UNITED STATES OF AMERICA		DO NOT W	RITE IN THIS SPACE	
NATIONAL LABOR RELATIONS BOARD		Case	Date filed	
CHARGE AGAINST LABOR ORGANIZATIO		05-CB-226752	9/4/18	
INSTRUCTIONS: File an original of this charge with the NLRB Regional Director of the region in which the alleged unfair labor practice				
occurred or is occurring. 1. LABOR ORGANIZATION	OR ITS AGENTS AGA	INST WHICH CHARGE IS BR	OUGHT	
a. Name		b. Union Representative to		
Insulators Local Union No. 24 of the Inte	ernational	Lino Cressotti, Bu	siness Manager	
Association of Heat and Frost Insulators	and Allied			
Workers				
c. Address		d. Tel. No.	e. Cell No.	
901 Montgomery St.		(301) 725-2400	i	
Laurel, MD 20707		f. Fax No.	g. e-Mail	
		(301) 725-0804		
h. The above-named labor organization or its agents hav 8(b)(1)(A) of the National Labor Relations Act, and the	se unfair labor practic	es are unfair practices affecti	ng commerce within the meaning of	
the Act, or are unfair practices affecting commerce with 2. Basis of the Charge (set forth a clear and concise state				
		g g v u u uu luu		
Within the last six months, the above-nar	med Jahor organi	ization has restrained	and coerced employees in	
the exercise of rights protected by Section				
7	ii / of the Act by	operating a mining in	all ill a mainici mat was	
arbitrary, discriminatory or in bad faith.				
O Name of Familian		4a. Tel. No.	4b. Cell No.	
3. Name of Employer		(225) 412-6435	40. Cell No.	
Allied Power Services, LLC		4c. Fax No.	4d. e-Mail	
•		40. Fax No.	4d. e-Iviali	
5. Location of Plant involved (street, city, state, and ZIP c	ode)	6. Employer representative	to contact	
400 Convention Street, Ste. 320	,	Unknown		
· · · · · · · · · · · · · · · · · · ·		Clikilowii		
Baton Rouge, LA 20802				
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	Number of Workers employed	
Nuclear Power Plant	Electricity		100+	
10. Full name of party filing charge	Biccinory	11a. Tel. No.	11b. Cell No.	
(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	
		11c. Fax No.	11d e-Mail (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 best	of my knowledge and belief.	
1 decide that I have read the above ondings and	The Statements	thoron are true to the boot	Tel No.	
	(b) (6), (b) (7)(C)		
By: (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)		(b) (6), (b) (7)(C)	
(nigneture of pareceptative or parecep making charge)	Print/type nan	ne and title or office, if any	Cell No.	
(b) (6), (b) (7)(C) making charge)	(b) (6), (b)	(7)(C)	(b) (6), (b) (7)(C)	
Address: (b) (6), (b) (7)(C)		Date:	Fax No.	
		9/4/2018	e-Mail (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			Date med
AGENTS		05-CB-226864	09/06/2018
INSTRUCTIONS: File an original of this charge with the	ne NLRB Regional Di	rector of the region in which	
occurred or is occurring.		_	
	OR ITS AGENTS AGA	INST WHICH CHARGE IS BR	
a. Name		b. Union Representative to	Contact
Unite Here Local 25		Malast Bastonista	Haira Barrana Ariina
		ivieboi Boatwright,	Union Representative
c. Address		d. Tel. No.	e.e. Cell No.
1775 K St NW, Ste 620		202-737-2225	
Washington, DC 20006-1530		f. Fax No.	g. e-Mail
h. The above-named labor organization or its agents hav			
8(b), subsection(s) (1)(A) of the National Labor Relation the meaning of the Act, or are unfair practices affecting			
Basis of the Charge (set forth a clear and concise state			
In the past six months, the above-named lat			-
of rights protected by Section 7 of the Act by	-		· _ •
regarding discharge for arbitrary or discri		_	
	,		
Name of Employer		4a. Tel. No.	4b. Cell No.
Omni Shoreham Hotel		202-756-5154	
		4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP code)		Employer representative	
2500 Calvert St, NW		Mark T. Roche-Ga	rland, General Manager
Washington, DC 20008			
Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	Number of Workers employed
Hotel	Lodging		500
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No.
(b) (6), (b) (7)(C)			(b) (6), (b) (7)(C)
		11c. Fax No.	11d e-Mail
			(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state, and Z	IP code)		(CAC)ACACACA
(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 hest	of my knowledge and belief
(b) (6), (b) (7)(C)	that the statements	therein are true to the besi	Tel No.
By:			
by.	(b) (6), (b) (7	(C), an Individual	
(signature of representative or person making charge)		ne and title or office, if any	Cell No.
		•	(b) (6), (b) (7)(C)
Address:		Date:	Fax No.
(b) (6), (b) (7)(C)		9/6/2018	
			e-Mail
			(b) (6), (b) (7)(C)

OR ITS AGENTS

FORM NLRB-508 UNITED STATES OF AMERICA (2-08) NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST LABOR ORGANIZATION

