Tel. No. 11c. Fax No.	9. Number of Workers employed 50 11b. Cell No. (b) (6), (b) (7)(C) 11d. e-Mail (b) (6), (b) (7)(C)
12 Vernon Ave., Basement, Brooklyn, NY 11206 7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state, and ZIP code) 12. D (b) (6), (b) (7)(C) 12. D I declare that I have read the above charge and that the s (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	6. Employer representation Allison Sachs ance Services 11a. Tel. No. 11c. Fax No.	est of my knowledge and belief. Cell No.
7. Type of Establishment (factory, mine, wholesaler) 8. Princip Residential Building Mainten 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. D 12. D I declare that I have read the above charge and that the s (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	6. Employer representation Allison Sachs ance Service ance Services 11a. Tel. No. 11c. Fax No. DECLARATION etatements therein are true to the b	est of my knowledge and belief.

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

INTERNET

FORM EXEMPT UNDER 44 U.S.C 3512

FORM NLRB-508	UNITED STATES OF AMERIC			DO NO	DO NOT WRITE IN THIS SPACE		
(2-08)	NATIONAL LABOR RELATIONS E CHARGE AGAINST LABOR ORGA OR ITS AGENTS		Case 29-C0	C-252453		Date Filed 11/26/2019	
INSTRUCTIONS: File	an original with NLRB Regional Director for th	e region in which t	he alleged u	unfair labor prac	ctice occur	red or Is occurring.	
	1. LABOR ORGANIZATION OR IT	IS AGENTS AGAIN	NST WHICH	H CHARGE IS I	BROUGHT		
a. Name Industrial Workers Membership Bran	s of the World, Industrial Union 460, N nch ("IWWNYC")	New York City C	General	b. Union Rep N/A	resentative	e to contact	
c. Address (Street, cit 45-02 23rd Street,	ty, state, and ZIP code)			d. Tel. No. (916) 740-	5731	e. Cell No. N/A	
Long Island City, I				f. Fax No.		g. e-Mail organize@iww.nyc; iww.nyc@gmail.com	
subsection(s) (list s are unfair practices meaning of the Act	$\begin{array}{l} \begin{array}{l} \begin{array}{l} \begin{array}{l} \begin{array}{l} \begin{array}{l} \begin{array}{l} \end{array} \\ \end{array} \end{array} \\ \begin{array}{l} \begin{array}{l} \end{array} \\ \end{array} \end{array} \\ \begin{array}{l} \begin{array}{l} \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{l} \begin{array}{l} \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{l} \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{l} \begin{array}{l} \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{l} \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{l} \end{array} \\ \end{array} \\ \end{array} \\ \end{array} \\ \end{array} \\ \begin{array}{l} \end{array} \\ \end{array} $	Act, or these unfair	of the Nati	onal Labor Rel ices are unfair	ations Act, practices a	and these unfair labor practices	
	Cat Bakery's ("TCB") neutral customer nediate injunctive relief under Section						
3. Name of Employe	r			4a. Tel. No.	4004	b. Cell No.	
Tom Cat Bakery,	, Inc.			(718) 786- c. Fax No.	4224	d. e-Mail peter@tomcatbakery.com	
				(718) 786-	9084	peter@tomcatbakery.com	
	nvolved (street, city, state and ZIP code) eet, Long Island City, NY 11101		-			over representative to contact Sonenstein	
7. Type of establishr Bakery	ment (factory, mine, wholesaler, etc.)	8. Identify princ Bread	ipal produc	t or service	9. Numb 175	er of workers employed	
10. Full name of part Paul Galligan, Es				11a. Tel. No. (212) 218-		b. Cell No.	
11. Address of party	filing charge (street, city, state and ZIP code.)			c. Fax No. (212) 218-	5526	d. e-Mail pgalligan@seyfarth.co	
the second se	ue, New York, NY 10018						
I declare that I have read th	12. DECLARATION			ief. Cell	(212)	218-5521	
By (signature of repre-		alligan - Labor be name and title of					
	Shaw LLP			e-M	lail pgallig	an@seyfarth.com	
Address 620 Eigh	t Avenue, New York, NY 10018	(date) <u>11/2</u>	6/19	-		

