INTERNET: FORM NLRB-508 (2-08)

#### FORM EXEMPT UNDER 44 U.S.C 3512

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

# CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

|              | 1 OTHER EXEMIT 1 OTHER 1 44 0.0.0 00 12 |  |  |
|--------------|---|--|--|
| DO NOT WRI   | E IN THIS SPACE                         |  |  |
| Case         | Date Filed                              |  |  |
| 12-CB-242599 | June 3, 2019                            |  |  |

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

| INSTRUCTIONS: File an original with NLRB Regional Director for the  | region in which the alleged u                    | nfair labor pra             | ctice occurre       | ed or is occurring.                   |
|---|--|-----------------------------|---------------------|---------------------------------------|
| 1. LABOR ORGANIZATION OR ITS  | AGENTS AGAINST WHICH                             | CHARGE IS                   | BROUGHT             |                                       |
| a. Name   |  | b. Union Rep                | oresentative        | to contact                            |
| American Postal Workers Union   |  | (b) (6), (b                 |                     | •                                     |
| c. Address (Street, city, state, and ZIP code)  |  | d. Tel. No.<br>(352) 317-70 | 000                 | e. Cell No.                           |
| PO Box 140420 FL Gainesville 32614  |  | f. Fax No.                  |                     | g. e-Mail (b) (6), (b) (7)(C)         |
| h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A), (3) 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 allege                  | d unfair labor (            | oractices)          |                                       |
| See additional page   |  |                             |                     |                                       |
| Name of Employer  |  | 4a. Tel. No.                |                     | b. Cell No.                           |
| United States Postal Service  |  | (353) 580-40                | 099                 | (352) 317-2739                        |
| Clinica States i Stati Scrives  |  | c. Fax No.                  |                     | d. e-Mail                             |
| 5. Location of plant involved (street, city, state and ZIP code)  |  |                             | 6. Employ           | er representative to contact          |
| 1831 E. Wade St.  |  |                             | David Sp            | encer                                 |
| FL Trenton 32693  |  |                             | Title: Offic        | er In Charge/Customer Service Manager |
| 7. Type of establishment (factory, mine, wholesaler, etc.) Others   | Identify principal product     U.S Mail Delivery | or service                  | 9. Numbe            | er of workers employed                |
| 10. Full name of party filing charge  |  | 11a. Tel. No                | <u>'</u><br>).      | b. Cell No.                           |
| (b) (6), (b) (7)(C)   |  | (b) (6), (b) (7)            |                     |                                       |
| 11. Address of party filing charge (street, city, state and ZIP code.)  |  | c. Fax No.                  |                     | d. e-Mail<br>(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               | Tel                         | . No.<br>(b) (6), ( | 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   | name and title or office, if an<br>Title:        |                             | No.                 |                                       |
| (b) (6), (b) (7)(C)   |  | e- <i>N</i>                 | //ail               |                                       |
| Address   | (date)_06/2/2019                                 | 12:31:23                    | (b) (6),            | (b) (7)(C)                            |
| WILLELL EALCE CTATEMENTS ON THIS OUADOS OAN SERVIN  | HOUSED BY SIME AME SIZE                          |                             |                     |                                       |

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**

12-CB-242599

June 3, 2019

## 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.

INTERNET FORM NLRB-508 (2-08)

#### 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 TOTALER TOTAL |  |  |  |
|----------------------------|----------------------------|--|--|--|
| DO NOT WRITE IN THIS SPACE |                            |  |  |  |
| Case                       | Date Filed                 |  |  |  |
| 12-CB-242673               | 6/3/19                     |  |  |  |

| INSTRUCTIONS: File an original with NLRB Regional Director for the  | region in which the alleged u              | nfair labor pra            | actice occurre       | ed or is occurring.              |
|---|--|----------------------------|----------------------|----------------------------------|
| 1. LABOR ORGANIZATION OR ITS  | AGENTS AGAINST WHICH                       |                            |                      |                                  |
| a. Name   |  | b. Union Re                | presentative         | to contact                       |
| IBEW 606  |  | Ron Woo                    | dall                 |                                  |
|   |  | Title: Bus                 | iness Manag          | er                               |
|   |  | d Tal Ma                   |                      | I- O-IIN-                        |
| c. Address (Street, city, state, and ZIP code)  |  | d. Tel. No.<br>(407) 896-7 | 271                  | e. Cell No.                      |
| 820 Virginia dr   |  | f. Fax No.                 |                      | g. e-Mail                        |
| FL Orlando 32803  |  |                            |                      | rwoodall@ibew606.org             |
| h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (1)(A), (3) 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             | practices)           |                                  |
|   |  |                            |                      |                                  |
| See additional page   |  |                            |                      |                                  |
| See additional page   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
|   |  |                            |                      |                                  |
| 3. Name of Employer   |  | 4a. Tel. No.               |                      | b. Cell No.                      |
| Various Employers   |  | c. Fax No.                 |                      | d. e-Mail                        |
|   |  | C. Tax No.                 |                      | u. e-ividii                      |
|   |  |                            | 1                    |                                  |
| 5. Location of plant involved (street, city, state and ZIP code)  |  |                            | 6. Employ            | er representative to contact     |
|   |  |                            | Title:               |                                  |
| 7. Type of establishment (factory, mine, wholesaler, etc.)  | Identify principal product                 | or service                 | 9. Numbe             | er of workers employed           |
| Others  | Entertainment                              |                            |                      | . ,                              |
| 10. Full name of party filing charge  |  | 11a. Tel. No               | ).                   | b. Cell No.                      |
| (b) (6), (b) (7)(C)   |  | (b) (6), (b) (7)           | (C)                  |                                  |
|   |  | c. Fax No.                 |                      | d. e-Mail                        |
| 11. Address of party filing charge (street, city, state and ZIP code.)  |  |                            |                      | (b) (6), (b) (7)(C)              |
| (b) (6), (b) (7)(C)   |  |                            |                      |                                  |
| 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.                         | . No.<br>(b) (6), (b | o) (7)(C)                        |
|   | (b) (6), (b) (7)(C)                        |                            | l No.                |                                  |
| (signature of representative or person making charge) (Print/type   | name and title or office, if any<br>Title: |                            | No.                  |                                  |
| (b) (6), (b) (7)(C)   |  | e-N                        | //ail                |                                  |
| Address —   | (date) <sup>06/3/2019</sup>                | 14:49:07                   |                      | , (b) (7)(C)                     |
|   | (4410)                                     |                            |                      |                                  |