	FORM EXEMPT UNDER 44 U.S.C 3512			
DO NOT WRITE IN THIS SPACE				
Case	Date Filed			
5-CB-227065	9-7-18			

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

5. Location of plant involved (street, city, state and ZIP code) 900 23rd St NW DC Washington 20037-2342 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare 10. Full name of party filing charge 11a. Tel. No. 15 (6) (6) (7) (C) 11a. Tel. No. 15 (6) (6) (7) (C) 11b. Address of party filing charge (street, city, state and ZIP code.) 11 Address of party filing charge (street, city, state and ZIP code.) 12. DECLARATION 13. Geclare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. 15 Steven Mark Bernstein 16. Employer representative to contact Eric McGee Title: Assistant Director, Human Resource 9. Number of workers employed 2500 11a. Tel. No. (b) (6), (b) (7)(C) 11a. Tel. No. (b) (6), (b) (7)(C) 11b. (c) Fax No. (b) (6), (b) (7)(C) 11c. Tel. No. (c) (6), (b) (7)(C) 11c. Tel. No. (d) (e) (e) (e) (e) (e) (e) (e) (e) (e) (e	INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	intair labor pra	ictice occurre	ed or is occurring.
Title: C. Address (Street, city, state, and ZIP code) G. Tel. No. (443) 493-2099 G. Hall No. (445) 2059-9188 (1 Fax No. 9 e-Mail yelmes barning (198 org yelmes) And 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)). 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. 2 Basis of the Charge (set forth a clear and concise statement of the facts constituting the elleged unfair labor practices) See additional page 3. Name of Employer George Washington University Hospital 6. Employer representative to contact Enric McGee File: McGee File: McGee File: Assistant Director, Human Resource Title: Assistant Director, Human Resource File: Assistant Director, Human Resource Title: Assistant Director, Human Resource Title: Assistant Director, Human Resource File: Assistant Director, Human Resource Title: No. (613) 769-7513 Cell No. Title: No. (613) 769-7513 Cell No. Title: No. T	LABOR ORGANIZATION OR ITS	S AGENTS AGAINST WHICH	CHARGE IS	BROUGHT	
611 N. Eutaw MD Baltimore 21201			Yahnae B	•	to contact
611 N. Eutaw MD Baltimore 21201	c. Address (Street, city, state, and ZIP code)			099	
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 and the Postal Reorganization Act. 2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) See additional page 3. Name of Employer George Washington University Hospital 5. Location of plant involved (street, city, state and ZIP code) 900 237 55 NW CO20) 715-4402 6. Employer representative to contact Enc (McGee) 900 237 55 NW CO20 715-400 6. Employer representative to contact Enc (McGee) 900 237 55 NW Tipe of establishment (factory, mine, wholesaler, etc.) 8. Identify principal product or service Patient Care 10. Full name of party filing charge 11a. Tel. No. (3) (5) (6) (7) (5) (5) (6) (7) (5) (6) (6) (7) (7) (7) (8) (8) 7513 Cell No. (813) 769-7513 Cell No. (813) 769-7513					g. e-Mail
See additional page 3. Name of Employer George Washington University Hospital 5. Location of plant involved (street, city, state and ZIP code) 900 23rd St NW 900 24rd St NW 900 25rd St NW 900 26rd St NW 900 27rd St NW 900 27r	subsection(s) (list subsections) (3) are unfair practices affecting commerce within the meaning of the A				
3. Name of Employer George Washington University Hospital George Washington University Hospital 5. Location of plant involved (street, city, state and ZIP code) 900 23rd St NW DC Washington 20037-2342 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare Patient Care Patient Care 8. Identify principal product or service Patient Care Patient Care 11a. Tel. No. (b) (Six (b) (7)(G) (c) (Six (b) (7)(G) (d) (b) (5) (b) (7)(G) (d) (b) (5) (b) (7)(G) (eorge Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) (b) (Six (b) (7)(G) (c) (G) (b) (7)(G) (d) (d) (b) (7)(G) (d)	2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor	practices)	
George Washington University Hospital (202) 715-4618 (312) 925-1469 c. Fax No. (202) 715-4402 5. Location of plant involved (street, city, state and ZIP code) 900 23rd St NW DC Washington 20037-2342 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare 8. Identify principal product or service Patient Care 9. Number of workers employed 2500 10. Full name of party filing charge 11a. Tel. No. (b) (6), (b) (7)(c) 15 (6), (b) (7)(c) 16 (6), (b) (7)(c) 17 (8) (6), (b) (7)(c) 18 (6) (6), (b) (7)(c) 19 (7) (6), (b) (7)(c) 10 (6), (b) (7)(c) 11 (6) (6), (b) (7)(c) 12. DECLARATION By Steven Mark Bernstein 15 (202) 715-4618 (312) 925-1469 d. e-Mail (c) Fax No. (b) (6), (b) (7)(c) 16 (813) 769-7513 Cell No. (B13) 769-7513	See additional page			•	•
George Washington University Hospital (202) 715-4618 (312) 925-1469 c. Fax No. (202) 715-4402 for McGee@gwu-hospital.com 5. Location of plant involved (street, city, state and ZIP code) 900 23rd St NW DC Washington 20037-2342 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare 10. Full name of party filing charge (312) 925-1469 6. Employer representative to contact Eric McGee Title: Assistant Director, Human Resource 9. Number of workers employed 2500 11a. Tel. No. (b) (6), (b) (7)(c) 11a. Tel. No. (b) (6), (b) (7)(c) 11b. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(c) 12. DECLARATION 13. Steven Mark Bernstein 14. Steven Mark Bernstein 15. Location of d. e-Mail (B) (813) 769-7513 Cell No. (813) 769-7513	3. Name of Employer	 ,	4a. Tel. No.		b. Cell No.
c. Fax No. (202) 715-4402 5. Location of plant involved (street, city, state and ZIP code) 900 23rd St NW DC Washington 20037-2342 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare 10. Full name of party filing charge (b)(5)(5)(7)(C) George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) (b) (c), (b) (7)(C) 12. DECLARATION 14 declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein 15. Location of plant involved (street, city, state and ZIP code) 6. Employer representative to contact Eric McGee Title: Assistant Director, Human Resource 9. Number of workers employed 2500 11a. Tel. No. (b) (6), (b) (7)(C) (c) (c), (b) (7)(C) (c) (c), (c), (d) (d), (d),			(202) 715-46	518	(312) 925-1469
Eric McGee Title: Assistant Director, Human Resource 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare 10. Full name of party filing charge 11a. Tel. No. (b) (6), (b) (7)(C) George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein Eric McGee Title: Assistant Director, Human Resource 9. Number of workers employed 9. Number of workers employed 11a. Tel. No. (b) (6), (b) (7)(C) C. Fax No. (b) (6), (b) (7)(C) Tel. No. (813) 769-7513 Cell No. (813) 769-7513	-			.02	d. e-Mail Eric.Mcgee@gwu-hospital.com
Eric McGee Title: Assistant Director, Human Resource 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare 10. Full name of party filing charge 11a. Tel. No. (b) (6), (b) (7)(C) George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein Eric McGee Title: Assistant Director, Human Resource 9. Number of workers employed 9. Number of workers employed 11a. Tel. No. (b) (6), (b) (7)(C) C. Fax No. (b) (6), (b) (7)(C) Tel. No. (813) 769-7513 Cell No. (813) 769-7513	5. Location of plant involved (street city state and ZIP code)			6 Employ	er representative to contact
Title: Assistant Director, Human Resource 7. Type of establishment (factory, mine, wholesaler, etc.) Healthcare 10. Full name of party filing charge 11a. Tel. No. (b) (6), (b) (7)(c) George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein Tel. No. (B) (6), (b) (7)(C) Tel. No. (B13) 769-7513 Cell No. (B13) 769-7513					
Healthcare 10. Full name of party filing charge (b) (6), (b) (7)(C) George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein Patient Care 2500 b. Cell No. (b) (6), (b) (7)(C) C. Fax No. (b) (6), (b) (7)(C) Tel. No. (813) 769-7513 Cell No. Cell No.				Title: Assis	stant Director, Human Resources
10. Full name of party filing charge (b) (6), (b) (7)(c) George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(c) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein 11a. Tel. No. (b) (6), (b) (7)(c) (c) Fax No. (b) (6), (b) (7)(c) (c) Fax No. (b) (6), (b) (7)(c) Tel. No. (813) 769-7513 Cell No.	7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Number	r of workers employed
(b) (6), (b) (7)(C) George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) (c) Fax No. (b) (6), (b) (7)(C) (d) e-Mail (b) (6), (b) (7)(C) (e) (6), (b) (7)(C) (f) (6), (f) (7)(C) (f) (6), (f) (7)(C) (f) (6), (f) (7)(C) (f) (7) (7)(C) (f) (7)	Healthcare	Patient Care		2500	
George Washington University Hospital 11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein C. Fax No. (b) (6), (b) (7)(C) Tel. No. (813) 769-7513 Cell No.	10. Full name of party filing charge				
11. Address of party filing charge (street, city, state and ZIP code.) (b) (6), (b) (7)(C) 12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein Steven Mark Bernstein (b) (6), (b) (7)(C) Tel. No. (813) 769-7513 Cell No.			-	(C)	d. e-Mail
12. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein Steven Mark Bernstein Tel. No. (813) 769-7513 Cell No.			(b) (6), (b) (7)	(C)	(b) (6), (b) (7)(C) @gwu-hospital.com
I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. Steven Mark Bernstein Steven Mark Bernstein Cell No.			,		
DY		the best of my knowledge and belie			9-7513
	DY				7 2004
(signature of representative or person making charge) (Print/type name and title or office, if any) Title: Partner Fax No.	(signature of representative or person making charge) (Print/type			No.	
(813) 763-7501	101 E Kannady Blind Sta 2250	rue. Faithe			9-7501
Address 101 E Kennedy Blvd Ste 2350 Tampa FL 33602-5136 (date) 09/7/2018 16:33:57 sbernstein@fisherphillips.com	Tampa FL 33602-5136	(date) 09/7/2018	1		ein@fisherphillips.com

