FORM NLRB-508 (4-19)

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

	DO NOT WRITE IN T	HIS SPACE
Case	07-CB-242591	Date Filed 6/3/2019

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

1. LABOR ORGANIZATION OR IT	TS AGENTS A	AGAINST WHICH CHAR	GE IS BROU	IGHT		
ı. Name			b. Union Representative to contact			
WORKERS UNITED/SEIU and its Local 2562			(b) (6), (b)	(7)(C)		
c. Address (Street, city, state, and ZIP code)		. .	d. Tel. No. (b) (6), (b) (7)(C)	e. Cell No.	
33 South Ashland Ave., Chicago, IL 60607-270		f. Fax. No.				
			g. e-mail			
h. The above-named labor organization has engaged in and is engaged $1(A)$ practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.		of the Natio	nal Labor Re	elations Act, a	nd these unfair labor	
2. Basis of the Charge (set forth a clear and concise statement of the	he facts const	ituting the alleged unfair i	labor practice	es)		
Within the previous six months, the above-named labor org protected by Section 7 of the Act by failing and/or refusing employment, for arbitrary or discriminatory reasons or in back. 3. Name of Employer	to commun	as restrained and coercicate with the Chargin	ed employe g Party, res	garding the t	ercise of rights ermination of [0](6).	
4		(616) 784-9050	5. 00.110.			
West Michigan Shared Hospital Laundry		d. e-mail				
5. Location of plant involved (street, city, state and ZIP code)		i	6. Employe	r representat	ive to contact	
3003 Walkent Drive NW, Grand Rapids, MI 49544						
7. Type of establishment (factory, mine, wholesaler, etc.) Services	8. Identify p Laundry	rincipal product or service	е	9. Number	of workers employed	
10. Full name of party filing charge (b) (6), (b) (7)(C)	1.	·				
11. Address of party filing charge (street, city, state and ZIP code) (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No.		c. Fax No.	
		d. e-mail				
12. DECLARATION I declare that I have read the above charge	and that the			Tel. No. b) (6), (b) (7)	(C)	
(b) (6), (b) (7)(C) are (b) (6), (b) (7)(C)	dge and belie (b)	f (6), (b) (7)(C)		Cell No.		
or person making charge)	(Print/type na	ame and title or office, if any)		Fax No.		
Address (b) (6), (b) (7)(C)		Date <u>5 - 3 C</u>	-19	e-mail	· · · · · · · · · · · · · · · · · · ·	

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

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

/		
	DO NOT WRITE I	N THIS SPACE
Case	05 5	Date Filed
	07-CB-242618	6-3-2019

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 I					· · · · · · · · · · · · · · · · · · ·	
a. Name Local 1, SEIU			b. Union Representative to contact Darryl E. Jones, Grievance Representative			
c. Address (Street, city, state, and ZIP code) 2211 E. Jefferson 3rd Floor			d. Tel. No. (313)567 f. Fax. No.	-3903	e. Cell No.	
Detroit, MI 48207			g. e-mail	· · · · · · · · · · · · · · · · · · ·		
h. The above-named labor organization has engaged in and is eng $(1)(A)$ practices are practices affecting commerce within the meaning of	nal Labor Re	elations Act, a	nd these unfair labor			
the Act and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the Since (100.00) (100.00) (2019) the above Union has failed and refuse arbitratry and discriminatory reasons.					grievances for	
3. Name of Employer GDI Integrated Facility Services		4a. Tel. No. 248-483-3170 d. e-mail	b. Cell No.		c. Fax No.	
5. Location of plant involved (street, city, state and ZIP code) 24300 Southfield Rd. Suite 220 Southfield, MI 48075			6. Employer representative to contact Ida El-Orra, HR Assistant			
7. Type of establishment (factory, mine, wholesaler, etc.) Janitorial	8. Identify po Janitorial	rincipal product or service		9. Number o	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)		T-I M-		
I declare that I have read the above charge (b) (6), (b) (7)(C)				Tel. No.		
signature of representative or person making charge)	(Print/type na	me and title or office, if any)		Fax No.		
Address		Date (6-3-)	7	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

FORM NLRB-508 (4-19)

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

DO NOT WRITE IN THIS SPACE						
Case	07-CB-242848	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 IT	TS AGENTS	AGAINST WHICH CHAR	GE IS BROI	JGHT			
a. Name IUE-CWA Local 84555	- 1			nion Representative to contact (6), (b) (7)(C)			
c. Address (Street, city, state, and ZIP code) P.O. Box 1323 Fowlerville, MI 48836		d. Tel. No. (b) (6), (b) (7)(C) f. Fax. No.					
			g. e-mail				
h. The above-named labor organization has engaged in and is engaging in unfair labor practices within the meaning of section 8(b) and (list subsections) 8(b)(1) and 8(b)(2) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.							
2. Basis of the Charge (set forth a clear and concise statement of the See Attachment A.	e facts const	ituting the alleged unfair l	abor practice	s)			
3. Name of Employer Ventra Fowlerville LLC		4a. Tel. No. 517-223-8405	b. Cell No.		c. Fax No.		
		d. e-mail					
5. Location of plant involved (street, city, state and ZIP code) 8887 West Grand River Avenue, Fowlerville, MI 48836			6. Employer representative to contact Mark Griswold, General Manager				
7. Type of establishment (factory, mine, wholesaler, etc.) plant	8. Identify p	rincipal product or service e		Number of workers employed 241			
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)		d. e-mail	<u> </u>				
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. Alyssa K. Hazelwood, Staff Attorney				Tel. No. 703-321-8510 Cell No.			
(signature of representative or person making charge)	(Print/type na	ame and title or office, if any)	I	Fax No. 703-321-9319			
c/o National Right to Work Legal Defense Foundation, Inc Address 8001 Braddock Road, Ste 600, Springfield, VA 22160 Date				e-mail akh@nrtw.org			

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

Attachment A

- 1. (b) (6), (b) (7)(C) ("Charging Party") is employed by Ventra Fowlerville ("Ventra") in the job classification of (b) (6), (b) (7)(C) is represented by, but is not a member of IUE-CWA Local 84555 ("Union").
- 2. Charging Party was a member of the Union but, in (b) (6), (b) (7)(C) 2015, resigned membership in the Union.
- 3. All previous contracts during Charging Party's employment at Ventra contained three job classifications eligible to earn journeyman's cards. Charging Party's job classification, (b) (6), (b) (7)(C) was one such position. The other two positions in which employees were eligible to earn a card were: General Maintenance Grade 3, and Maintenance Elect. Grade 2. Charging Party earned a journeyman's card while working for Ventra.
- 4. Under all previous collective bargaining agreements, Charging Party was a Union member.
- 5. On or about December 5, 2018, the last contract negotiated while Charging Party was a Union member expired. This contract contained the aforementioned three job classifications for journeyman's card holders.
- 6. The new contract, signed on or about December 20, 2018, establishes a wage increase specifically for employees with journeyman's cards for the Maintenance and Electrical Maintenance job classifications, entitled "Maintenance Journeyman and Electrical Maintenance Journeyman."
- 7. Charging Party's job classification of (b) (6), (b) (7)(C) did not receive a similar wage premium for journeyman's card holders. Since Charging Party is the only employee in this job classification, is the only eligible employee in the bargaining unit that did not receive the wage premium.
- 8. The Union's failure to negotiate a premium for the (b) (6), (b) (7)(C) job classification was the result of Charging Party's resignation from the Union.
- 9. The Union violated its duty of fair representation by negotiating for a contract that excluded Charging Party from a journeyman's card premium because of non-membership in the Union.
- 10. The Union violated the Act by entering into, and abiding by, a collective bargaining agreement with Ventra that discriminates against Charging Party because resigned membership in the Union.