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.

## 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 N                     | OT WRITE IN THIS SPACE                             |
|---|---|--------------------------|--|
| NATIONAL LABOR RELATIONS BOARD  | Case                                    |                          | Date filed   |
| CHARGE AGAINST LABOR ORGANIZATION   | N                                       |                          | *****  |
| OR ITS AGENTS   |   | 2-CB-242572              | JUNE 3, 2019                                       |
| INSTRUCTIONS: File an original of this charge with  | the NLRB Region                         | nal Director of the regi | on in which the alleged unfair labor practice      |
| occurred or is occurring.  1. LABOR ORGANIZATIO   | N OP ITS ACENT                          | ACAINGT WAREH CHA        | BOE (e PROMOUT                                     |
| a. Name   | IN OR ITS AGENT                         | b. Union Represe         |  |
| Unión de Profesionales de la Seguridad P  | rivada v el                             | (b) (6), (b) (7)         |  |
| Transporte de Valores   | irrada y ci                             | (5) (5), (5) (1)         |  |
|   |   | d. Tel. No.              | La Call Na   |
| c. Address  |   | (b) (6), (b) (7)(C)      | e. Cell No.  |
| PO Box 29146  |   |                          |  |
| San Juan PR 00929-0146  |   | f. Fax No.               | g. e-Mall<br>(b) (6), (b) (7)(C)                   |
| <ul> <li>The above-named labor organization or its agents ha</li> </ul>   |   |                          |  |
| 8(b), subsection (1) (A) of the National Labor Relation<br>meaning of the Act, or are unfair practices affecting of | ommerce within ti                       | e meaning of the Act a   | nd the Postal Reorganization Act.                  |
| 2. Basis of the Charge (set forth a clear and concise sta   |   |                          |  |
| Since about April of 2019, the Union for  |   |                          |  |
| provide the following: 1. Copy of the c   |   |                          |  |
| certain union dues or fees; 2. Any agre   |   |                          |  |
| mentioned labor organization regardin   |   |                          |  |
| statements; and, 4. A list of options re  | ated to the p                           | ayment of dues o         | r tees as member and non-member                    |
| of the union.   |   |                          |  |
|   |   |                          |  |
| Since about April of 2019, the above-m  |   |                          |  |
| loss of employment for their failure to   |   |                          |  |
| provide the aforementioned information  | n and/or hold                           |                          |  |
| Name of Employer  |   | Tel. No.                 | 4b. Cell No.                                       |
| The COGAR Group, Ltd  | <u> </u>                                |                          | 4d. e-Mail   |
|   | I **                                    |                          | tfigueroa@thecogargroup.com                        |
| 787-998-4478  |   |                          |  |
| 5. Location of Plant Involved (street, city, state, and ZiP code) 6. Employer representative to                     |   |                          |  |
| G3 O'Neill St. Tres Monjitas San Juan, P.   | R 00918                                 | Teresa Figuero           | a, Contract Manager                                |
|   |   |                          |  |
| 7. Type of Establishment (factory, mine, wholeseler)  | 8. Principal pro                        | duct or service          | Number of Workers employed                         |
| Limited Partnership   | Security Se                             | nuices                   | 39   |
| ·   | Security Se                             |                          |  |
| 10. Full name of party filing charge  |   | 11a. Tel. No.            | 11b. Cell No.                                      |
| (b) (6), (b) (7)(C)   |   |                          | (b) (6), (b) (7)(C)                                |
|   |   | 11c. Fax No.             | 11d e-Mall   |
| 1<br>1  |   |                          | •  |
|   |   | I .                      | 1  |
| 11. Address of party filing charge (street, city, state, and  | ZIP code)                               | <u> </u>                 |  |
| l   | •                                       |                          |  |
| (b) (6), (b) (7)(C)   | 12. DECL                                | ARATION                  |  |
|   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                          | so the best of any branded from Salar              |
| I declare that I have read the above charge an  | a that the staten                       | ents therein are the     | Tel No.  |
| (b) (6), (b) (7)(C)   | (0)(                                    | (D)                      | Cell No.   |
|   | Indivi                                  | dual                     | Cell No. AN R. |
| By:   |   |                          | 7 1 0  |
| (s  |   | pe name and title or of  | Fex No. none R 0091                                |
|   | if any)                                 |                          | PM PM  |
|   | l                                       |                          | 91   |
|   |   | T Date:                  | - 1 - 11-11  |
| Address:<br>Same as 11  |   | Date:                    | 5  |
|   |   |                          | same   |

