

UNITED STATES OF AMERICA		DO NOT WRITE IN THIS SPACE	
NATIONAL LABOR RELATIONS BOARD		Case	Date filed
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS		03-CB-242687	6/5/2019
INSTRUCTIONS: File an original of this charge with the NLRB Regional Director of the region in which the alleged unfair labor practice occurred or is occurring.			
1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT			
a. Name Laborers Local 435		b. Union Representative to Contact Danny Kuntz, Business Manager	
c. Address 20 Fourth Street, Rochester, NY 14609		d. Tel. No. 585-546-8460	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)(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) Within the last 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 failing to fairly represent (b) (6), (b) (7)(C) by failing to file a grievance over the Employer's unfair treatment of (b) (6), (b) (7)(C), the Employer's failure to pay (b) (6), (b) (7)(C) proper wages and the Employer's termination of (b) (6), (b) (7)(C)			
3. Name of Employer Spinello d/b/a Main Lining Services, LLC		4a. Tel. No. 973-808-8383	4b. Cell No.
		4c. Fax No. 973-808-9591	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP code) Pound Road, Elma, NY		6. Employer representative to contact	
7. Type of Establishment (factory, mine, wholesaler) Construction	8. Principal product or service Water main restoration		9. Number of Workers employed 30
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.	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)			
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.			
By: (b) (6), (b) (7)(C)		Tel No.	
(sig (b) (6), (b) (7)(C) e)		(b) (6), (b) (7)(C)	
		Print/type name and title or office, if any	
Address: (b) (6), (b) (7)(C)		Date: 5/20/19	Cell No. (b) (6), (b) (7)(C)
			Fax No.
			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. (b) (6), (b) (7)(C)

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

DO NOT WRITE IN THIS SPACE	
Case 03-CB-242728	Date Filed 6/5/2019

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

1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT			
a. Name 1199SEIU United Health Care Workers East		b. Union Representative to contact Melissa Tambasco Title: Organizer	
c. Address (Street, city, state, and ZIP code) 155 Washington Avenue NY Albany 12210-____		d. Tel. No. (518) 396-2300	e. Cell No.
		f. Fax No. (518) 436-1140	g. e-Mail melissa.tambasco@1199.org
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) (3) _____ 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 additional page--			
3. Name of Employer Nathan Littauer Hospital and Nursing Home		4a. Tel. No. (518) 773-5400	b. Cell No.
		c. Fax No.	d. e-Mail
5. Location of plant involved (street, city, state and ZIP code) 99 East State Street NY Gloversville 12078-____		6. Employer representative to contact Title:	
7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare	8. Identify principal product or service Hospital and Nursing Home	9. Number of workers employed 900	
10. Full name of party filing charge Lana Wydra Nathan Littauer Hospital and Nursing Home		11a. Tel. No. (518) 773-5400	b. Cell No.
		c. Fax No.	d. e-Mail lwydra@nlh.org
11. Address of party filing charge (street, city, state and ZIP code.) 99 East State Street NY Gloversville 12078-			
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. By Sanjeeve K. DeSoyza Sanjeeve K DeSozya Esq. (signature of representative or person making charge) (Print/type name and title or office, if any) Title: Outside Counsel 22 Corporate Woods Boulevard Suite 501 Albany NY 12211-____ Address _____ (date) 06/5/2019 14 25:56		Tel. No. (518) 533-3206 Cell No. Fax No. (518) 533-3299 e-Mail sdesoyza@bsk.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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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 NATIONAL LABOR RELATIONS BOARD		DO NOT WRITE IN THIS SPACE	
CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS		Case	Date filed
		03-CB-243352	6/17/2019
INSTRUCTIONS: File an original of this charge with the NLRB Regional Director of the region in which the alleged unfair labor practice occurred or is occurring.			
1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT			
a. Name 1199SEIU	b. Union Representative to Contact Benita Thompson		
c. Address 250 S. Clinton St., Ste. 200, Syracuse, NY 13202	d. Tel. No. (315)424-1743	e. e. Cell No.	
	f. Fax No.	g. e-Mail benita.thompson@1199.org	
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)(2) 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) (6), (b) (7)(C) 2019, the above-named labor organization has attempted to cause and Utica Rehabilitation and Nursing Center to discharge (b) (6), (b) (7)(C) for unlawful reasons.			
3. Name of Employer Utica Rehabilitation and Nursing Center		4a. Tel. No.	4b. Cell No.
		4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP code) 2535 Genesee St., Utica, NY 13501		6. Employer representative to contact Tracy Margott Administrator	
7. Type of Establishment (factory, mine, wholesaler) Nursing and rehabilitation facility	8. Principal product or service Nursing and rehabilitation	9. Number of Workers employed 70	
10. Full name of party filing charge (b) (6), (b) (7)(C)	11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No.	
	11c. Fax 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)			
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.			
By (b) (6), (b) (7)(C)		Tel No.	
(Signature of representative of person making charge)		(b) (6), (b) (7)(C)	
Print/type name and title or office, if any		Cell No.	
Address: (b) (6), (b) (7)(C)		Date:	Fax No.
			e-Mail (b) (6), (b) (7)(C)