These, and other related acts and omissions, violate the National Labor Relations Act, and threaten, restrain, and discriminate against Charging Party in the exercise of his Section 7 right to refrain from collective activity and violate the duty of fair representation that the Union owes to each employee, each in violation of Section 8.

FORM NLRB-508 (6-18)

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

DO NOT WRITE I	N THIS SPACE
Case 07-CB-243029	Date Filed 6/6/2019

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

1. LABOR ORGANIZATION OR IT	TS AGENTS	AGAINST WHICH CHAR	GE IS BROL	GHT	,		
				epresentative Stockwell	to contact		
(0.000, 0.00,				0324	e. Cell No.		
500 Hulet Drive Bloomfield Township, MI 48302				f. Fax. No. (248)454-1766			
			g. e-mail dstockwei	ll@iuoe324.	org		
h. The above-named labor organization has engaged in and is engaged (list subsections) (A) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.		of the Natio	nal Labor Re	elations Act, a	nd these unfair labor		
2. Basis of the Charge (set forth a clear and concise statement of the	ne facts const	ituting the alleged unfair l	abor practice	es)			
Within the last six months, the Union has restrained and coof their Section 7 rights by threatening to discipline and fine (1)(A). The Charging Party requests injunctive relief pursuant to Section 1.	e them in re	taliation for their prote					
3. Name of Employer Ace-Saginaw Paving Company		4a. Tel. No. 313-429-2355	b. Cell No.		c. Fax No.		
		d. e-mail LWYATT@edwclevy	y.net				
5. Location of plant involved (street, city, state and ZIP code) 115 S. Averill Ave. Flint, MI 48506			6. Employe Stuart But	r representati trick, Couns	ve to contact sel		
7. Type of establishment (factory, mine, wholesaler, etc.) asphalt producer		rincipal product or service oducts and services	<u> </u>	9. Number of	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) (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No.		c. Fax No.		
		d. e-mail		•			
12. DECLARATION I declare that I have read the above charge are true to the best of my knowled	and that the s ige and belief		(3	Tel. No. 317)237-030 Cell No.	00		
(signature of representative or person making charge)	(Print/type na	me and title or office, if any)		ax No. 317)237-100	00		
Address 300 N. Meridian St., Suite 2700, Indianapolis, IN 4	46204	Date Jun 6, 2019		-mail uart.buttricl	@faegrebd.com		

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					
Case	Date Filed				
07-CB-243041	6/7/19				

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	ntair labor pra	ictice occurre	ed or is occurring.			
1. LABOR ORGANIZATION OR ITS	S AGENTS AGAINST WHICH						
a. Name		b. Union Re	presentative	to contact			
United Food and Commercial Workers Local 876			Jessie Dziubinski				
		Title: Unio	n Rep				
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	674	e. Cell No.			
876 Horace Brown Drive		(248) 585-9 f. Fax No.	0/1	q. e-Mail			
MI Madison Hts 48071		I. Fax No.		g. 6-Ividii			
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A)	of the Natio	onal Labor Re	lations Act, a	and these unfair labor practices			
are unfair practices affecting commerce within the meaning of the A meaning of the Act and the Postal Reorganization Act.	ct, or these untair labor practi	ces are untair	practices at	recting commerce within the			
Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor	practices)				
	3 3	•	,				
See additional page							
Name of Employer		4a. Tel. No.	SEE.	b. Cell No.			
Krogers		(586) 263-95 c. Fax No.	ງວວ	d. e-Mail			
		c. rux no.		u. U-IVIUII			
5. Location of plant involved (street, city, state and ZIP code)			6. Employ Tim Kopie	ver representative to contact			
41941 Garfield Rd MI Clinton Twp 48038-			1	re Manager			
7. Type of establishment (factory, mine, wholesaler, etc.)	Identify principal product	or contino		er of workers employed			
	,	or service	100	or workers employed			
Retail (Grocery)	Groceries	11a. Tel. No	<u> </u>	b. Cell No.			
10. Full name of party filing charge		(b) (6), (b) (7)		D. Cell No.			
(b) (6), (b) (7)(C)		c. Fax No.	(-)	d. e-Mail			
44.411				(b) (6), (b) (7)(C)			
11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)				<u> </u>			
(6) (6), (6) (7)(6)							
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie		. No. (b) (6), (t	b) (7)(C)			
By (b) (6), (b) (7)(C)	b) (6), (b) (7)(C)	Cel	No.				
	name and title or office, if any		No.				
	Title:	Fax	INO.				
(b) (6), (b) (7)(C)		e-N		(1) (7) (6)			
Address	(date) ^{06/7/2019}	22:42:54	(b) (6)	, (b) (7)(C)			

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

8(b)(1)(A)

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

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

OR ITS AGENTS

	FORM EXEMPT UNDER 44 U.S.C 3512						
DO NOT WRITE IN THIS SPACE							
Case	Date Filed						
07-CB-243113	June 10, 2019						

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	nfair labor pr	actice occurre	ed or is occurring.			
1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT							
a. Name		b. Union Re	presentative	to contact			
Teamsters Local 283	amsters Local 283			Steve Hicks			
			Title: President				
c. Address (Street, city, state, and ZIP code)	 	d. Tel. No. (734) 282-	8850	e. Cell,No.			
1625 Fort Street		f. Fax No.		g. e-Mail			
MI Wyandotte 48192				sjh29@aol.com			
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	e facts constituting the alleged	d unfäir laboi	practices)				
See additional page							
3. Name of Employer		4a. Tel. No		b. Cell No.			
, , ,		1	•	J. 35 116.			
Detroit Medical Center		c. Fax No.	•	d. e-Mail			
				cheitchu@dmc.org			
Location of plant involved (street, city, state and ZIP code)		<u> </u>	6 Employ	/er representative to contact			
3663 Woodward Ave. Fourth Floor - HR			Catherine				
MI Detroit 48201-2445			Title: Man	ager - Labor and Employee Relations			
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed			
Healthcare	Hospital Services	·	10000				
10. Full name of party filing charge		11a. Tel. N	lo.	b. Cell No.			
Catherine Reed		(313) 949-(961				
Detroit Medical Center		c. Fax No.		d. e-Mail			
11. Address of party filing charge (street, city, state and ZIP code.)	·			cheitchu@dmc.org			
3663 Woodward Ave. Fourth Floor - HR							
MI Detroit 48201-2445							
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to		el. No. (313) 94	49-6961				
By Catherine Reed (signature of representative or person making charge) (District	Catherine Reed		ell No.				
(signature of representative or person making charge) (Print/type	a name and title or office, if an Title: Manager - Labor and Employee R	y) elations Fa	x No.				
3663 Woodward Ave. Fourth Floor - HR Detroit MI 48201-2445 Address	(date) ^{06/10/201}	e- 19 10:56:59	Mail cheitch	nu@dmc.org			
	(vaic)			•			