PRIVACY ACT STATEMENT



| LINITED STATES OF AMERICA  | DO 1107111  | DITE IN TIME COLOR                  |
|--|---|-------------------------------------|
| UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD  | Case  | RITE IN THIS SPACE Date filed       |
| CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS  | 12-CB-243137  | 06/11/2019                          |
| INSTRUCTIONS: File an original of this charge with the NLRB Regional I occurred or is occurring.   |   |                                     |
| LABOR ORGANIZATION OR ITS AGENTS ACCOUNTY  |   |                                     |
| a. Name<br>International Brotherhood of Teamsters,   | b. Union Representative to<br>Clay Jeffries,<br>President | Contact ·                           |
| Local 385  | President   |                                     |
| c. Address<br>126 N. Kirkman Rd  | d. Tei. No.<br>(407) 298-7037                             | e. e. Cell No.                      |
| Orlando, FL 32811-1404   | f. Fax No.  | g. e-Mail<br>cjeffries@local385.org |
| h. The above-named labor organization or its agents have engaged in and ar 8(b), subsection(s) (1)(A) and (2) of the National Labor Relations Act, and within the meaning of the Act, or are unfair practices effecting commerce w | these unfair labor practices are                          | unfair practices affecting commerce |
| 2. Basis of the Charge (set forth a clear and concise statement of the facts co  | enstituting the alleged unfair lab                        | or practices)                       |
|  | 1 mm 4 mm 4 mm - 4 mm - 4 mm - 4                          |                                     |
| Since about June 3, 2019, the above-named labor organization   |   |                                     |
| exercise of rights protected by Section 7 of the Act by operat   | ing a ninng nali in a man                                 | ner mat was arbitrary,              |
| discriminatory or in bad faith.  |   |                                     |
| Since about June 3, 2019, the above-named labor organization   |   |                                     |
| employment with Horizon Scripted Television, Inc. for reason   | ns other than the failure to                              | tender uniformly required           |
| initiation fees and periodic dues.   |   |                                     |
| Name of Employer     Horizon Scripted Television, Inc.   | 4a. Tel. No.<br>(818) 822-2184                            | 4b. Cell No.<br>(818) 822-2184      |
| nonzon scripted relevision, inc.   | 4c. Fax No.   | 4d. e-Mail                          |
|  |   | silisha.sidell@warnerbros.<br>com   |
| 5. Location of Plant involved (street, city, state, and ZIP code)  | 6. Employer representative                                | to contact                          |
| Universal Studios  |   | of Labor Relations                  |
| Orlando, FL 32819  | Burbank, CA 91522   |                                     |
| 7. Type of Establishment (factory, mine, wholesaler) 8. Principal produ  |   | Number of Workers employed          |
| Film Production Studio Television P  |   | 15                                  |
| 10. Full name of party filing charge (b) (6), (b) (7)(C)   | 11a. Tel. No.<br>(b) (6), (b) (7)(C)                      | 11b. Celi No.                       |
|  | 11c. Fax No.  | 11d e-Mail<br>(b) (6), (b) (7)(C)   |
| 11. Address of party filing charge (street, city, state, and ZIP code)   |   |                                     |
| (b) (6), (b) (7)(C)  | ATION   |                                     |
| I declare that I have read the above charge and that the statement   | ts therein are true to the best                           | of my knowledge and belief.         |
| (b) (6), (b) (7)(C)  |   | i Gi (NO.                           |
|  | (b) (7)(C)  | (b) (6), (b) (7)(C)                 |
|  | ame and title or office, if any                           | Cell No.                            |
| Address:<br>(b) (6), (b) (7)(C)  | Date:   | Fax No.                             |
|  | 6/11/19   | (b) (6), (b) (7)(C)                 |

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  | DO NOT W                         | RITE IN THIS SPACE                   |
|---|----------------------------------|--------------------------------------|
| NATIONAL LABOR RELATIONS BOARD  | Case                             | Date filed                           |
| CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS   | 12-CB-243021                     |                                      |
| INSTRUCTIONS: File an original of this charge with the NLRB Regional Di<br>occurred or is occurring.  |                                  |                                      |
| LABOR ORGANIZATION OR ITS AGENTS AGA  |                                  |                                      |
| a. Name   | b. Union Representative to       | Contact                              |
| American Postal Workers Union, Local 1073, AFL-CIO  | (b) (6), (b) (7)(C)              |                                      |
| c. Address  | d. Tel. No.                      | e.e. Cell No.<br>(b) (6), (b) (7)(C) |
| P.O. Box 1073, Sarasota, FL 34230-1073  | f. Fax No.                       | g. e-Mail<br>(b) (6), (b) (7)(C)     |
| h. The above-named labor organization or its agents have engaged in and are<br>8(b), subsection(s) (1)(A) of the National Labor Relations Act, and these unf<br>the meaning of the Act, or are unfair practices affecting commerce within the                     | air labor practices are unfair p | ractices affecting commerce within   |
| 2. Basis of the Charge (set forth a clear and concise statement of the facts con- Since (b) (6), (b) (7)(C) 2019, the above-named labor organization, breached its duty of fair representation, by failing to communic or discriminatory reasons or in bad faith. | , by its officers, agents a      | and representatives, has             |
| 3. Name of Employer   | 4a. Tel. No.                     | 4b. Cell No.                         |