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

UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE				
NATIONAL LABOR RELATIONS BOAR		Case	Date filed			
CHARGE AGAINST LABOR ORGANIZATIO AGENTS		29-CB-252635	11/25/19			
INSTRUCTIONS: File an original of this charge with to occurred or is occurring.	_					
	OR ITS AGENTS A	AGAINST WHICH CHARGE IS BRO				
a. Name		b. Union Representative to	Contact			
SEIU, Local 32BJ		Todd Jennings				
		Union Representativ	/e			
c. Address		d. Tel. No.	e.e. Cell No.			
25 West 18th Street, New York, NY 10011		(212)388-3800				
		f. Fax No.	g. e-Mail			
 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 affectin 2. Basis of the Charge (set forth a clear and concise state) 	ons Act, and these g commerce within	unfair labor practices are unfair p the meaning of the Act and the F	Practices affecting commerce within Postal Reorganization Act.			
Within the past six months, the above-name						
assistance and support from the Employer A	•		•			
the Employer to require its supervisory perso	onnel to pay du	es and/or fees to the Unio	n.			
3. Name of Employer		4a. Tel. No.	4b. Cell No.			
Alstate Maintenance, LLC		(718) 751-2901				
		4c. Fax No.	4d. e-Mail			
5. Location of Plant involved (street, city, state, and ZIP of	code)	6. Employer representative	to contact			
JFK Airport, Terminal 1, Jamaica, NY		Vincent Gilmore	Vincent Gilmore			
JIN Anport, Forminar 1, Jamarca, 141		Manager				
7. Type of Establishment (factory, mine, wholesaler)	8. Principal prod		9. Number of Workers employed			
Airport	Baggage S	envice	Approx. 95			
	Daggage O	11a. Tel. No.				
10. Full name of party filing charge (b) (6), (b) (7)(C)			(b) (6), (b) (7)(C)			
		11c. Fax No.	¹ (b) (6), (b) (7)(C)			
			(0), (0), (1), (0)			
11. Address of party filing charge (street, city, state, and 2	LIP CODE)					
(b) (6), (b) (7)(C)						
	12. DECLAR	RATION	10 41			
I declare that I have read the above charge and	d that the stateme	nts therein are true to the best	of my knowledge and beliefn 72			
9			Tel No. O To The			
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c)						
(signature or representative or per	pe name and title or office, if any	Cel				
		(D) (6), (D) (7)(C)				
Address:	Date:		Cel (b) (6), (b) (7)(C) Fax No.			
Address: (b) (6), (b) (7)(C)			X N			
	*	$1) \mathfrak{SS} = 1\mathfrak{A}$				
	MR1-	-11-22-19	^e (b) (6), (b) (7)(C)			
	I					