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

R	1	٠,	ı	3
U		"	ι	J

8(b)(3)
Within the previous six months, the above-named labor organization has failed and refused to bargain in good faith with the employer.

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TOKAL EXEMPT ONDER TO 0.0.0 0012
	E IN THIS SPACE
O7-CB-243114)	Date Filed 6-5-2019

INSTRUCTIONS: File an original with NLRB Regional Director for the				ed or is occurring.
1. LABOR ORGANIZATION OR ITS	S AGENTS AGAINST WHICH		presentative	to contact
a. Name			Woods	to contact
American Postal Union				
c. Address (Street, city, state, and ZIP code)		d. Tel. No. 248-54	3-3262	e. Cell No.
810 Livernois Avenue		f. Fax No.		g. e-Mail
Ferndale, Michigan 48220		248-543	2750	apwu480.org
		L		
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) are unfair practices affecting commerce within the meaning of the Ameaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor Re	lations Act,	and these unfair labor practices
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the allege	d-unfair-labor	practices)	
The past six months the above Union has failed to	represent me for arbitr	ary and dis	criminator	y reasons.
3. Name of Employer		4a. Tel. No 248-542-		b. Cell No.
United States Postal Service		c. Fax No.		d. e-Mail
Online States College		C. FAX NO.		Q. E-IVIAIL
		<u> </u>		
5. Location of plant involved (street, city, state and ZIP code)			1 '	yer representative to contact
2351 Bellingham Drive			Stephe	en Wolf
Troy, Michigan 48083 7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed
National Call Center	Customer Service		300+	. ,
10. Full name of party filing charge	I	11a, Tel. No (b) (6), (b	2	b. Celi No.
(b) (6), (b) (7)(C)			(/)(C)	
(B)(G), (B)(I)(G)		c. Fax No.		d. e-Mail
11. Address of party filing charge (street, city, state and ZIP code.)		1		(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)				
~ 12. DECLARATION	the heat of my knowledge and holid		l. No. (b) (6)	, (b) (7)(C)
(b) (c), (b) (7)(c) (b) (f) (c)	the best of my knowledge and belied (b), (b) (7)(C)	-	II No.	
B: (Print/type	// // //	_		
	and and or omoo, it an	Fa	k No.	
(b) (6), (b) (7)(C)		e-l	Mail (5)	C) /b) /7)/C)
Address	(date) 5/30		(a)	6), (b) (7)(C)
	(Gate/			

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 LINDER 44 LLS C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TOTAL EXEMIT TOTALER 44 0.0.0 0012	
DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
07-CB-243129	6-7-2019	

1. LABOR ORGANIZATION OR ITS						
	AGENTS AGAINST WHICH	CHARGE IS	BROUGHT			
a. Name		b. Union Re	oresentative	to contact		
Teamster Local 299			Matthew Broderick			
		Title: Unio	n Attorney			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.		
30685 Barrington St		(248) 588-1	882	11-3		
MI Madison Heights 48071		f. Fax No.		g. e-Mail broderickslaw@aol.com		
				brodericksiaw@aoi.com		
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor Re	lations 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 labor	oractices)			
One additional name						
See additional page						
A Name of Frankrica		4a. Tel. No.		b. Cell No.		
Name of Employer National Car Rental		4a. 16i. No.		b. Cell No.		
National Cal Nental		c. Fax No.		d. e-Mail		
Location of plant involved (street, city, state and ZIP code)		ı				
			6 Employ	ver representative to contact		
			6. Employ	ver representative to contact		
338 Lucas Drive MI Detroit 48242		1	6. Employ	ver representative to contact		
338 Lucas Drive	Identify principal product	or service	Title:	ver representative to contact		
338 Lucas Drive MI Detroit 48242	8. Identify principal product	or service	Title:			
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	Title:			
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge	8. Identify principal product		Title: 9. Numbe	er of workers employed		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	11a. Tel. No	Title: 9. Numbe	er of workers employed		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C)	8. Identify principal product	11a. Tel. No	Title: 9. Numbe	er of workers employed b. Cell No.		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge	8. Identify principal product	11a. Tel. No	Title: 9. Numbe	b. Cell No. d. e-Mail		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to		11a. Tel. No (b) (6), (b) (7) c. Fax No.	Title: 9. Numbe	b. Cell No. d. e-Mail (b) (6), (b) (7)(C)		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to By	the best of my knowledge and belie (b) (6), (b) (7)(C)	11a. Tel. No. (b) (6), (b) (7) c. Fax No. Tel f.	Title: 9. Numbe	b. Cell No. d. e-Mail (b) (6), (b) (7)(C)		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to By	the best of my knowledge and belie (b) (6), (b) (7)(C) name and title or office, if any	11a. Tel. No. (b) (6), (b) (7) c. Fax No. Tel f. Cel	Title: 9. Numbe 0. (C) No. (b) (6), (t)	b. Cell No. d. e-Mail (b) (6), (b) (7)(C)		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to By (b) (6), (b) (7)(C) (signature of representative or person making charge) (Print/type	the best of my knowledge and belie (b) (6), (b) (7)(C)	11a. Tel. No. (b) (6), (b) (7) c. Fax No. Tel f. Cel	Title: 9. Numbe (C) No. (b) (6), (t)	b. Cell No. d. e-Mail (b) (6), (b) (7)(C)		
338 Lucas Drive MI Detroit 48242 7. Type of establishment (factory, mine, wholesaler, etc.) 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to By	the best of my knowledge and belie (b) (6), (b) (7)(C) name and title or office, if any	11a. Tel. No. (b) (6), (b) (7) c. Fax No. Tel f. Cel	Title: 9. Number 7. (C) No. (b) (6), (t) No. (a) No.	b. Cell No. d. 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

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.