| 3. Name of Employer  |                     | 4a. Tel. No.                   | 4b. Cell No.                      |
|--|---------------------|--------------------------------|-----------------------------------|
| United States Postal Service                                   |                     | (941) 331-4215<br>4c. Fax No.  | 4d. e-Mall                        |
| 5. Location of Plant involved (street, city, state, and ZIP co | ode)                | 6. Employer representativ      | e to contact                      |
| 1661 Ringling Blvd<br>Sarasota, FL 34230                       |                     | Danny Anderson,                | Station Manager                   |
| 7. Type of Establishment (factory, mine, wholesaler)           | 8. Principal produc | or service                     | 9. Number of Workers employed     |
| Postal Service   | Mail distribution   | on and delivery                |                                   |
| 10. Full name of party filing charge                           |                     | 11a. Tel, No.                  | 11b. Cell No.                     |
| (b) (c) (b) (7)(c) t- tt-t-t-t-t-t                             |                     | (b) (6), (b) (7)(C)            |                                   |
| (b) (6), (b) (7)(C), an Individual                             |                     | 11c. Fax No.                   | 11d e-Mall<br>(b) (6), (b) (7)(C) |
| 11. Address of party filing charge (street, city, state, and Z | IP code)            |                                |                                   |
| (b) (6), (b) (7)(C)  |                     |                                |                                   |
|  | 12. DECLARAT        | TION                           |                                   |
| I declare that I have read the above charge and                | that the statements | therein are true to the be     | st of my knowledge and belief.    |
| (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)  By:                   |                     |                                | Tel No.                           |
| cy.  | (b) (6), (b) (7)    |                                | (b) (6), (b) (7)(C)               |
| (algnature of representative or person making charge)          | Prinvtype na        | me and title or office, if any | Cell No.                          |
| Address:   |                     | Date:                          | Fax No.                           |
| (b) (6), (b) (7)(C)  |                     |                                |                                   |
| (b) (b), (b) (1)(b)  |                     | June 7,2019                    | (b) (6), (b) (7)(C)               |

| UNITED STATES OF AMERICA   |  |                                   | NOT WRITE             | N THIS SPACE                      |
|--|--|-----------------------------------|-----------------------|-----------------------------------|
| NATIONAL LABOR RELATIONS BOARD   |  | Case                              |                       | Date filed                        |
| CHARGE AGAINST LABOR ORGANIZATIO<br>OR ITS AGENTS  |  | 12-CB-243369                      |                       | JUN 14, 2019                      |
| INSTRUCTIONS: File an original of this charge with t   | the NLRB Reg   | gional Director of the re         | gion in which         | the alleged unfair labor practice |
| occurred or is occurring.  1. LABOR ORGANIZATION   | N OD ITS ACE   | NITE ACAIMET WHICH C              | HARCE IS BRO          | COUT                              |
| a. Name  | N OR ITS AGE   | b. Union Repres                   |                       |                                   |
| Unión de Profesionales de la Seguridad Pr  | rivada y el  |                                   |                       |                                   |
| Transporte de Valores  |  |                                   |                       |                                   |
| c. Address<br>PO Box 29146   |  | d. Tel. No.<br>(b) (6), (b) (7)(C | e. Cel                | I No.                             |
| San Juan PR 00929-0146   |  | f. Fax No.                        | g. e-M<br>(b) (       | lail<br>6), (b) (7)(C)            |
| 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 (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. |  |                                   |                       |                                   |
| Basis of the Charge (set forth a clear and concise state   |  |                                   |                       |                                   |
|  |  |                                   |                       |                                   |
| Since about April of 2019, and thereaf   |  |                                   |                       |                                   |
| by failing and refusing to provide the   |  |                                   |                       |                                   |
| by refusing to explain how the amoun   |  |                                   |                       |                                   |
| present options and payment plan to  | pay off th   | e amount of dues                  | that is ow            | ed, as a member and non-          |
| member of the Union; and 4. by refu  |  |                                   |                       |                                   |
| concerns and other representational concerns   |  | · ·                               |                       |                                   |
|  |  |                                   |                       | i                                 |
| Since about April of 2019, the above-  | mantioned  | labor organization                | n hae alen            | threatened employees with         |
| loss of employment for their failure to  | nemionea   | n dues or foos ove                | on though i           | it has failed and refused to      |
|  |  |                                   |                       |                                   |
| provide the aforementioned information   | n and/or n   |                                   |                       |                                   |
| Name of Employer   |  | Tel. No.                          | Tel. No. 4b. Cell No. |                                   |
| The COGAR Group, Ltd   |  | 787-679-4426                      | 3 4d. e               | -Mail                             |
| , о о о о . о  |  | 4c. Fax No.                       | tfigue                | eroa@thecogargroup.com            |
|  |  | 787-998-447                       | 8                     | İ                                 |
| 5. Location of Plant involved (street, city, state, and ZIP code)  6. Employer representative  |  |                                   | entative to con       | tact                              |
| • • • •  |  | Teresa Figue                      |                       | į.                                |
| G3 O'Neill St. Tres Monjitas San Juan, P   | K 00318  | i elesa i igue                    | ioa, contrac          | St Wallagei                       |
|  |  |                                   | 0. 11                 | -CAN-day-and-                     |
| 7. Type of Establishment (factory, mine, wholesaler)   |  | product or service                | 1                     | of Workers employed               |
| Limited Partnership  | Security   | Services                          | 39                    |                                   |
| 10. Full name of party filing charge   |  | 11a. Tel. No.                     | 111                   | o. Cell No.                       |
| (b) (6), (b) (7)(C)  |  |                                   | (b)                   | (6), (b) (7)(C)                   |
|  |  | 11a Fau Na                        | . 44.                 | d e-Mail                          |
|  |  | 11c. Fax No                       |                       |                                   |
|  |  |                                   |                       | ) (6), (b) (7)(C)                 |
| 11. Address of party filing charge (street, city, state, and   | 7IP code\  |                                   |                       |                                   |
|  | en cour)   |                                   |                       |                                   |
| (b) (6), (b) (7)(C)  | 40 DE  | CLARATION                         |                       |                                   |
|  |  |                                   |                       |                                   |
| I declare that I have read the above charge an   | d that the sta   | tements therein are tru           |                       | of my knowledge and belief.       |
| (b) (6) (b) (7)(C)   | (b)  | (6), (b) (7)(C)                   | . (4)                 | No. C S                           |
| (b) (6), (b) (7)(C)  |  | ividual                           | I '                   | me UN R R                         |
| Bv:  |  | mania.                            |                       |                                   |
|  | By:  On making charge  Print/type name and title or office |                                   |                       |                                   |
|  |  | nt/type name and title or         | office, Far           | No. none                          |
|  |  | nt/type name and title or         | office, Fax           | No. none R. F. S.C.               |
|  |  |                                   | office, Fax           |                                   |
|  |  |                                   | office, Fa            | PM<br>PM<br>10091                 |
|  |  | iny)                              |                       | PM 3                              |
| Address:   |  |                                   | e-N                   | PM 3: 1                           |
|  |  | iny)                              | e-N                   | PM 3                              |