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 W	RITE IN THIS SPACE
NATIONAL LABOR RELATIONS BOARD		Case	Date filed
CHARGE AGAINST LABOR ORGANIZATION	N OR ITS	05-CB-227188	9/10/18
AGENTS INSTRUCTIONS: File an original of this charge with the	e NI RR Regional D	1	· · · · · · · · · · · · · · · · · · ·
occurred or is occurring.	ie NERD Regional D	rector of the region in which	in the aneged diffall labor practice
——————————————————————————————————————	OR ITS AGENTS AG	AINST WHICH CHARGE IS BR	
a. Name UNITE HERE Local 25		b. Union Representative to John Boardman	· · · · · · · · · · · · · · · · · · ·
ONTE TENE LOCAL 25		President	tephanie Steek
<u> </u>		1	
c. Address		d. Tel. No.	(b) (6), (b) (7)(C)
901 K Street NW, Washington, DC 20001		(202)727-2225 f. Fax No.	g. e-Iviail NoW
		1. 1 4% 110.	local25@johnboardman.c
			om
h. The above-named labor organization or its agents have			
8(b), subsection(s) (1)(A) of the National Labor Relation the meaning of the Act, or are unfair practices affecting			
Basis of the Charge (set forth a clear and concise state)			
Within the last six months, the above-named		,	
exercise of rights protected by Section 7 of the	•	· ·	
J,		<u> </u>	i
(1) Since notifying the Union of (b)(6) (decire to	hoopmo'n Pook	objector ompleyed	(b) (7)(C) has ressived as
(1) Since notifying the Union of Good desire to		, , , , , , , , , , , , , , , , , , , ,	
financial disclosures from the Union or a	•	in violation of the Union	's obligations under
Communications Workers v. Beck, 487 L	J.S. 735 (1988);		
(2) Despite submitting written request to			
objection period, the Union has informed em	ployee (b) (6), (b) (7)(c)	that it shall continue to	deduct full union dues from
paycheck.			
Name of Employer	•	4a. Tel. No. = 2200	4b. Cell No.
Gaylord National Resort and Convention Cer	nter	301 9 65 2000 4c. Fax No.	4d. e-Mail
		(301)965-2299	4d. e-iviali
5. Location of Plant involved (street, city, state, and ZIP co	ode)	6. Employer representative	to contact
201 Waterfront St, Oxon Hill, MD 20745-113		1 1 1	ector of Human Resources
7. Type of Establishment (factory, mine, wholesaler)	8. Principal produc		9. Number of Workers employed
Hotel and convention center	Events/lodgin	a .	4000
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No.
(b) (6), (b) (7)(C)			(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)		11c. Fax No.	11d e-Mail
		<u> </u>	(b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state, and Z	IP code)		<u> </u>
(b) (6), (b) (7)(C)			
	12. DECLARAT	TION	
(b) (6), (b) (7)(C)	that the statements	therein are true to the best	of my knowledge and belief.
	1		lei No.
В	(b) (6), (b) (7)(C)	individual	1
(9		me and title or office, if any	Cell No.
	1 13,700,700		(b) (6), (b) (7)(C)
Address:		Date:	Fax No.
(b) (6), (b) (7)(C)	6	Pi _	
F # 1 ₹ 1 %	.50	8318	e-Mail