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

UNITED STATES OF AMERICA		WRITE IN HIS SPACE
NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION OR ITS	Case	Date filed
AGENTS	29-CB-252678	11/25/19
INSTRUCTIONS: File an original of this charge with the NLRB Regional occurred or is occurring.	Director of the region in wh	ich the alleged rinfair labor practice
1. LABOR ORGANIZATION OR ITS AGENTS A		
a, Name SEIU Local 32BJ	b. Union Representati e	to Contact
SEID LUGAI SZDJ		
c. Address 25 West 18th St. New York, NY 10011	d. Tel. No. (212) 388-3800	e.e. Cel No.
	f. Fax No.	g, e-Mai
h. The above-named labor organization or its agents have engaged in and a	an engaging in unfeir labor r (a	chops within the meaning of section
8(b)(1)(A) of the National Labor Relations Act, and these unfair labor practice of the second	ctices are unfair practices aff o	ting commence within the meaning of
the Act, or are unfair practices affecting commerce within the meaning of 2. Basis of the Charge (set forth a clear and concise statement of the facts of	the Act and the Postal Reon: a	nization Act.
S. Daes of the Gharge (ser four a Gear and Concise statement of the jacks t	onstanny the encloar constraints	
Since about (b) (6), (b) (7)(C) 2019, the above-named labor org	anization has restraine I	and coerced employees in the
exercise of rights protected by Section 7 of the Act by failing	g to process the grievar of	e of (b) (6), (b) (7) (C) regarding (b) (b) (b) (7) (c) regarding (b) (c) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c
race discrimination claim for arbitrary or discriminatory n	easons or in bad faith.	case (D: (0) (0) (0) (7)(C)
Since about (b) (6), (b) (7)(C) 2019, the above-named labor or	anization has restraine.	and coercial employees in the
exercise of rights protocology Section 7 of the Act by failing	to process the orievan:	e of (b) (6), (b) (7)(C) eqarding
aniousana filod da 2019 aver univer transfor f	or arbitrary or discrimine :	ory reasons or in bad
faith. (case (D: (0)(6).(b)(7)(C)	•	-
(h) (6) (h) $(7)(C)$		
	anization has restrained	and coercild emoloyees in the $a_{of}(b)(6), (b)(7)(C)$
exercise of rights protected by Section 7 of the Act by failing prievance filed on (b) (6), (b) (7)(C) 2018 over thours b	eing changed for arbitra	v or discriminatory reasons or in
Dab raith. (case ib.		<u>></u> ;
3. Name of Employer	4a, Tel. No.	4b. Cell Not. (13 24 14
NYC SSS, Inc.	(347)379-4588 4c, Fax No.	44 0.40
321 West 44th Street NY, NY 10036		
5. Location of Plant involved (streat, city, state, and ZIP code)	6. Employer representativ	a to contact
Q 129, College Point	Steven Brennan	24
7. Type of Establishment (fectory, mine. wholesaler) [8. Principal prod		9. Number of Workers employed
School Cleaning s		o. Hamber of Workers completion
10. Entropy filing charge		+1000
(D) (6), (D) (7) (C)	11a, Tel. No.	+1000 11b. Cell No.
	11a, Tel. No. (b) (6), (b) (7)(C)	
	11a, Tel. No. (b) (6), (b) (7)(C) 11c. Fax No.	
	(b) (6), (b) (7)(C)	11b. Cell No.
11. Address of party filing charge (street, city, state, and ZIP code)	(b) (6), (b) (7)(C)	11b. Cell No.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) 11c. Fax No.	11b. Cell No.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAR	(b) (6), (b) (7)(C) 11c, Fax No.	11b. Cell No. 11d e-Mail
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAF I declare that I have read the above charge and that the stateme	(b) (6), (b) (7)(C) 11c, Fax No.	11b. Cell No.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAF I declare that I have read the above charge and that the stateme	(b) (6), (b) (7)(C) 11c. Fax No. RATION Ints therein are true to the best	11b. Cell No. 11cl e-Mail 5 of my knowl idge and bellef.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAF I declare that I have read the above charge and that the statement By: (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) 11c. Fax No. ATION Ints therein are true to the beint of the	11b. Cell No. 11cl e-Mail 5 of my knowl idge and bellef.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAR I declare that I have read the above charge and that the statement By: (b) (6), (b) (7)(C) (b) (6), (c)	(b) (6), (b) (7)(C) 11c. Fax No. RATION Intertine therein are true to the besit 11 (25 / 19 b) (7)(C)	11b. Cell No.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAR I declare that I have read the above charge and that the statement By: (b) (6), (b) (7)(C) (b) (6), (c)	(b) (6), (b) (7)(C) 11c. Fax No. ATION Ints therein are true to the beint of the	11b. Cell No. 11cl e-Mail 5 of my knowl idge and bellef.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAR 1 declare that 1 have read the above charge and that the statement By: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(b) (6), (b) (7)(C) 11c. Fax No. RATION Intertine therein are true to the besit 11 (25 / 19 b) (7)(C)	11b. Cell No.
11. Address of party filing charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C) 12. DECLAR 1 declare that 1 have read the above charge and that the statement By: (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) 11c. Fax No. RATION Ints therein are true to the besit of t	11b. Cell No. 11cl e-Mail 5 of my knowl (dge and bellef. Tel No. Cell No.