FORM NLRB-508

## FORM EXEMPT UNDER 44 U.S.C. 3512

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

# CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

| TOTAL EVENIE               | 1 ONDER 44 0.0.0.0.0012 |  |  |  |  |
|----------------------------|-------------------------|--|--|--|--|
| DO NOT WRITE IN THIS SPACE |                         |  |  |  |  |
| Case                       | Date Filed              |  |  |  |  |
| 12-CB-243508               | 6/18/2019               |  |  |  |  |
|                            |                         |  |  |  |  |

## INSTRUCTIONS:

File an original and 4 copies of this charge and an additional copy for each organization, each local, and each individual named in item 1 with the NLRB Regional Director of the Region in which the alleged unfair labor practice occurred or is occurring.

| 1. LABOR ORGANIZATION  | N OR I          | TS AGENTS AGAINST WHICH   | CHÁR                      | E IS BROUGHT                          |
|--|-----------------|---|---------------------------|---------------------------------------|
| a. Name b. Unior   |                 | b. Union  | representative to contact |                                       |
| APWU, Broward County Area Local 120  | )1              |   |                           | Jeff Riddell                          |
| c. Telephone/Fax No's.   | d. Ad           | dress (street, city, state and ZIP cod  | de)                       |                                       |
| 954/594-2400   |                 | 00 Boulevard of Champior  |                           |                                       |
| e. The above-named organization(s) or its agents has (<br>8(b), subsection(s)(1)(A) of the National Labor Relatio<br>meaning of the Act and within the meaning of the Postal | ons Act         | and these unfair labor practices  |                           |                                       |
| 2. Basis of the Charge (set forth a clear and conc   | ise sta         | tement of the facts constituting  | the alleg                 | ed unfair labor practices)            |
| For the past 6 months, the above nar<br>representatives, breached its duty of fair a<br>grievance in a perfunctory and arbitrary a   | med .<br>repres | Labor Organization, by sentation by (b) (6), (b) (7) or in violation of $\S$ 8(b)(1)( | and th<br>)(C)(b)         | (6), (b) (7)(C) on the job            |
|  |                 |   |                           |                                       |
| 3. Name of Employer  |                 |   |                           | 4, Telephone No.                      |
| United States Postal Service   |                 |   |                           | Unknown                               |
| 5. Location of plant involved (street, city, state and ZIF   | P code)         |   |                           | 6. Employer representative to contact |
| 5500 NW 142 <sup>nd</sup> Street, Opa Locka, Fl., 33   | 3054            |   |                           | Johnny Bankston                       |
| 7. Type of establishment (factory, mine, wholesaler, e   | ≥tc.)           | 8. Identify principal product or se   | ervice                    | 9. Number of workers employed         |
| Processing and distribution facility   |                 | Mail processing and deliv   | very                      | Approx. 600                           |
| 10. Full name of party filing charge (b) (6), (b) (7)(C)   |                 |   |                           |                                       |
| 11. Address of party filing charge (street, city, state an   | nd ZIP c        | ode)  |                           | 12. Telephone/Mobile phone/email      |
| (b) (6), (b) (7)(C)  |                 |   |                           | (b) (6), (b) (7)(C)                   |
| I deplete that I have read the object above  | and the         | (b) (6), (b) (7)(C)   |                           | est of my knowledge and belief.       |
| BySignature  |                 | (b) (6) (b) (7)(C)  |                           | ndividual                             |
| Address  |                 | (b) (6), (b) (7)(C) slephone No.  | 7\(0\                     | Date,                                 |
| (b) (6), (b) (7)(C)  | CAND            | b) (6), (b) (   | 7)(C)                     | WT (1) 6 000E/THE E 48 SECTION (001)  |