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

FORM EXEMPT UNDER 44 U.S.C 3512

FORM NLRB-508 (6-18)

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

DO NOT WRITE IN THIS	SPACE
07-CB-243145	Date Filed 6-7-2019

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

TOTAL TIES AN ORIGINAL WATTE TO TAGE MAD DIRECTOR TO					occorning.
1. LABOR ORGANIZATION OR	ITS AGENTS AGA	INST WHICH CHARC			
a. Name Local 155, International Union, United Automobile, Aerospace and Agricultural Implement Workers of America (UAW), AFL-CIO (Integrated Manufacturing and Assembly,				esentative , Presiden	
c. Address (Street, city, state, and ZIP code) 7420 Murthum Avenue, Warren, MI 48092			d. Tel. No. e. Ce 586 264 5780		e. Cell No.
			f. Fax. No.		
		ı	g. e-mail		
h. The above-named labor organization has engaged in and is eng	ngaging in unfair lab	or practices within the	meaning of se	ction B(b),	subsections (1) and
(list subsections) (A) and (2)		of the Natio	nal Labor Relat	ions Act, a	nd these unfair labor
practices are practices affecting commerce within the meaning the Act and the Postal Reorganization Act.	of the Act, or these	unfair labor practices	affecting com	neroe withi	in the meaning of
2. Basis of the Charge (set forth a clear and concise statement of	the facts constitution	ng the alleged unfair la	abor practices)		
Within the six months preceding the filing of this charge, t	the above-named	l labor organization	, by its office	rs, agents	
has restrained and coerced employees in the rights guarant (b)(6),(b)(7)(C), including by obtaining Employer assistance in	iteed by Section 7	of the Act by seek	ting backpayn	nent of du	ies of
, including by obtaining Employer assistance in	n the concernon of	r back dues.			
3. Name of Employer		Tal No.	b, Cell No.		c. Fax No.
Faurecia Interior Systems, Inc.		ı. Tel. No. 8 658 1314	D. Celling.)	C. Fax No.
• .	\ <u>`</u> _	e-mail	<u> </u>		
	"-	eniaii			
5. Location of plant involved (street, city, state and ZIP code)			6. Employer re	epresentati	ive to contact
6100 Sims Drive, Sterling Heights, MI 48313			Justin Jenkir	15, HR	10 10 0011001
			}		
			}		
7. Type of establishment (factory, mine, wholeseler, etc.)		pal product or service			of workers employed
Factory	Automotive se	eats	4	0	
10. Full name of party filing charge (b) (6), (b) (7)(C)					
11. Address of party filing charge (street, city, state and ZIP code)	11	a. Tel, No.	b. Cell No.		c. Fax No.
(b) (6), (b) (7)(C)	1		(b) (6), (b) (7)(0	2)	
	d.	e-mail			
	(b)	(6), (b) (7)(C)		_	
(6), (b) (7)(C) 12, DECLARATIO			Tel	No.	
(b) (b) (c) Greating	ge and that the state ledge and belief.	ements			
Thy Mowie		, (b) (7)(C)	(15 °	6), (b) (7)(0	3)
	(0)			77 (-7 (-7))	
	(Print/type name a	and title or office, if any)	Fax	No.	
				_	
Address (b) (6), (b) (7)(C)	5-1-	67	19 🙀	(6), (b) ((7)(C)
(6) (6), (6) (1)(6)	Date	· (9 - / - /		(O), (D) ((1)(0)

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

	TOTAL EXEMIT TOTALETT TO O.O.O.O.O.	
DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
07-CB-243207	6-12-2019	

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	ınfaır labor pra	actice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	S AGENTS AGAINST WHICH			
a. Name			presentative	to contact
UAW New West Side Local 174		(b) (6), (b) (7)(C)	
		Title: (b)	(6), (b) (7)(0	
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	000	e. Cell No.
38200 Michigan Ave		(313) 367-2 f. Fax No.	633	g. e-Mail
MI Romulus 48184		I. Fax No.		g. e-iviali
h. The above-named organization(s) or its agents has (have) engaged				
subsection(s) (list subsections) (1)(A), (2) are unfair practices affecting commerce within the meaning of the A	or these unfair labor pract	ices are unfai	r practices af	and these unfair labor practices fecting commerce within the
meaning of the Act and the Postal Reorganization Act.	<u> </u>		<u> </u>	
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the allege	d unfair labor	practices)	
See additional page				
occ additional page				
		A- T-I N-		L C-IIN-
3. Name of Employer		4a. Tel. No.		b. Cell No.
US Parks		c. Fax No.		d. e-Mail
		1		
5.1. 6. 6.1 (1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.			I 0 E 1	15 1 1 1
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	er representative to contact
9601 Middlebelt Rd MI Romulus 48174-				of Operations
7. Type of establishment (factory, mine, wholesaler, etc.)	9 Identify principal product	or contino		er of workers employed
	8. Identify principal product			or workers employed
Transportation	Shuttle people to and from		100	L. O. II.N.
10. Full name of party filing charge		11a. Tel. No (b) (6), (b) (7)		b. Cell No.
(b) (6), (b) (7)(C)		c. Fax No.	(0)	d. e-Mail
		o. raxrio.		(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state and ZIP code.)				
(b) (6), (b) (7)(C)				
12. DECLARATION		Tel	. No.	
I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie	<u> </u>	(b) (6), (l	b) (7)(C)
By (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		l No.	
(signature of representative or person making charge) (Print/type			(No.	
(b) (c) (b) (7)(c)	Title:	Fax	. 110.	
(b) (6), (b) (7)(C)			/lail	
Address	(date)_06/12/201	9 11:32:34	(b) (6)), (b) (7)(C)

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

8(b)(1)(A)

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

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

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

FORM NLRB-508 (6-18)

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

DO NOT WRITE IN THIS SPACE			
Case	07-CB-243351	Date Filed 6/11/19	

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	GAINST WHICH CHARG	E IS BROU	GHT		
a. Name International Union of Operating Engineers Local Union No. 324			b. Union Representative to contact Douglas Stockwell			
c. Address (Street, city, state, and ZIP code)			d. Tel. No. (248)451-	0324	e. Cell No.	
500 Hulet Drive Bloomfield Township, MI 48302			f. Fax. No. (248)454-1766			
g. e-mail dstockwell@iuoe324.					org	
 h. The above-named labor organization has engaged in and is enga (list subsections) (A) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 		of the Nation	nal Labor Re	lations Act, a	nd these unfair labor	
2. Basis of the Charge (set forth a clear and concise statement of the	e facts consti	ituting the alleged unfair la	abor practice	s)		
Within the last six months, the Union has restrained and coe of their Section 7 rights by threatening to discipline and fine (1)(A).	them in ret	ers and nonmembers, i taliation for their prote	ncluding th	ne Charging ies, in viola	Party, in the exercise tion of Section 8(b)	
The Charging Party requests injunctive relief pursuant to Se	ction 10(j).					
3. Name of Employer Ace-Saginaw Paving Company		4a. Tel. No. 313-429-2355	b. Cell No.		c. Fax No.	
		d. e-mail LWYATT@edwclevy	net/			
5. Location of plant involved (street, city, state and ZIP code) 115 S. Averill Ave. Flint, MI 48506				representati trick, Couns		
7. Type of establishment (factory, mine, wholesaler, etc.) asphalt producer	8. Identify principal product or service asphalt products and services 9. Number of workers employed 64			of workers employed		
10. Full name of party filing charge (b) (6), (b) (7)(C)						
11. Address of party filling charge (street, city, state and ZIP code) (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No. c. Fax No.		c. Fax No.	
		d. e-mail				
12. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.			Tel. No. (317)237-0300			
Stuart R. Buttrick		Buttrick, Counsel		Cell No.		
(signature of representative or person making charge)	(Print/type na	me and title or office, if any)		Fax No. 317)237-100	00	
Address 300 N. Meridian St., Suite 2700, Indianapolis, IN 46204 Date Jun 10, 2019				e-mail stuart.buttrick@faegrebd.com		