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WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.: 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 reque 4. 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 NO	T WRITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARI	D	Case	Date filed
CHARGE AGAINST LABOR ORGANIZATIO	N OR ITS		
AGENTS		29-CB-252676	11/26/19
INSTRUCTIONS: File an original of this charge with the	e NLRB Regional Di	rector of the region in v	which the alleged unfair labor practice
occurred or is occurring.			
1. LABOR ORGANIZATION	OR ITS AGENTS AGA	b. Union Representati	
Local 74, United Service Workers Union, IUJ	ΤΔΙ	b. Union Representati	ve to Contact
Local 14, Office Delvice Workers Offici, 100	יקיו	(b) (6), (b) (7)(C)	
c. Address		d. Tel. No.	e.e. Cell No.
36-36 33rd Street, Suite 202, Long Island Cit	ty, NY 11106		
		f. Fax No.	g. e-Mail
		L	(b) (6), (b) (7)(C)
h. The above-named labor organization or its agents hav			
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			
		saturing the aneged anna	
Since about (b) (6), (b) (7)(C)2019, the above-nar	ned labor organiz	ation has restrained	and coerced employees in the
exercise of rights protected by Section 7 of the			
		••	
removal from the below-named Employer's	schedule for arbi	trary or discriminato	bry reasons or in bad faith.
3. Name of Employer		4a. Tel. No.	4b. Cell No.
Core Facility Services LLC		4a. Tel. NO.	C
Cole Facility Services LEC		do Eav No	(***
		4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP c	ode)	6. Employer representa	ative to contact Same A
	-		
173-53 Croyden Avenue, Jamaica Estates,	8. Principal product		O Number of Michan employed
7. Type of Establishment (factory, mine, wholesaler)			9. Number of Workers employed
Cleaning services	Cleaning servi		<u> </u>
10. Full name of party filing charge		11a. Tel. No.	11b. Cell/No.
(b) (6), (b) (7)(C) an individual			(b) (6), (b) (7)(C)
		11c. Fax No.	11d e-Mail
1. Address of party filing charge (street, city, state, and Z	IP code)	· · ·	
	,		
(b) (6), (b) (7)(C)	12. DECLARAT	ION	· · · · · · · · · · · · · · · · · · ·
I declare that I have read the above charge and	that the statements	therein are true to the	
			Tel No.
o) (6), (b) (7)(C)			
		(7)(C), an individual	
	Print/type nan	ne and title or office, if ar	
		·····	(b) (6), (b) (7)(C)
Address:		Date:	Fax No.
(b) (6), (b) (7)(C)		11:01	
		11-20-1	e-Mail
			1
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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