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

UNITED STATES OF AMERICA	DO NOT WRITE IN THIS		RITE IN THIS SPACE	
NATIONAL LABOR RELATIONS BOAR		Case	Date filed	
CHARGE AGAINST LABOR ORGANIZATIO	N OR ITS	05-CB-227201	9/10/18	
INSTRUCTIONS: File an original of this charge with the	e NI RB Regional Di	rector of the region in whic	h the alleged unfair labor practice	
occurred or is occurring.	io viene inegional o	rector of the region in thin	and another services	
	OR ITS AGENTS AGA	INST WHICH CHARGE IS BR		
a. Name		b. Union Representative to	Contact	
LIUNA Local 572		Kenneth Doggette	•	
		Union Representativ		
c. Address		d. Tel. No.	^e (b) (6), (b) (7)(C)	
3101 American Legion Rd, Ste 20A, Chesap	eake, VA	(757)483-1002	<u> </u>	
23321-5658	!	f. Fax No.	g. e-Mail	
			kdoggette@bwldc.org	
h. The above-named labor organization or its agents hav 8(b), subsection(s) (1)(A) of the National Labor Relation the meaning of the Act, or are unfair practices affecting	ns Act, and these unfa	air labor practices are unfair p	ractices affecting commerce within	
2. Basis of the Charge (set forth a clear and concise state				
Since about (b) (c), (b) (7)(c) 2018, the above-name				
eversise of rights protected by Section 7 of the	he Act by failing to	represent (b) (6), (b) (7	(C) regarding a discipline for	
exercise of rights protected by Section 7 of the Act by failing to represent (b) (6), (b) (7)(C) regarding a discipline fo			regarding a discipline lo	
arbitrary or discriminatory reasons or in bad faith.				
	····		[45, 6-11]	
3. Name of Employer		4a. Tel. No.	4b. Cell No.	
SCSII		(202)391-1288	(202)391-1288	
		4c. Fax No.	4d. e-Mail	
6 1 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6 - 6		(202)562-9202	bhall@scsajv.com	
5. Location of Plant involved (street, city, state, and ZIP c	oae)	6. Employer representative to contact		
PO Box 8127, Washington, DC 20032-8127		Billy Hall Regional Manager		
7. Type of Establishment (factory, mine, wholesaler)	Principal product or service		Number of Workers employed	
Ground Maintenance and Landscaping	Landscaping Se	rvices	25	
Provider	' '			
10. Full name of party filing charge		11a. Tel. No.	11b. Celi No.	
(b) (6), (b) (7)(C)			(b) (6), (b) (7)(C)	
		11c. Fax No.	11d e-Mail	

12. DECLARATION

I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief.

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

Printitype name and title or office, if any

09-10-18

Tel No.

Cell No.

Fax No.

e-Mail

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

11. Address of party filing charge (street, city, state, and ZIP code)

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

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

Address: (b) (6), (b) (7)(C)

By:

(signature of

FORM EXEMPT LINDER 44 LLS C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TOTAL EXEMIT TOTAL EX 44 0.0.0 0012
DO NOT WRIT	E IN THIS SPACE
Case	Date Filed
05-CB-227313	9/11/18