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 representation and/or unfair labor practice procesdings 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 decime to invoke its processes.

| UNITED STATES OF AMERICA  | DO NOT WRITE IN THIS SPACE  |  |
|---|---|--|
| NATIONAL LABOR RELATIONS BOARD  | Case  | Date filed   |
| CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS   | 12-CB-243594  | 6-19-19  |
| INSTRUCTIONS: File an original of this charge with the NLRB Regiona occurred or is occurring.   |   |  |
| LABOR ORGANIZATION OR ITS AGENTS  |   |  |
| a. Name<br>International Brotherhood of Teamsters, Local 385  | b. Union Representative<br>Clay Jeffries,<br>President                              | to Contact   |
| c. Address<br>126 N. Kirkman Rd.  | d. Tel. No.<br>(407) 298-7037   | e.e. Celf No.  |
| Orlando, FL 32811-1498  | f. Fax No.  | g. e-Mail<br>cjeffries@local385.org  |
| <ul> <li>h. The above-named labor organization or its agents have engaged in and 8(b), subsection(s) (1)(A) and (2) of the National Labor Relations Act, an within the meaning of the Act, or are unfair practices affecting commerce</li> <li>2. Basis of the Charge (set forth a clear and concise statement of the facts)</li> </ul> | d these unfair labor practices a within the meaning of the Act a                    | re unfair practices affecting commerce and the Postal Reorganization Act.                    |
| Since about (a) (a) (b) (c) (c) (c) (c) (c) (c) (d) (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e  | eation has restrained and<br>esting that, and thereby o<br>other employees referred | coerced employees in the<br>causing, Freeman Decorating<br>I by its hiring half, for reasons |
| 3. Name of Employer   | do Tol No   | Ab Cell No   |

| 3. Name of Employer  |   | 4a. Tel. No.                            | 4b. Cell No.   |  |
|--|---|---|--|--|
| Freeman Decorating Co.   |   | (214) 445-1139                          | :.   |  |
|  |   | 4c. Fax No.                             | 4d. e-Mail   |  |
|  |   |   | stephanie.hart@freemanco.com   |  |
| 5. Location of Plant involved (street, city, state, and ZIP code).   |   | 6. Employer representative to contact   |  |  |
| 1601 Boice Pond Rd, Orlando, FL 32837  |   | Stephanie Hart, VP/Senior Counsel       |  |  |
|  |   | 1600 Viceroy, Ste. 100, Dallas TX 75235 |  |  |
| 7. Type of Establishment (factory, mine, wholesaler)   | 8. Principal produc                         | t or service                            | Number of Workers employed   |  |
| Trade Show Contractor  | Freight                                     |   | 100+   |  |
| 10. Full name of party filing charge   |   |   | 11b. Cell No.  |  |
| (b) (6), (b) (7)(C)  |   | (b) (6), (b) (7)(C)                     | P.   |  |
|  |   | 11c. Fax No.                            | 11d e-Mail   |  |
|  |   | (TOLT BA ) TO.                          | (b) (6), (b) (7)(C)  |  |
| 11. Address of party filing charge (street, city, state, and   | ZIP code)                                   | <u> </u>                                | the state of the s |  |
| (b) (6), (b) (7)(C)  |   |   |  |  |
|  | 12. DECLARA                                 | TION                                    |  |  |
| I declare that I have read the above charge an   | d that the statements                       | therein are true to the bes             | f of my knowledge and belief.  |  |
|  |   |   | Tel No.  |  |
| (b) (6), (b) (7)(C)  | 1   |   |  |  |
| By:  |   |   | 1  |  |
|  | (b) (6), (b)                                | (7)(C), an Individual                   | (b) (6), (b) (7)(C)  |  |
| (signature or representative or person making charge)  | Print/type name and title or office, if any |   | Cell No.   |  |
| The same of the sa |   |   |  |  |
| (b) (6), (b) (7)(C)  |   | Date:                                   | Fax No.  |  |
|  |   | <u>}</u>                                | e-Mail   |  |
|  |   |   | (b) (6), (b) (7)(C)  |  |