FORM EXEMPT UNDER 44 U.S.C 3512

** ** * * *

FORM NLRB-508			FOR	MEXEMPT UNDER 44 U.S.C 351		
(4-19) UNITED STATES OF AMER			DO NOT WRITE IN THIS SPACE			
NATIONAL LABOR RELATIONS CHARGE AGAINST LABOR OR O		Case		Date Filed		
OR ITS AGENTS			-252696	11/25/2019		
INSTRUCTIONS: File an original with NLRB Regional Director f				or is occurring.		
1. LABOR ORGANIZATION C	R IT'S AGENTS AGAINS	ST WHICH CHAP	RGE IS BROUGHT			
e. Name			b. Union Represent			
Bakery, Confectionary, Tobacco Workers and Grain Mi	illers, Local 102		Raymond Aquili	no, President		
c. Address (Street, city, state, and ZIP code)			d. Tei, No.	e. Cell No.		
10815 Crossbay Blvd			718-733-7300			
Ozone Park, NY 11417			f. Fax. No.			
	4		g. e-mail			
			a. c-man			
h. The above-named labor organization has engaged in and is a	engaging in unfair labor p	practices within the	he meaning of section	B(b) and (list subsections)		
(1)(A)				Act, and these unfair labor		
practices are practices affecting commerce within the meaning	ig of the Act, or these un	fair labor practice	es 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						
Mides Pide Jule Jule LA Reprecent Acion del Reprecent Acion 3. Name of Employer Cookies United 5. Location of plant involved (street, city, state and ZIP code) 141 Freeman Avenue Islip, New York, NY 11751	ela yu	1000 al. No. 181-4000	6. Employer representations	b, Fax No. 631-581-4510		
7. Type of establishment (lactory, mine, wholesaler, etc.) Bakery Pactory	8, Identify principal Chocolate and B		ce 9. Nur 60+	nber of workers employed		
10: Full name of party filing charge						
(b) (6), (b) (7)(C)	<u>`</u>					
11. Address of party filing charge (street, city, state and ZIP code)	11a.1	Tel. No.	b. Cell No. (b) (6), (b) (7)(C)	c. Fax No.		
(b) (6), (b) (7)(C)	d. ə-n	nail		201		
12, DECLARAT I declare that I have read the above cha ar((b) (6), (b) (7)(C) r per (b) (6), (b) (7)(C)	arge and that the stateme) (7)(C)	Cell No. (b) (6), (b) Fax No.	NLRB-REGION RECEIVED		

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

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET	
FORM NLRB-508	
(2-08)	

UNITED STATES OF AMERICA DO NOT WRITE IN THIS SPACE NATIONAL LABOR RELATIONS BOARD Case Date Filed CHARGE AGAINST LABOR ORGANIZATION 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 b. Union Representative to contact a. Name (b) (6), (b) (7)(C) Brandworkers International d. Tel. No. e. Cell No. c. Address (Street, city, state, and ZIP code) (646)-568-5870 N/A 43-32 22nd St, Suite 202 g. e-Mail info@brandworkers.org f. Fax No. Long Island City, NY 11101 N/A 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) 4(B) 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) See Attachment A. b. Cell No. 4a. Tel. No. 3. Name of Employer N/A (718) 786-4224 Tom Cat Bakery, Inc. c. Fax No. d. e-Mail peter@tomcatbakery.com (718) 786-9084 6. Employer representative to contact 5. Location of plant involved (street, city, state and ZIP code) 43-05 Tenth Street, Long Island City, NY 11101 Peter Sonenstein 9. Number of workers employed 7. Type of establishment (factory, mine, wholesaler, etc.) 8. Identify principal product or service 175 Bread Bakery b. Cell No. 11a. Tel. No. 10. Full name of party filing charge (212) 218-5521 N/A Paul Galligan, Esg. c. Fax No. d. e-Mail (212) 218-5526 pgalligan@seyfarth.co 11. Address of party filing charge (street, city, state and ZIP code.) Seyfarth Shaw LLP 620 Eighth Avenue, New York, NY 10018 Tel. No. **12. DECLARATION** above charge and that the statements therein are true to the best of my knowledge and belief. (212) 215-5521 declare hat I have real the Cell No. Gallson 1001 В٧ N/A tative or person making charge) (Print/type name and title of office, if any) (signature

Seyfarth Shaw LLP		e-Mail	pgalligan@seyfarth.com
Address 620 Eighth Avenue, New York, NY 10018	(date) <u>12/6/19</u>		

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.

Fax No.

Attachment A

Brandworkers International ("BWI"), by and through its agents, has violated Section 8(b)(4)(B) of the Act by forcing or attempting to force Dr. Smood, a customer of Tom Cat Bakery ("TCB") and a neutral, to cease doing business with TCB. During the last week, BWI and its agents, including ^(b)(6), (b) (7)(C) and ^(b)(6), (b) (7)(C) has engaged in a twitter campaign to pressure Dr. Smood to cease doing business with TCB. ^(b)(6), (b) (7)(C) has tweeted about a protest against Dr. Smood for Saturday, November 30 in Manhattan "for helping prop up" TCB's "obstruction of an immigrant worker protection policy." BWI is acting as a labor organization, demanding different severance pay for former employees.