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 LINDER 44 LLS C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TOTAL EXEMIT TOTALER 44 0.0.0 0012	
DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
07-CB-243500	6-14-2019	

ACAINST WHICH		ctice occurre				
AGAINST WITICIT	CHARGE IS	BROUGHT				
	b. Union Rep	resentative t	to contact			
Michigan Nurses Association (MNA)			Sarah B jani			
	Title [.]					
	Tido.					
	d Tel No		e. Cell No.			
		40				
	f. Fax No.		g. e-Mail			
	(517) 349-58	18				
of the Natio	onal Labor Rel	ations Act, a	and these unfair labor practices			
stituting the alleged	d unfair labor p	ractices)				
	4a Tel No		b. Cell No.			
7724) 640 0400						
Beaumont Health - Royal Oak			D. GONTIO.			
	c. Fax No.	89	d. e-Mail			
		89				
			d. e-Mail			
		6. Employ	d. e-Mail rer representative to contact			
	c. Fax No.	6. Employ	d. e-Mail ver representative to contact tor of Labor Relations for Beaumont Health			
v principal product	c. Fax No.	6. Employ Title: Direct	d. e-Mail rer representative to contact			
v principal product e	c. Fax No.	6. Employ	d. e-Mail ver representative to contact tor of Labor Relations for Beaumont Health er of workers employed			
	c. Fax No. or service	6. Employ Title: Direct 9. Numbe 3300	d. e-Mail ver representative to contact tor of Labor Relations for Beaumont Health			
	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No.			
	c. Fax No. or service	6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail			
	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No.			
	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail			
	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail			
	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)			
e y knowledge and belie	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)			
y knowledge and belie	or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	6. Employ Title: Direct 9. Numbe 3300	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)			
e y knowledge and belie	or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No.	6. Employ Title: Direct 9. Numbe 3300 C) No. (b) (6), (b)	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)			
y knowledge and belie	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(c. Fax No. Tel. f. Cell	6. Employ Title: Direct 9. Number 3300 C) No. (b) (6), (b) No.	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)			
y knowledge and belie	c. Fax No. or service 11a. Tel. No. (b) (6), (b) (7)(6) c. Fax No. Tel. f. Cell // Fax e-M	6. Employ Title: Direct 9. Number 3300 C) No. (b) (6), (b) No.	d. e-Mail rer representative to contact tor of Labor Relations for Beaumont Health er of workers employed b. Cell No. d. e-Mail (b) (6), (b) (7)(C)			
	of the Nation	Title: d. Tel. No. (517) 349-56 f. Fax No. (517) 349-58 re)engaging in unfair labor practof the National Labor Relaunfair labor practices are unfair labor practicular	d. Tel. No. (517) 349-5640 f. Fax No. (517) 349-5818 re)engaging in unfair labor practices within tellor of the National Labor Relations Act, a unfair labor practices are unfair practices af etituting the alleged unfair labor practices)			

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

8(b)(1)(A)

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

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

Name of the Union Agent/Representative who made the threat	Date the threats were made
(b) (6), (b) (7)(C)	6/4/19

FORM EXEMPT UNDER 44 U.S.C.3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
07-CB-243531	6-17-2019	

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	nfair labor prac	ctice occurre	ed or is occurring.		
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE IS E	BROUGHT			
a. Name		b. Union Rep	resentative t	to contact		
United Automobile Worker Local 7			Gary Hill			
		Title: Presi	dent			
		11001	done			
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.		
2600 Connor St.		(313) 822-17	44			
MI Detroit 48215-		f. Fax No.		g. e-Mail		
h. The above-named organization(s) or its agents has (have) engaged	in and is (are)engaging in un	fair labor pract	ices within t	he meaning of section 8(b)		
subsection(s) (list subsections) (1)(A), (3)	of the Natio	onal Labor Rela	ations Act, a	nd these unfair labor practices		
are unfair practices affecting commerce within the meaning of the Admening of the Act and the Postal Reorganization Act.	ct, or these unfair labor practi	ces are unfair	practices aff	ecting commerce within the		
	facts constituting the allege	l unfair labor n	ractions)			
Basis of the Charge (set forth a clear and concise statement of the	e racis constituting the alleged	титан тарог р	racuces)			
See additional page						
1 0						
Name of Employer		4a. Tel. No.	74	b. Cell No.		
Fiat Chrysler Automotives		(313) 956-7474 c. Fax No.		d o Mail		
		C. Fax No.		d. e-Mail		
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	er representative to contact		
2101 Connor St.						
MI Detroit 48215			Title:			
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	r of workers employed		
Auto & Truck Manufacturers	Jeep Grand Cherokee/Dodg	je Durango	4500			
10. Full name of party filing charge		11a. Tel. No.		b. Cell No.		
		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		
(b) (6), (b) (7)(C)		c. Fax No.		d. e-Mail		
44. Address of party filing sharge (street site state and 710 and a				(b) (6), (b) (7)(C)		
11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C)	į					
(b)(0),(b)(1)(0)						
12. DECLARATION		Tel.	No			
I declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie	—	(b) (6), (b	(7)(C)		
	b) (6), (b) (7)(C)	Cell) (7)(C)		
(signature of representative or person making charge) (Print/type name and title or office, if any) Fax No.				/ (·)(·)		
	Title:	FdX	INO.			
(b) (6), (b) (7)(C)		e-M	ail			
Address	(date)_06/17/201	9 12:20:58		, (b) (7)(C)		
	(uate)					

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

8(b)(1)(A)

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

8(b)(3)

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

FORM NLRB-508 (6-18)