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	ıntaır labo	r prac	tice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	S AGENTS AGAINST WHICH				
a. Name		b. Union	Rep	resentative	to contact
United Government Security Officers of America, Local 44		Mike	LeBla	inc	
		Title:	DHS	Vice Presid	ent
c. Address (Street, city, state, and ZIP code)		d. Tel. 1		20	e. Cell No. (b) (6), (b) (7)(C)
2879 Cranberry Hwy		(774) 67 f. Fax N		30	g. e-Mail
MA East Wareham 02538-1327		(774) 67		58	MLeBlanc@ugsoa.com
h. The above-named organization(s) or its agents has (have) engaged subsection(s) (list subsections) (3) are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labo	r Rela	ations Act, a	and these unfair labor practices
Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair la	bor p	ractices)	
	3 3		•	,	
See additional page					
3. Name of Employer		4a. Tel. (571) 32		ne	b. Cell No.
Paragon Systems Inc		c. Fax N		00	d. e-Mail
					smartinez@parasys.com
5. Location of plant involved (street, city, state and ZIP code)				Employ Sylvia J N	er representative to contact
13655 Dulles Technology Dr Ste 100 VA Hemdon 20171-4634				_	or Relations Manager
7. Type of establishment (factory, mine, wholesaler, etc.)	9 Identify principal product	or convio	,		
	Identify principal product Dravida physical accurity in				r of workers employed
Security Systems & Services	Provide physical security in			50	h Call No
10. Full name of party filing charge		11a. Te (571) 32		าย	b. Cell No. (202) 515-1355
Sylvia J Martinez		c. Fax N		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	d. e-Mail
Paragon Systems Inc					smartinez@parasys.com
11. Address of party filing charge (street, city, state and ZIP code.) 13655 Dulles Technology Dr Ste 100					
VA Herndon 20171-4634					
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	ef.	Tel.	No. (571) 32	21-0908
Sylvia J. Martinez Sylvia J. Martinez Cell No					
By Sylvia J Martinez		[Cell		E 4255
Бу	Sylvia J Martinez name and title or office, if any			(202) 51	5-1355
(signature of representative or person making charge) (Print/type	Sylvia J Martinez		Fax	(202) 51 No.	5-1355
Бу	Sylvia J Martinez name and title or office, if any	anager		(202) 51 No. ail	5-1355 ez@parasys.com

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

Basis of the Charge

8(b)(3)

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

FORM EXEMPT LINDER 44 LLS C 3512

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST LABOR ORGANIZATION OR ITS AGENTS

	TORM EXEMIT FORDER 44 0.0.0 3312			
DO NOT WRITE IN THIS SPACE				
	Date Filed			
5-CB-227473	9/17/18			

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	nfair labor p	oracti	ce occurre	d or is occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE	IS BF	ROUGHT	
Name International Union, Security Police & Fire Professionals of America State	PFPA	Joseph	McC	•	o contact n 4 - SPFPA Executive Board Member
c. Address (Street, city, state, and ZIP code)		d. Tel. No).		e. Cell No.
25510 Kelly Rd		(800) 228	-749	2	(b) (6), (b) (7)(C)
MI Roseville 48066-4994		f. Fax No.			g. e-Mail
		(586) 772-	-9644	1	jmccray@spfpa.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 Act and the Postal Reorganization Act.	of the Natio	onal Labor I	Relat	ions Act, a	nd 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 labo	or pra	actices)	
See additional page					
Name of Employer		4a. Tel. N	lo.	Τ	b. Cell No.
Catholic University of America		(202) 319		4	
		c. Fax No).		d. e-Mail
					evansy@cua.edu
5. Location of plant involved (street, city, state and ZIP code)			•		er representative to contact
620 Michigan Ave NE DC Washington 20064-0001				Yvonne Ev	vans ager, Employee Relations
7. Type of establishment (factory, mine, wholesaler, etc.)	Identify principal product	or service	+		r of workers employed
Schools	University	0. 00. 1.00		30	
Full name of party filing charge		11a. Tel. l	No.	1	b. Cell No.
Steve Maritas		(202) 595-			(202) 486-8558
Law Enforcement Officers Security Unions LEOSU-DC, LEOS-PBA		c. Fax No			d. e-Mail
11. Address of party filing charge (street, city, state and ZIP code.)		(202) 595-	-3510)	LEOSUDC@GMAIL.COM
(202) 595-3510 DC Washington DC 20004-					
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		el. N	o. (202) 59	5-3510
Steve Maritas	Steve Maritas	C	Cell N		
(signature of representative or person making charge) (Print/type			ax N	(202) 48	6-8558
(202) FOE 2540	Title: Organizing Dire	Clor		(202) 59	5-3510
(202) 595-3510 Washington DC DC 20004	(date)_09/16/201:		e-Mai		DC@GMAIL.COM