On or around November 2, 2019, the BWI, by and through its agents, violated Section 8(b)(4)(B) of the Act by engaging in secondary picketing and coercion with the objective of forcing or attempting to force Dr. Smood's Long Island City, New York location, a customer of TCB, and a neutral, to cease doing business with TCB.

On or around November 30, 2019, the BWI, by and through its agents, violated Section 8(b)(4)(B) of the Act by engaging in secondary picketing and coercion with the objective by forcing or attempting to force Dr. Smood's SOHO, New York location, a customer of TCB, and a neutral, to cease doing business with TCB.

At various times during the previous six months, BWI, by and through its agents, has violated Section 8(b)(1)(A) of the Act by retraining and/or coercing TCB employees in the exercise of their Section 7 rights to have Local 53 Bakery Union as the employees chosen bargaining representative.

At various times during the previous six months, BWI, by and through its agents, has violated Section 8(b)(7) of the Act by threating to picket or causing to picket TCB, where an object thereof was to force or require TCB to recognize or bargain with BWI where TCB's employees are represented by Local 53 Bakery Union and there is no question concerning Local 53's representation.

TCB is requesting that the Region seek immediate injunctive relief under Section 10(L) of the Act to enjoin the illegal conduct aimed at neutral parties.

DO NOT WRITE IN THIS	SPACE
	Date Filed
29-CB-251763	11/14/19

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

1. LABOR ORGANIZATION OR	ITS AGENTS AGAINST WHICH C	HARGE IS BROUGHT	
a. Name		b. Union Representat	ive to contact
IAM, District 15		Kevin Diaz	
Ö			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	e. Cell No.
652 4th Avenue		718 422 0090	
Brooklyn, NY 11232		f. Fax. No.	
		g. e-mail	· · · · · · · · · · · · · · · · · · ·
		g. o man	
h. The above named labor organization has an end in and is an	anging in unfair labor practices with	in the meaning of eastion 9/	h) and (list subscripps)
h. The above-named labor organization has engaged in and is en			
(1)(A)		National Labor Relations Ac	
practices are practices affecting commerce within the meaning	of the Act, or these unfair labor pra	ictices affecting commerce w	ithin 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 u	nfair labor practices)	
Since on or about (b) (6) (b) (7) (C) 2019 the above named lab process the grievance of its member (b) (6) (b) (7) (C) for reas	bor organization by its officers	, agents, and representati	ves, has failed to
process the grievance of its member (0) (0), (0) (7)(0) for reas	sons that are arbitrary and capr	icious.	
			2
3. Name of Employer	4a. Tel. No.	b. Cell No.	
Dnata	718 244 1398		
	d. e-mail		<
5. Location of plant involved (street, city, state and ZIP code)	I	6. Employer represen	Etive tosontaci Z
Terminal 1, JFK Airport		Janiri Espinol	< # 29
Jamaica, NY 11432			- 3 7
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product or s	envice 9 Numbr	er of workers employed
lugage services	lugage services	100+	er of workers employed
	lugage services	1001	
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. Cell No.	c. Fax No.
	(b) (6), (b) (7)(C)		
(b) (6), (b) (7)(C)	d. e-mail		
	(b) (6), (b) (7	7)(C)	
12. DECLARATIO		Tel. No.	
I declare that I have read the above charg		(b) (6), (b) (7	(C)
(b) (6), (b) (7)(C)	edge and belief.	Cell No.	
	am individual		
(signature of representative or person making charge)	(Print/type name and title or office, in	fany) Fax No.	
(signature of representative of person making energy)	(i hint goo hanno and hao or omoo, i	Fax No.	
(h) (6) (h) $(7)(C)$			
(b) (6), (b) (7)(C)	Date 11/14/19	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

(see above)