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

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
07-CB-243598	6/11/19	

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

143 1100 110110. Tile att original with NETED Trogional Birodor for a	io rogion in in		о решене		J
1. LABOR ORGANIZATION OR IT	S AGENTS A	AGAINST WHICH CHARC			
			b. Union Representative to contact Douglas Stockwell		
C. Address (offect, city, state, and zir vodo)			d. Tel. No (248)451		e. Cell No.
500 Hulet Drive Bloomfield Township, MI 48302			f. Fax. No (248)454		A de de la constante de la con
			g. e-mail dstockwe	ell@iuoe324.	org
 h. The above-named labor organization has engaged in and is engaged (list subsections) (A) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 		of the Nation	nal Labor R	Relations Act, a	nd these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of the	ne facts const	ituting the alleged unfair la	abor practio	es)	
Within the last six months, the Union has restrained and coof their Section 7 rights by threatening to discipline and fine (1)(A). The Charging Party requests injunctive relief pursuant to Section 1.	e them in re	taliation for their prote	including cted activ	the Charging ities, in viola	Party, in the exercise tion of Section 8(b)
3. Name of Employer Ace-Saginaw Paving Company		4a. Tel. No. 313-429-2355	b. Cell No),	c. Fax No.
		d. e-mail LWYATT@edwclevy	.net		<u></u>
5. Location of plant involved (street, city, state and ZIP code) 115 S. Averill Ave. Flint, MI 48506				er representati attrick, Coun	
7. Type of establishment (factory, mine, wholesaler, etc.) asphalt producer	8. Identify p	Identify principal product or service phalt products and services 9. Number of workers employed 64			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) (b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No).	c. Fax No.
		d. e-mail			
12. DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.				Tel. No. (317)237-0300	
Sturet R. Buttick		Buttrick, Counsel		Cell No.	
(signature of representative or person making charge) (Print/type name and title or office, if any) Fax No. (317)237-1000		00			
Address 300 N. Meridian St., Suite 2700, Indianapolis, IN 46204 Date Jun 18, 2019 e-mail stuart.buttrick@faegre			k@faegrebd.com		

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

FORM NLRB-508 (4-19)

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

DO NOT WRIT	E IN THIS SPACE
Case 07-CB-243731	Date Filed June 20, 2019

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

1. LABOR ORGANIZATION OR I					
a. Name			b. Union Representative to contact Branden Gemzer		
Michigan Nurses Association			Branden	Gemzer	
c. Address (Street, city, state, and ZIP code) 2310 Jolly Oak Rd Okemos MI 49441		***************************************	d. Tel. No 517 349-		e. Cell No. 517 220-1261
Oxemos Mil 49441			f. Fax. No 517 349-		en e
			g. e-mail Branden.	Gemzer@mi	inurses.org
 h. The above-named labor organization has engaged in and is eng (3) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act. 	-	of the Natio	nal Labor R	elations Act, a	nd these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of the See additional pages	he facts const	tituting the alleged unfair i	abor practic	es)	
3. Name of Employer Munson Healthcare Manistee Hospital		4a. Tel. No. 231 398-1111 d. e-mall kweckesser@mhc.ne	b. Cell No 231 360-	1551	c. Fax No.
5. Location of plant involved (street, city, state and ZIP code) 1465 E. Parkdale Avenue Manistee MI 49660			er representati kesser	ve to contact	
7. Type of establishment (tactory, mine, wholesaler, etc.) Acute care hospital				9. Number o	f workers employed
10. Full name of party filing charge Munson Healthcare Manistee Hospital	<u> </u>				
11. Address of party filing charge (street, city, state and ZIP code) 1465 E. Parkdale Avenue		11a. Tel. No. 231 398-1111	b. Cell No. c. Fax No. 231 360-1551		c. Fax No.
d. e-mail kweckesser@mhc.net					
12. DECLARATION I declare that I have read the above charge and that the statements				Tel. No. 516 632-8027	Amazoria Areannes (Alexander (Alexander)
are true to the best of my knowledge and belief. John H Gretzinger, Labor Counsel			1	Cell No. 516 443-3336	5
(signature of representative or person making charge) (Print/lype name and title or office, if any)				Fex No. 516 632-8027	7
Mika Meyers 900 Monroe Avenue NW Grand Rapids MI Address 49503 Date June 20, 2019 Ge-mail JGretzinger@mikameyers.com			mikameyers.com		
the same of the sa	4.0	Contract Con	والمسترين		

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

Unfair Labor Charge

- 1. West Shore Medical Center was signatory to a collective bargaining agreement with the Michigan Nurses Association ("MNA") which was effective from July 1, 2015 through December 31, 2017. On or about April 1, 2017 Munson Healthcare Manistee Hospital ("MHMH") voluntarily recognized MNA as the representative of its non-supervisory registered nurses and executed a revised collective bargaining agreement effective through December 31, 2017. The parties have been engaged in collective bargaining negotiations since October of 2017 but have been unable to reach a voluntary agreement on all of the terms of a successor agreement.
- 2. A mediation session was held on November 29, 2018 to attempt to reach agreement on the terms of a successor collective bargaining agreement and to address time sensitive changes to the pay period that needed to occur on December 15, 2018, and health care changes that were necessary to be implemented on January 1, 2019. On December 5, 2018 MHMH submitted its Final Offer to the MNA representatives and requested to be advised when to reserve a conference room for a ratification vote.
- 3. The MNA did not schedule a meeting to consider ratification of the December 5, 2018 Final Offer, nor did it take any actions in December 2018 to request further collective bargaining or mediation sessions or to submit any revised proposals.
- 4. There were numerous communications between MHMH and the MNA on contract administration matters during the period between January 1, 2019 and May 1, 2019, but at no time did MNA provide any response to the MHMH Final Offer of December 5, 2018 or request any further collective bargaining sessions.
- 5. In April 2019 the premium costs for the health care insurance for the July 1, 2019 to June 30, 2020 plan year became known and open enrollment was scheduled for the period from May 8, 2019 through May 22, 2019. The December 5, 2019 Final Offer contained projected health insurance costs for the next insurance plan year, and receipt of the actual premiums required revision of some of the proposals to be accurate. Contact was made with (b) (6), (b) (7)(C) who indicated that the dates of May 16 and 17, 2019 would work, with May 20, 2019 as a backup date. After confirming that Mediator (b) (6), (b) (7)(C) could be available to assist the parties on May 16 and 17, 2019, those dates were confirmed for collective bargaining.
- 6. A revised proposal of April 30, 2019 was prepared with information applicable to the next health care year which would start on July 1, 2019, and that proposal was submitted to on May 1, 2019.
- 7. The parties met on May 16, 2019 and discussed the outstanding issues with the assistance of Mediator At the beginning of that session the MNA presented its response to the April 30, 2019 proposal and a proposal regarding the impact of the elimination of the OB Department. It was the position of the MNA that no severance packages could be implemented without being provided to and approved by the bargaining team/Labor representative prior to being made available to the affected nurse. After substantial discussion, MHMH made a revised proposal

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

of May 16, 2019 that addressed all outstanding issues. The parties then adjourned with the MNA to respond on May 17, 2019.