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 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		03-CB-243910	6/26/2019
INSTRUCTIONS: File an original of this charge with the NLRB Regional Director of the region in which the alleged unfair labor practice occurred or is occurring.			
1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT			
a. Name Buffalo-Niagara Typographical Union No. 9 CWA 14148		b. Union Representative to Contact (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	
c. Address 3630 Walden Ave, Lancaster, NY 14086		d. Tel. No. (b) (6), (b) (7)(C)	e.e. Cell No.
		f. Fax No. (b) (6), (b) (7)(C)	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.			
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)			
In the past 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 properly represent (b) (6), (b) (7)(C) regarding (b) (6), (b) (7)(C) layoff for arbitrary or discriminatory reasons or in bad faith.			

3. Name of Employer The Buffalo News		4a. Tel. No. 849 5466	4b. Cell No.
		4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP code) 1 News Plaza, Buffalo, NY 14203		6. Employer representative to contact Brian Donohue	
7. Type of Establishment (factory, mine, wholesaler) Publishing Company	8. Principal product or service Newspaper		9. Number of Workers employed 30
10. Full name of party filing charge (b) (6), (b) (7)(C), an individual		11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No.
		11c. Fax No.	11d. e-Mail
11. Address of party filing charge (street, city, state, and ZIP code) (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.			
By: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)		Tel. No.	
(signature of representative)		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)
		Print/type name and title or office, if any	Cell No.
Address: (b) (6), (b) (7)(C)		Date: 6/24/19	Fax No.
			e-Mail

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PRIVACY ACT STATEMENT

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

FORM NLRB-608
(2-08)

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

DO NOT WRITE IN THIS SPACE

Case: 03-CB-244009 Date Filed: 6/27/2019

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

E. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT

a. Name International Longshoremen Association, Local 1294	b. Union Representative to contact (b) (6), (b) (7)(C)				
c. Address (Street, city, state, and ZIP code) Port of Albany 106 Smith Blvd., Albany, New York 12202	<table border="1"> <tr> <td>d. Tel. No. (b) (6), (b) (7)(C)</td> <td>e. Cell No.</td> </tr> <tr> <td>f. Fax No. 518-463-0238</td> <td>g. e-Mail</td> </tr> </table>	d. Tel. No. (b) (6), (b) (7)(C)	e. Cell No.	f. Fax No. 518-463-0238	g. e-Mail
d. Tel. No. (b) (6), (b) (7)(C)	e. Cell No.				
f. Fax No. 518-463-0238	g. e-Mail				

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) (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 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)
Since on or about May 10, 2019, and continuing to date, R, a labor organization, by its officers, agents and representatives has breached its duty of fair representation by refusing to refer member (b) (6), (b) (7)(C) to jobs because (b) (6) made safety complaints.

3. Name of Employer Federal Marine Terminals	<table border="1"> <tr> <td>4a. Tel. No. 518-463-0237</td> <td>4b. Cell No.</td> </tr> <tr> <td>4c. Fax No. 518-463-0238</td> <td>4d. e-Mail brink@federal.com</td> </tr> </table>	4a. Tel. No. 518-463-0237	4b. Cell No.	4c. Fax No. 518-463-0238	4d. e-Mail brink@federal.com
4a. Tel. No. 518-463-0237	4b. Cell No.				
4c. Fax No. 518-463-0238	4d. e-Mail brink@federal.com				

5. Location of plant involved (street, city, state and ZIP code) Port of Albany 106 Smith Blvd., Albany, New York 12202	6. Employer representative to contact Bill Ring, General Manager
7. Type of establishment (factory, mine, wholesaler, etc.) port	8. Identify principal product or service shipping
9. Number of workers employed	

10. Full name of party filing charge (b) (6), (b) (7)(C)	<table border="1"> <tr> <td>11a. Tel. No. (b) (6), (b) (7)(C)</td> <td>11b. Cell No.</td> </tr> <tr> <td>11c. Fax No.</td> <td>11d. e-Mail</td> </tr> </table>	11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No.	11c. Fax No.	11d. e-Mail
11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No.				
11c. Fax No.	11d. 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, the undersigned, declare that the statements herein are true to the best of my knowledge and belief. Individual (Signature of representative or person making charge) (Print name and title or office, if any) (b) (6), (b) (7)(C) Address (date) 6/26/19	<table border="1"> <tr> <td>Tel. No.</td> </tr> <tr> <td>Cell No. (b) (6), (b) (7)(C)</td> </tr> <tr> <td>Fax No.</td> </tr> <tr> <td>e-Mail (b) (6), (b) (7)(C)</td> </tr> </table>	Tel. No.	Cell No. (b) (6), (b) (7)(C)	Fax No.	e-Mail (b) (6), (b) (7)(C)
Tel. No.					
Cell No. (b) (6), (b) (7)(C)					
Fax No.					
e-Mail (b) (6), (b) (7)(C)					

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PRIVACY ACT STATEMENT

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