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

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<br>12-CB-243692       | Date Filed<br>JUN 21, | 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   | TS AGENTS /                  | AGAINST WHICH CHAR  | GE IS BROU                                   | GHT                            |                       |  |
|--|------------------------------|---|--|--------------------------------|-----------------------|--|
| a. Name  |                              |   | b. Union Representative to contact           |                                |                       |  |
| International Longshoremen's Association, Local 1416   |                              |   | Keneth Riley, International Trustee          |                                |                       |  |
| c. Address (Street, city, state, and ZIP code)   |                              |   | d. Tel. No.<br>305-371-6                     | 781                            | e. Cell No.           |  |
| 816 NW 2nd Ave<br>Miami, FL 33136  |                              |   | f. Fax. No.<br>305-374-7646                  |                                |                       |  |
|  |                              |   | g. e-mail                                    |                                |                       |  |
| <ul> <li>h. The above-named labor organization has engaged in and is eng. (1)(A), (2)</li> <li>practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.</li> <li>2. Basis of the Charge (set forth a clear and concise statement of the concise statement)</li> </ul> | of the Act, or th            | of the Natio  | nal Labor Rei                                | lations Act, a                 | nd these unfair labor |  |
| On or about (b) (6), (b) (7)(C)2019, the Union, by (b) (6), (b) (7)(operations for South Florida Container Terminal based on   | C), removed<br>subjective, a | (b) (6), (b) (7)(C) from rbitrary, and discrimu               |  |                                | for cargo loading     |  |
| 3. Name of Employer  |                              | 4a. Tel. No.  | b. Cell No.                                  |                                | c. Fax No.            |  |
| South Florida Container Terminal   |                              | 305-347-3800  | 305-3  |                                | 305-358-5106          |  |
|  |                              | d. e-mail   |  |                                |                       |  |
| 5. Location of plant involved (street, city, state and ZIP code) 2299 Port Boulevard Miami, FL 33132   |                              | 6. Employer representative to contact Mark J. Baker, Director |  |                                |                       |  |
| 7. Type of establishment (factory, mine, wholesaler, etc.) Shipping container terminal   | 8. Identify p<br>Container   | rincipal product or service                                   | <u>                                     </u> | 9. Number of 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. c. Fax No. (b) (6), (b) (7)(C)   |                                | c. Fax No.            |  |
| (b) (6), (b) (7)(C) d. e-mail (b) (6), (b) (7)(C   |                              |   | )  |                                |                       |  |
| 12. DECLARATION  (b) (6), (b) (7)(C)  Light Library read the above charge and that the statements he best of my knowledge and belief.  (b) (6), (b) (7)(C), an Individual  |                              |   | Cell No.                                     |                                |                       |  |
| charge   |                              |   |  | (b) (6), (b) (7)(C)<br>Fax No. |                       |  |
| Address (b) (6), (b) (7)(C)  |                              | 1_  | e-mail<br>(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   |                        | DO NOT WRITE IN THIS SPACE       |  |  |
|--|------------------------|----------------------------------|--|--|
| NATIONAL LABOR RELATIONS BOAR  | 0                      | Case                             | Date filed                                   |  |
| CHARGE AGAINST LABOR ORGANIZATIO AGENTS  |                        | 12-CB-243997                     | 6-27-19                                      |  |
| INSTRUCTIONS: File an original of this charge with ti  | ne NLRB Regional D     | irector of the region in whi     | ch the alleged unfair labor practice         |  |
| occurred or is occurring,  | OD ITO ACELIES AS      | Albertania ( Outrop io 6         | SOLOUE .                                     |  |
| a, Name  | ORTIS AGENTS AG        | b. Union Representative to       |  |  |
| Teamsters Local 385  |                        |                                  | o Contact                                    |  |
| reamsters Local 385  |                        | Clay Jeffries                    |  |  |
|  |                        | Local President                  |  |  |
| c. Address   |                        | d. Tel. No.                      | e.e. Cell No.                                |  |
| 126 N Kirkman Rd., Orlando, FL 32811   |                        | (407)761-8977                    |  |  |
| 120111111111111111111111111111111111111  |                        | f. Fax No.                       | g. e-Mall                                    |  |
|  |                        |                                  | J  |  |
| The above-named labor organization or its agents have 8(b),(1)(A) of the National Labor Relations Act, and the the Act, or are unfair practices effecting commerce with a class of the Champ (set forth a class and consists state). | ese unfair labor pract | ices are unfair practices affect | iting commerce within the meaning of         |  |
| Basis of the Charge (set forth a clear and concise state     Since about 2019 and continuing to  | deta the chave         | nstructing the aneged untar is   | oor practices)                               |  |
| _  |                        | _                                |  |  |
| employees in the exercise of rights protected  |                        |                                  |  |  |
| made by(b)(6),(b)(7)(C) about the panel decis  | lon for termin         | ation grievance which v          | vas heard in (10,00,00,00) 2019, for         |  |
| arbitrary or discriminatory reasons or in bad  |                        |                                  |  |  |
| arbitrary of discriminatory reasons of in bad  | iaitti.                |                                  |  |  |
|  |                        |                                  |  |  |
|  |                        |                                  |  |  |
| 3. Name of Employer  |                        | 4a. Tel. No.                     | 4b. Cell No                                  |  |
| Budget Rent A Car  |                        |                                  | <u>                                     </u> |  |
| _  |                        | 4c. Fax No.                      | Ad. e-Mall                                   |  |
|  |                        |                                  |  |  |
| 5. Location of Plant Involved (street, city, state, and ZIP of   | ode)                   | 6. Employer representative       | e to contact                                 |  |
| 8600 Hanger Blvd, Orlando, FL 32827  |                        | Brad Scott District Manager      |  |  |
| 7. Type of Establishment (factory, mine, wholesaler)   | 8. Principal produc    |                                  | 9. Number of Workers employed                |  |
| Car Rental   | Rental of veh          |                                  | 200+   |  |
| 10. Full name of party filing charge   | 1 101101 01 4011       | 11a. Tel. No.                    | 11b. Cell No.                                |  |
| (b) (6), (b) (7)(C)  |                        |                                  | (b) (6), (b) (7)(C)                          |  |
|  |                        |                                  |  |  |
|  |                        | 11c. Fax No.                     | 11d e-Mail                                   |  |
|  |                        | I                                | (b) (6), (b) (7)(C)                          |  |
|  |                        |                                  |  |  |
| 11. Address of party filling charge (street, city, state, and 2  | IIP code)              |                                  | -  |  |
| 11. Address of party filling charge (street, city, state, and ZIP code) (b) (6), (b) (7)(C)  |                        |                                  |  |  |
|  |                        |                                  |  |  |
| 12. DECLARATION  |                        |                                  |  |  |
| I dealess that I have an although an art areas   |                        |                                  | st of my knowledge and holled                |  |
| I declare that I have read the above charge and  | that the statement     | e merenti ala tine to tue per    | Tel No.                                      |  |
| (b) (6), (b) (7)(C)  |                        |                                  | 10.110,                                      |  |
|  |                        |                                  |  |  |
| By: 🐰  | (b) (6), (b) (7        | (C)                              | 1  |  |
|  |                        |                                  | Cell No.                                     |  |
| (signature of representative or person making charge)  | Printype na            | ame and title or office, if any  | (b) (6), (b) (7)(C)                          |  |
|  |                        | I Date:                          |  |  |
| (b) (6), (b) (7)(C)  |                        | Date:                            | Fax No.                                      |  |
| (b) (b), (b) (1)(c)  |                        | × 1 - 1 -                        |  |  |
|  |                        | W 6/25/19                        | e-Mall                                       |  |
|  |                        | ) ' '                            | (b) (6), (b) (7)(C)                          |  |
| 4  |                        | 1                                |  |  |