: 5

- 8. On May 17, 2019, the parties met and received a revised proposal from the MNA. After discussion regarding the revised proposal, MHMH prepared and provided MNA with its Final Offer of May 17, 2019. After discussion of that Final Offer it was agreed that the Final Offer would be presented for consideration at a May 28, 2019 meeting of the MNA membership.
- 9. A review of the May 17, 2019 MNA proposal and the MHMH Final Offer of May 17, 2019 reveals the following differences:
- (a) MHMH proposes to change the definition of part time registered nurse from working 32 hours every two weeks to working 40 hours every two weeks to conform to Munson's 20 hours per week work standard for defining a regular part time nurse. MNA opposed that change.
- (b) MHMH proposes to remove "and time off from approved PTO" from the definition of the calculation of overtime to conform with Munson's time keeping practices. MNA opposed this change and appears to incorrectly believe that this somehow impacts accrual of PTO even though Section 16.0 specifically includes PTO as hours worked for accrual purposes.
- (c) MHMH proposes to set the annual pension contribution at 3.00% of their wages effective as of January 1, 2019 and establish on ratification a Hospital match of 2/3 of a dollar for every dollar of employee voluntary contribution, with a maximum additional Hospital contribution of 2.00%. MNA agreed with the retirement proposal but proposed an additional payment equal to 3.00% of the wages that would have been due from January 1, 2019 to ratification if the wages were made retroactive.
- (d) MNA proposed a (b) (4) wage increase retroactive to January 1, 2019, with a lump sum bonus of (b) (4) and an additional (b) (4) wage increase on January 1, 2020. MHMH proposed a (b) (4) wage increase as of ratification and an additional (b) (4) wage increase on January 1, 2020.

 MHMH also proposed a ratification bonus of (b) (4) each full time nurse and (b) (4) o each regular part-time nurse provided that the proposal was ratified by 5 pm on May 29, 2019.
- (e) MHMH proposed that the shift differential be paid only to those employees who worked at least 4 hours in the afternoon (3 pm to 11 pm) or evening (11 pm to 7 am) shift. The MNA proposed to continue the practice of paying shift differential to anyone who worked during those periods so that employees who worked a regular 8-5 schedule would receive two hours of shift differential.
- (f) MNA proposed to modify the bumping provision to eliminate the longtime provision that provides "If a unit closes the Registered Nurses in the unit will be laid off. Layoffs shall not be by laying off the least senior Registered Nurses in the Bargaining Unit."
- (g) MHMH proposed severance pay for OB Nurses if an agreement was reached by May 29, 2019.

- 10. MHMH believed that this proposal would be acceptable to employees in the unit if they were advised of its provisions and a copy of the Final Offer was sent to all employees on May 23, 2019 with a cover letter addressing its terms.
- Late on the afternoon of May 24, 2019, (b) (6), (b) (7)(C) advised MHMH that there would be no ratification vote on May 28, 2019 and proposed additional bargaining dates of June 6, 7 and 12, 2019. (b) (6), (b) (7)(C) responded on May 28, 2019 accepting the proposed June 12, 2019 bargaining session.
- 12. On June 10, 2019, (b) (6), (b) (7)(C) contacted (b) (6), (b) (7)(C) to confirm the June 12, 2019 bargaining session, but was advised that would let would let session would be held. (b) (6), (b) (7)(C) was subsequently advised on June 11, 2019 that there would be no June 12, 2019 bargaining session but no additional dates were proposed by MNA.
- 13. The course of conduct by the MNA and its representatives during the last six months exhibits a refusal to bargain in good faith in violation of Section 8(b)(3).

FORM EXEMPT UNDER 44 U.S.C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TOTAL EXEMIT TOTALETT TO CO.O.O.O.O.	
DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
07-CB-243989	6-25-2019	

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	ntair labor pra	ctice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH			
a. Name		b. Union Rep	resentative	to contact
UAW Local 412			itt	
		Title: Presi	ident Local 4	112
c. Address (Street, city, state, and ZIP code)		d. Tel. No.	150	e. Cell No.
2005 tobsal court		(586) 754-24 f. Fax No.	150	g. e-Mail
MI warren 48091-1277		(586) 754-12	77	jwitt@uaw412.org
		` ,		
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A) are unfair practices affecting commerce within the meaning of the Action 2 are unfair practices.	of the Natio	onal Labor Rel	ations Act, a	and these unfair labor practices
meaning of the Act and the Postal Reorganization Act.	ct, or these utilali labor practi	ces are urran	practices an	lecting commerce within the
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor p	ractices)	
Con additional name				
See additional page				
		4- T-L N-		L CHN-
3. Name of Employer		4a. Tel. No. (810) 989-39	23	b. Cell No. (586) 260-8207
FCA		c. Fax No.	2.0	d. e-Mail
				anthony.scarletta@fcagroup.com
5. Location of plant involved (street, city, state and ZIP code)			Anthony S	er representative to contact
2900 busha hwy MI marysville 48040-			1 1	nan Resources
7. Type of establishment (factory, mine, wholesaler, etc.)	Identify principal product	or service	9 Numbe	r of workers employed
Auto & Truck Parts	axles	OI SCIVICC	900	n or momore employed
	dales	11a. Tel. No.	<u> </u>	b. Cell No.
10. Full name of party filing charge		(b) (6), (b) (7)((b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		c. Fax No.		d. e-Mail
44. Address of party filing sharge (-tw-st_sit_state_and 7/0 and a)				(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	# b# -f l d d-b-l'-	Tel.	No. (b) (6), (b	5\/7\/C\
(b) (6) (b) (7)(C) (b)		Cell) (T)(O)
) (6), (b) (7)(C) name and title or office, if any	<i>(</i>)	(b) (6), (b	o) (7)(C)
(1 × /0× /1 × /=×/0×	Title:	Fax	No.	
(b) (6), (b) (7)(C)	DCDC POA	e-M		(b) (7)(C)
Address	(date)_06/25/201	9 00.03.21	(b) (d)	, (b) (7)(C)

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

8(b)(1)(A)

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

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

Name of the Union Agent/Representative who made the threat	Date the threats were made
(b) (8). (b) (7)(C)	June 19th,2019