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 BOARD)	Case	Date filed		
CHARGE AGAINST LABOR ORGANIZATION AGENTS	N OR ITS	5-CB-227515	9/18/18		
INSTRUCTIONS: File an original of this charge with the	e NLRB Regional Di	rector of the region in which	h the alleged unfair labor practice		
occurred or is occurring.	OD ITS ASSETS ASA	INOT WILLIAM TO LA POE IC PD	OLIOLIT.		
a. Name	OR 115 AGENTS AGA	NINST WHICH CHARGE IS BR b. Union Representative to			
United Food and Commercial Workers Union	n, Local 400,	Alan Hanson	Contact		
CLC		Director of Mobilizat	tion		
		Director of Mobilizar			
c. Address		d. Tel. No.	e.e. Cell No.		
8400 Corporate Drive #200, Landover, MD 2	0785	(301) 459-3400			
		f. Fax No.	g. e-Mail		
		(301) 459-2780	<u>. </u>		
 The above-named labor organization or its agents have 8(b), subsection(s) (1)(A) of the National Labor Relation 					
the meaning of the Act, or are unfair practices affecting					
2. Basis of the Charge (set forth a clear and concise state					
Since about (b) (6), (b) (7)(c), 2018, the above-name					
exercise of rights protected by Section 7 of the					
(b) (6), (b) (7)(c) regarding (b) (6), discharge for arbitration	ary or discriminate	ory reasons or in bad fa	aith.		
Name of Employer		4a. Tel. No.	4b. Cell No.		
Safeway, Inc.		(202) 337-5649			
		4c. Fax No.	4d. e-Mail		
5. Location of Plant involved (street, city, state, and ZIP code)		6. Employer representative			
4865 MacArthur Blvd, NW Washington, DC 20007		Lucy Madert, HR N	Lucy Madert, HR Manager		
7. Type of Establishment (factory, mine, wholesaler)	8. Principal product	or service	Number of Workers employed		
Grocery Store	Groceries		60		
10. Full name of party filing charge		11a. Tel. No.	11b. Cell No.		
(b) (6), (b) (7)(C)		(b) (6), (b) (7)	(b) (6), (b) (7)		
		11c. Fax No.	11d e-Mail		
		TIC. PAX NO.	(b) (6), (b) (7)(C)		
			(b) (b), (b) (1)(c)		
11. Address of party filing charge (street, city, state, and Z	IP code)				
,,,,,,	,				
	12. DECLARAT	TION			
I declare that I have read the above charge and	that the statements	therein are true to the hest	of my knowledge and belief		
1 declare that I have read the above charge and	that the statements	therein are true to the best	Tel No.		
(b) (6), (b) (7)(C)	(b) (6), (b)	(7)(C)	10		
D. C.	an Individu				
By:			(b) (6), (b) (7) 3		
(sig		me and title or office, if any	Cell No.		
			(b) (6), (b) (7)		
Address:		Date: 9/18/18	Fax No.		
(b) (6), (b) (7)(C)					
	1		e-Mail		
			(b) (6), (b) (7)(C)		

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

DO NOT WRITE IN THIS SPACE			
Case 05-CB-227706	Date Filed 9/20/18		

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

1. LABOR ORGANIZATION OR IT	S AGENTS A	AGAINST WHICH CHARG	GE IS BRO	UGHT	
a. Name Service Employees International Union (SEIU) 32BJ			b. Union F	Representative (7)(C)	to contact
c. Address (Street, city, state, and ZIP code) 1025 Vermont Avenue, NW 7th Floor			d. Tel. No (b) (6), (b) f. Fax. No	(7)(C)	e. Cell No. (b) (6), (b) (7)(C)
Washington, DC 20005			g. e-mail	a@seiu32bj	.org
h. The above-named labor organization has engaged in and is engated (list subsections) (6) practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.		of the Natio	nal Labor R	Relations Act, a	and these unfair labor
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) Despite the termination of the CBA between the parties and the expiration of any and all time limits concerning demands for arbitration, the Union continues to make demands and elicit the services of arbitrators specifically selected by the Union in order to force the employer to pay monies to those arbitrators unnecessarily. The arbitrators have found grievances untimely but have still required payment of extensive fees for such interpretation. The Union has a history of forcing or compelling members to file grievances against the employer where such employees have indicated that they did not desire to pursue grievances. The Union has filed grievances on behalf of employees who were not employed by the employer and covered under a different collective bargaining agreement.					
3. Name of Employer Preeminent Protective Services, Inc.		4a. Tel. No. 202.204.0408	b. Cell No 202-439-		c. Fax No. 202.618.6290
5. Location of plant involved (street, city, state and ZIP code) 1150 18th St. NW, Suite 450 Washington, DC 20036		lena@ppssvc.com	Eden Bro	er representation Gaines aines, LLC 5040	ive to contact
7. Type of establishment (factory, mine, wholesaler, etc.) Services	8. Identify p Security	rincipal product or service	<u> </u>	9. Number of 100+	of workers employed
10. Full name of party filing charge Lena Bell, CEO					
11. Address of party filing charge (street, city, state and ZIP code) See above		11a. Tel. No.	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	statements f. CEO		Tel. No. Cell No. (202) 439-49	966
(signature of representative or person making charge)	(Print/type na	ame and title or office, if any)		Fax No. (202) 618-62	290
Address See above		Date 09/20/2018		e-mail lena@ppssvo	c.com