| UNITED STATES OF AMERICA   | DO NOT WRITE IN THIS SPACE   |                                     |  |  |
|--|------------------------------|-------------------------------------|--|--|
| NATIONAL LABOR RELATIONS BOARD   | Case                         | Date filed                          |  |  |
| CHARGE AGAINST LABOR ORGANIZATION OR ITS   | 12-CB-244173                 | JUN 28, 2019                        |  |  |
| AGENTS   |                              |                                     |  |  |
| INSTRUCTIONS: File an original of this charge with the NLRB Regional D   | rector of the region in whic | h the alleged unfair labor practice |  |  |
| occurred or is occurring.  1. LABOR ORGANIZATION OR ITS AGENTS AG | INST WHICH CHARGE IS BR      | OUGHT                               |  |  |
| a. Name  | b. Union Representative to   |                                     |  |  |
| Union de Empleados de Muelles, Local 1740 (UTM), ILA   | Victor Aponte                |                                     |  |  |
| ,  |                              |                                     |  |  |
| AFL-CIO  | Vice-president               |                                     |  |  |
| c. Address   | d. Tel. No.                  | e.e. Cell No.                       |  |  |
| PO BOX 388048, San Juan, PR 00936-6048   | (787)724-3600                |                                     |  |  |
|  | f. Fax No.                   | g e-Mail                            |  |  |
|  | (787)723-4494                |                                     |  |  |
| 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)  |                              |                                     |  |  |
| Since 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 failing to represent SSA San Juan Inc. employee  |                              |                                     |  |  |
| (b) (6), (b) (7)(C) regarding (0)(6). 30-day suspension from work on TOTE ships, for arbitrary or discriminatory reasons or  |                              |                                     |  |  |
| in bad faith.  |                              |                                     |  |  |
| 1  |                              |                                     |  |  |
| 3. Name of Employer  | 4a. Tel. No.                 | 4b. Cell No.                        |  |  |

| 3. Name of Employer   |                                   | 4a. Tel. No.                       | 4b. Cell No.                         |
|---|-----------------------------------|------------------------------------|--------------------------------------|
| SSA San Juan, Inc.  |                                   | 4c. Fax No.                        | 4d. e-Mail                           |
| 5. Location of Plant involved (street, city, state, and ZIP code)       |                                   | Employer representative to contact |                                      |
| PO BOX 16758, San Juan, PR 00908  |                                   | Ricardo Alvarado, General Manager  |                                      |
| 7. Type of Establishment (factory, mine, wholesaler)                    | Principal product or service      |                                    | Number of Workers employed           |
| Corporation   | Stevedoring Services              |                                    | 100                                  |
| 10. Full name of party filing charge (b) (6), (b) (7)(C), an Individual |                                   | 11a. Tel. No.                      | 11b. Cell No.<br>(b) (6), (b) (7)(C) |
|   |                                   | 11c. Fax No.                       | 11d e-Mail<br>(b) (6), (b) (7)(C)    |
| 11. 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 bes        |                                      |
|   |                                   |                                    | Tel No.                              |
| (b) (6), (b) (7)(C)   |                                   |                                    |                                      |
| Ву:   | (b) (6), (b) (7)(C) An individual |                                    |                                      |
| Print/type name and title or office, if any                             |                                   | Ceil No.<br>(b) (6), (b) (7)(C)    |                                      |
| Address: Date: 6/28/19  |                                   |                                    | Fax No.                              |
| Address:<br>(b) (6), (b) (7)(C)   |                                   |                                    |                                      |
|   |                                   |                                    | e-Mail<br>(b) (6), (b) (7)(C)        |

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2019 JUN 28 PM 4: 30 AN JUAN, PR 00918-1720

> BECTON ST NEB RECEINED