FORM EXEMPT UNDER 44 U.S.C.3512

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

	TOTAL EXEMIT TOTAL EXTENSION OF THE	
DO NOT WRITE IN THIS SPACE		
Case	Date Filed	
07-CB-244060	6-26-2019	

1. LABOR ORGANIZATION OR ITS						
	S AGENTS AGAINST WHICH	CHARGE IS	ROUGHT	,		
a. Name			b. Union Representative to contact			
Local No. 369, and Region 1, International Union, Unite Aerospace and Agricultural Implement Workers of Ame		Jason Craig				
c. Address (Street, city, state, and ZIP code) 27800 George Merrelli Drive		d. Tel. No. 586-427-9	200	e. Cell No.		
Varren, MI 48092		f. Fax No.		g. e-Mail		
variett, till 40002		586-427-7142		uawregion1@uaw.net		
n. 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 American forms of the Act and the Postal Reorganization Act.	of the National Control of the	onal Labor Rela ices are unfair	ations Act, a oractices af			
Basis of the Charge (set forth a clear and concise statement of the Within the last six months, the Union has failed and refu						
On about ^{(b)(b)(7)(c)} 2019, I requested my grievance file,	and ^{(b) (6), (b) (7)(C)} refuse	d to give it to	o me.			
3. Name of Employer Sodecia		4a. Tel. No. 586-413-6	098	b. Cell No.		
		C. Fax No.		helen.brown@sodecia.com		
5. Location of plant involved (street, city, state and ZIP code)						
				ver representative to contact		
42600 Merrill Rd.			Helen B	ver representative to contact Frown, Human		
42600 Merrill Rd. Sterling Heights, MI 48314	P. Identify principal product	or service	Helen B Resource	ver representative to contact frown, Human des Manager		
42600 Merrill Rd. Sterling Heights, MI 48314 7. Type of establishment (factory, mine, wholesaler, etc.)	Identify principal product Auto Parts	or service	Helen B Resource	ver representative to contact Frown, Human		
42600 Merrill Rd. Sterling Heights, MI 48314 7. Type of establishment (factory, mine, wholesaler, etc.) Auto Parts Supplier 10. Full name of party filing charge	1	11a. Tel. No.	Helen B Resource 9. Number 200+	ver representative to contact frown, Human des Manager		
42600 Merrill Rd. Sterling Heights, MI 48314 7. Type of establishment (factory, mine, wholesaler, etc.) Auto Parts Supplier	1		Helen B Resource 9. Number 200+	ver representative to contact frown, Human ces Manager er of workers employed		
42600 Merrill Rd. Sterling Heights, MI 48314 7. Type of establishment (factory, mine, wholesaler, etc.) Auto Parts Supplier 10. Full name of party filing charge (b) (6). (b) (7)(C)	1	11a. Tel. No. (b) (6), (b) (Helen B Resource 9. Number 200+	ver representative to contact Frown, Human ces Manager er of workers employed b. Cell No.		
42600 Merrill Rd. Sterling Heights, MI 48314 7. Type of establishment (factory, mine, wholesaler, etc.) Auto Parts Supplier 10. Full name of party filing charge	1	11a. Tel. No. (b) (6), (b) (Helen B Resource 9. Number 200+	ver representative to contact Frown, Human ces Manager er of workers employed b. Cell No.		
42600 Merrill Rd. Sterling Heights, MI 48314 7. Type of establishment (factory, mine, wholesaler, etc.) Auto Parts Supplier 10. Full name of party filing charge (b) (6), (b) (7)(C) 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION declare that the statements therein are true to individu	Auto Parts o the best of my knowledge and believed.	11a. Tel. No. (b) (6), (b) (c. Fax No.	No. (b) (6), No.	ver representative to contact Frown, Human ces Manager er of workers employed b. 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 NLRB-508 (4-19)

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

DO NOT WRITE IN THIS SPACE							
Case	Date Filed						
07-CB-244065	June 26, 2019						

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

<u></u>			•		•		
1. LABOR ORGANIZATION OR	ITS AGENTS	AGAINST WHICH CHA	RGE IS BRO	UGHT			
. Name Michigan Nurses Association				b. Union Representative to contact Brenden Gemzer			
c. Address (Street, city, state, and ZIP code) 2310 Jolly Oak Rd Okemos MI 49941			d. Tel. No 517 349-		e. Cell No. 517 220-1261		
			f. Fax. No. 517 349-5818				
			g. e-mail Branden.Gemzer@minurses.org				
h. The above-named labor organization has engaged in and is engaged in and is engaged in and is engaged. (1)(A) practices are practices affecting commerce within the meaning the Act and the Postal Reorganization Act.		of the Nat	tional Labor R	Relations Act,	and these unfair labor		
Basis of the Charge (set forth a clear and concise statement of See attached	the facts consi	tituling the alleged unfail	r labor practio	:es)			
3. Name of Employer Munson Healthcare Manistee Hospital		4a. Tel. No. 231 398-1111		b. Cell No. c. Fax No.			
		231 398-1111 231 360-1551 d. e-mail kweckesser@mhc.net					
5. Location of plant involved (street, city, state and ZIP code) 1465 E. Parkdale Avenue Manistee MI 49660		6. Employer representative to contact Kim Weckesser					
7. Type of establishment (factory, mine, wholesaler, etc.) Acute Care Hospital	8. Identify p Health car	principal product or service	ce	9. Number of workers employed 390			
10. Full name of party filing charge Munson Healthcare Manistee Hospital			**************************************	_1			
11. Address of party filing charge (street, city, state and ZIP code) 1465 E. Parkdale Avenue Manistee MI 49660		11a. Tel. No. 231 398-1111	b. Cell No. 231 360-1551 c. Fax No.		c. Fax No,		
		d. e-mail kweckesser@mhc.net					
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. 616 632-8027				
Q.l. H. Seg	John H Gretzinger, Labor Counsel			Cell No. 616 443-3336			
(signature of representative or person making charge) (Print/type name and title or office, if			Fax No. 616 632-8027				
Mika Meyers 900 Monroe Avenue NW Grand Ra Address 49503	apids MI Date 6-25-2019			e-mail JGretzinger@mikameyers.com			

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

Munson Healthcare Manistee Hospital ("MHMH") currently deducts union dues for the Michigan Nurses Association ("MNA") pursuant to a dues check provision which honors signed dues authorizations in a form which shall be supplied by the Union. The forms that MNA utilizes provide as follows:

This payroll deduction authorization and assignment shall continue in effect irrespective of my membership status in the MNA, and shall automatically renew for periods of one year from the date signed below. I may revoke this payroll deduction authorization and assignment by sending written notice by mail to my employer and to MNA not more than 30 days and not less than 15 days prior to the annual anniversary date on which I signed this document, or not more than 30 days and not less than 15 days prior to the expiration date of the applicable collective bargaining agreement between MNA and my employer, whichever occurs sooner.

Memorandum GC 19-04 advises that a complaint should be issued "where a dues checkoff authorization purports to limit an employee's right to revoke that authorization at cession of the contract by imposing an earlier revocation window period" on the basis that a such "A clause containing the window requirement is therefore unlawful under Section 302(c)(4) of the LMRA. ... and "they are facially invalid under the NLRA."

MNA's maintenance and use of dues authorizations with this language violates Section 8(b)(1)(A) of the Act.