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 BOARD		Case	Date filed	
CHARGE AGAINST LABOR ORGANIZATION C		5-CB-227727	9/14/18	
INSTRUCTIONS: File an original of this charge with the N	ILRB Regional D	irector of the region in w	hich the alleged unfair labor practice	
occurred or is occurring. 1. LABOR ORGANIZATION OR	ITS AGENTS AG	AINST WHICH CHARGE IS	BROUGHT	
a. Name United Security & Police Officers of America		b. Union Representative (b) (6), (b) (7)(C)	e to Contact	
c. Address 5620 Saint Barnabas Rd, Ste 314, Oxon Hill, M	D 20745-	d. Tel. No. (301)377-9860	e.e. Cell No.	
3628		f. Fax No.	g. e-Mali (b) (6), (b) (7)(C)	
h. The above-named labor organization or its agents have en 8(b), subsection(s) (1)(A) of the National Labor Relations the meaning of the Act, or are unfair practices affecting co	Act, and these ut	rair labor practices are unit be meaning of the Act and t	he Postal Reorganization Act.	
7 Basis of the Charge (set forth a clear and concise stateme	ent of the facts co.	nstituting the alleged utilali	(and higheres)	
Since shout 600,0076 2019, the above named la	abor organizat	ion has restrained and	d coerced employees in the	
exercise of rights protected by Section 7 of the	Act by refusin	ig to process or arbitra	ate the grievance of	
(B) (B) (7)(C) regarding (S) (S) uspension and terminal	ation for arbitra	ary or discriminatory r	easons or in bad faith.	
regarding edepartment and terminal				
3. Name of Employer		4a, Tel. No.	4b. Cell No.	
Constellis		(202)565-1991	(202)565-1 <u>99</u> 1	
Constant		4c. Fax No.	4d. e-Mail nwilliams@triplecanopy.co	
			m	
5. Location of Plant involved (street, city, state, and ZIP code	e)	6. Employer representa		
12018 Sunrise Valley Dr, Ste 140, Reston, VA	20191-3444		ns Contract Manager	
7. Type of Establishment (factory, mine, wholesaler)	3. Principal produ	ict or service	Number of Workers employed	
Security Contractor	Security Se	rvices	500	
10. Full name of party filing charge (b) (6), (b) (7)(C)	<u> </u>	11a. Tel. No. (b) (6), (b) (7)(C)	11b. Cell No. (b) (6), (b) (7)	
		11c. Fax No.	11d e-Mail (b) (6), (b) (7)(C)	
710	anda\			
11. Address of party filing charge (street, city, state, and ZIP (b) (6), (b) (7)(C)	code)			
(b) (0), (b) (1)(C)	12. DECLAR	ATION		
I declare that I have read the above charge and the	<u>at the statemen</u>	ts therein are true to the l	Tel No.	
(b) (6), (b) (7)(C)			Terrivo.	
Ву:	(b) (6), (k	0) (7)	(b) (6), (b) (7)	
(signature or representative or person making analys)	Print/type r	name and title or office, if ar	ny Cell No. (b) (6), (b) (7)	
Address: (b) (6), (b) (7)(C)		Date:	Fax No.	
(b) (0), (b) (7)(C)		aludia	e-Mail	
		9/14/18	(b) (6), (b) (7)(C)	

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT
Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information 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 will cause the NLRB to decline 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	05-CB-227829	9/12/18
INSTRUCTIONS: File an original of this charge with the NLRB Regio	nal Director of the region in wh	nich the alleged unfair labor practice
occurred or is occurring. 1. LABOR ORGANIZATION OR ITS AGENT	S AGAINST WHICH CHARGE IS	BROUGHT
a. Name	b. Union Representative	
United Food and Commercial Workers Local 400	Mark P. Federici	
	President	
c. Address	d. Tel. No.	e.e. Cell'No.
8400 Corporate Dr., Ste. 200, Hyattsville, MD 20785-229		
	f. Fax No.	g. e-Mail
 h. The above-named labor organization or its agents have engaged in ar 8(b), subsection(s) (1)(A) of the National Labor Relations Act, and the the meaning of the Act, or are unfair practices affecting commerce with 2. Basis of the Charge (set forth a clear and concise statement of the fact Within the last six months, the above-named labor organic exercise of rights protected by Section 7 of the Act by referregarding of the act by referregarding of the suspension for arbitrary or discrimination. 	sé unfair labor practices are unfai hin the meaning of the Act and the Is constituting the alleged unfair li ization has restrained and using to arbitrate the grieva	r practices affecting commerce within e Postal Reorganization Act abor practices) coerced employees in the ance of (b) (6), (b) (7)(C)
3. Name of Employer	4a. Tel No. 757-460-1674	4b. Çeli No.
Kroger Grocery Store 532	4c. Fax No.	4d. e-Mail
5. Location of Plant involved (street, city, state, and ZIP code)	6. Employer representati	ve to contact
4625 Shore Dr. Virginia Beach, VA 23455-2745	Casey Smith HR (,
	roduct or service	9. Number of Workers employed
		(50) NOY SUFF
Pharmacy Grocery Store retail 10. Full name of party filing charge	11a. Tei. No.	11b. Cell No.
(b) (6), (b) (7)(C)	Ta. Tel. No.	(b) (6), (b) (7)
	11c. Fax No.	11d e-Mail (b) (6), (b) (7)(C)
11. Address of party filing charge (street, city, state, and ZIP code)		
(b) (6), (b) (7)(C)		
	ARATION	
I declare that I have read the above charge and that the states	mente therein are true to the he	et of my knowledge and helief
I declare that I have read the above charge and that the stater	ments therein are the to the be	Tel No.
_{By} (b) (6), (b) (7)(C)		}
(b) (6)), (b) (7)(C)	1
	pe name and title or office, if any	Cell No. (b) (6), (b) (7)
Address:	Date:	Fax No.
(b) (6), (b) (7)(C)	1	(b) (6), (b) (7)(C)
	1	e-Mail
		(b) (-), (-) ()(-)