Address

FORM NLRB-508 UNITED STATES OF AMERIC (2-08) NATIONAL LABOR RELATIONS B		DO NOT WRITE IN THIS SPACE			
CHARGE AGAINST LABOR ORGAI OR ITS AGENTS	Case	CB-252367		Date Filed 11/15/19	
INSTRUCTIONS: File an original with NLRB Regional Director for the	e region in which the alleged	unfair labor pr	actice occurr	ed or is occurring.	
1. LABOR ORGANIZATION OR IT	S AGENTS AGAINST WHIC	H CHARGE IS	BROUGHT		
a. Name		b. Union Re	epresentative	to contact	
Local 355, United Service Workers Union, IUJAT	Peter Devito, Automotive Director				
c. Address (Street, city, state, and ZIP code)	· · · · · · · · · · · · · · · · · · ·	d. Tel. No. (718)658	-4848	e. Cell No.	
138-50 Queens Blvd., Briarwood, NY 11435		f. Fax No.		g. e-Mail	
 h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the At and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the forth and the clear and	of the Na Act, or these unfair labor prac	tional Labor Re tices are unfai	elations Act, a ir practices af		es
During the past six months and continuing, the Union h discharge by inappropriately settling	as unlawfully failed to r not arbitrating the matt	epresent ^(b) er.	(6), (b) (7)(C) regarding	
	·	L da Tal Na		h Oall Na	
3. Name of Employer		4a. Tel. No (718) 263		b. Cell No.,	
		c. Fax No.		d, e-Mail	
Berg Family Enterprises d/b/a Sunrise Chevrolet					
•		1			
5. Location of plant involved (street, city, state and ZIP code)				yer representative to contact	
105-80 Queens Blvd. Forest Hills, NY 11375			Human	Resources	
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal produc	t or service	9. Numbe	er of workers employed	
car dealership	automobiles				
10. Full name of party filing charge		11a. Tel. N (b) (6), (b)		b. Cell No.	
(b) (6), (b) (7)(C)		c. Fax No.		d. e-Mail	_
11. Address of party filing charge (street, city, state and ZIP code.)		-		(b) (c) (b) (7)(c)	
(b) (6), (b) (7)(C)		L		(b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C) ATION I de therein are true to	o the best of my knowledge and be	lief.	l. No. (see a	above)	
(b) (6), (b)	(7)(C)	Ce	II No.		
e) (Print/type	e name and title or office, if a	''' Fa	x No.	· · · · · · · · · · · · · · · · · · ·	

(date) 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.

e-Mail

(see above)

DO NOT WRITE IN THIS SPACE

Date Filed

12/4/19

Case 29-CB-252838

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	E IS E	BROUGHT		
a. Name			b. Union Representative to contact			
ufcw local 1500			lynn shiels			
		Title:				
c. Address (Street, city, state, and ZIP code)		d. Tel. N (516) 21		00	e. Cell No.	
425 merrick avenue		f. Fax N		00	g. e-Mail	
NY westbury 11590			•.		3	
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 meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor	r Rela	ations Act, a	ind 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 Ial	bor n	ractices)		
	nuolo conoliculing the allogo		001 p	lacticooby		
See additional page						
3. Name of Employer		4a. Tel.	No.		b. Cell No.	
king kullen		(516) 73	3-71	00		
5		c. Fax N	0.		d. e-Mail	
5. Location of plant involved (street, city, state and ZIP code)				6. Employ	er representative to contact	
185 central avenue						
NY bethpage 11714				Title:		
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service)	9. Numbe	r of workers employed	
Retail (Grocery)						
10. Full name of party filing charge		11a. Tel	. No.		b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)		
(b)(0);(b)(1)(0)		c. Fax N	0.		d. e-Mail	
11. Address of party filing charge (street, city, state and ZIP code.)					(b) (6), (b) (7)(C)	
(b) (6), (b) (7)(C)						
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie	f	Tel.	No. (b) (6), (b)) (7)(C)	
	(6), (b) (7)(C)	L L	Cell			
(signature of representative or person making charge) (Print/type a			001			
	Title:		Fax	No.		
(b) (6), (b) (7)(C)	. 100.	Ļ		- 11		
	44177004	0 12:20:27	e-M	ail (b) (6),	(b)(7)(C)	
Address	(date)_11/27/201	3 13.23.21		(b)(0),		

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

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.