FORM EXEMPT LINDER 44 U.S.C.3512

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

DO NOT WRIT	E IN THIS SPACE
Case	Date Filed
05-CB-227835	9/13/18

INSTRUCTIONS: File an original with NLRB Regional Director for the	region in which the alleged u	nfair labor p	ractice occurre	ed or is occurring.
1. LABOR ORGANIZATION OR ITS	AGENTS AGAINST WHICH	CHARGE I	S BROUGHT	
a. Name		b. Union R	epresentative	to contact
International Union, Security, Police and Fire Professionals of Ameria		Joseph 1	McCray	
		Title: Re	gion 4 Vice Pr	esident
c. Address (Street, city, state, and ZIP code)		d. Tel. No. (586) 772-		e. Cell No.
25510 Kelly Rd		f. Fax No.		g. e-Mail
MI Roseville 48066-4994				jmccray@spfpa.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 Ac meaning of the Act and the Postal Reorganization Act.	of the Natio	onal Labor R	elations 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 labo	r practices)	
See additional page				
Name of Employer The Catholic University of America	, <u>.</u>	4a. Tel. No (202) 319-		b. Cell No.
		c. Fax No.		d. e-Mail
5. Location of plant involved (street, city, state and ZIP code)			6. Employ	er representative to contact
620 Michigan Ave NE Leahy Hall Rm 280			Nancy O	(
DC Washington 20064-0001			Title: Gen	neral Counsel
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed
Others	Public Safety		32	
10. Full name of party filing charge		11a. Tel. N (b) (6), (b		b. Cell No.
(b) (6), (b) (7)(C)		c. Fax No.		d. e-Mail
11. Address of party filing charge (street, city, state and ZIP code.)				(b) (6), (b) (7)
(b) (6), (b) (7)(C)				
12. DECLARATION declare that I have read the above charge and that the statements therein are true to	the best of my knowledge and belie		el. No. (b) (6),	(b)
<u></u>	6), (b) (7)(C)		ell No.	
	name and title or office, if any		ıx No.	
	Title:	["	IA INU.	
(b) (6), (b) (7)(C) Address	(date)_09/13/201	8 13:23:57	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

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			
05-CB-228150	9/25/18			

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
IBEW Local 70		Bill Tipton		
		Title: Busir	ness Manag	ег
c. Address (Street, city, state, and ZIP code)		d. Tel. No.		e. Cell No.
3606 Stewart Rd		(301) 516-77	30	q. e-Mail
MD District Heights 20747-4740		f. Fax No.		g. e-iviali
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 Ad	of the Natio	onal Labor Rel	ations Act, a	and these unfair labor practices
meaning of the Act and the Postal Reorganization Act.	<u> </u>		•	
2. Basis of the Charge (set forth a clear and concise statement of the	e facts constituting the alleged	d unfair labor p	oractices)	
See additional page				
oce additional page				
2. Name of Employer		4a. Tel. No.		b. Cell No.
Name of Employer Mirarchi Brothers inc.		(215) 957-26	000	2. 35
Milardii Diotioto Inc.		c. Fax No.		d. e-Mail
Location of plant involved (street, city, state and ZIP code)			6 Employ	ver representative to contact
2901 Samuel Dr			Ralph Mir	•
PA Bensalem 19020-7305			Title: Owr	ner
7. Type of establishment (factory, mine, wholesaler, etc.)	8. Identify principal product	or service	9. Numbe	er of workers employed
10. Full name of party filing charge		11a. Tel. No.		b. Cell No.
(b) (6), (b) (7)(C)		(b) (6), (b)		
		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 hest of my knowledge and helic	Tel.	No.(b) (6)	, (b)
r decide that i have read the above charge and that the statements therein are the to			/ 7 \/ ^ \	
(b) (6), (b) (7)(C)) (6), (b) (7)(C)	Cell	NO.	
(b) (6), (b) (7)(C)	name and title or office, if any	_		
By (signature of representative or person making charge) (Print/type in		y) Fax	No.	
(b) (6), (b) (7)(C)	name and title or office, if any	Fax	No.	(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

CHARGE AGAINST LABOR ORGANIZATION	N OR ITS				
AGENTS		5-CB-228211	9/27/18		
INSTRUCTIONS: File an original of this charge with th	e NLRB Regional Di	rector of the region in which	ch the alleged unfair labor practice		
occurred or is occurring.	OD ITS ACENTS ACA	INST WHICH CHARGE IS BE	OLIOUT		
a. Name	OR ITS AGENTS AGE	b. Union Representative to			
Service Employees International Union, Loca	1 32B.I	Dimas Diaz	o oontact		
Cervice Employees international Onion, Ecca	1 5200	Grievance Represe	ntative		
		Onevance Represe	illative		
c. Address		d. Tel. No.	e.e. Cell No.		
1025 Vermont Ave NW, 7th Floor		(202)387-3211			
Washington, DC 20005-3577		f. Fax No.	g. e-Mail		
h. The above-named labor organization or its agents have	e engaged in and are	engaging in unfair labor prac	ctices within the meaning of section		
8(b)(1)(A) of the National Labor Relations Act, and the					
the Act, or are unfair practices affecting commerce with 2. Basis of the Charge (set forth a clear and concise state	nin the meaning of the	Act and the Postal Reorgan	ization Act.		
Since about Since about 2018, the above-name	ment of the facts con-	situting the alleged unian lan	our practices)		
Since about 2018, the above-name	ed labor organiza	tion has restrained and	coerced employees in the		
exercise of rights protected by Section 7 of the	ne Act by refusing	to process the grievar	regarding		
the Employer's denial of an additional four-ho	our work shift, for	arbitrary or discriminat	ory reasons or in bad faith.		
		•	,		
3. Name of Employer		4a. Tel. No.	4b. Cell No.		
MNM Contractors LLC		301-384-0215	45. Gell No.		
WINTER CONTROLORS LEG		4c. Fax No.	4d. e-Mail		
		40. 7 42.110.	-u. C-Man		
5. Location of Plant involved (street, city, state, and ZIP co	ode)	6. Employer representative	e to contact		
1		Mauricio Navarrete			
77 Randolph Rd, Silver Spring, MD 20904-1239 7. Type of Establishment (factory, mine, wholesaler) 8. Principal product			Number of Workers employed		
			1		
Janitorial contractor at the DC Superior	Janitorial Serv	rices	40		
courthouse					
10. Full name of party filing charge (b) (6), (b) (7)(c)		11a. Tel. No.	11b. Cell No.		
		(b) (6), (b) (7)			
		11c. Fax No.	11d e-Mail		
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			
(/-) (0) (/-) (7)(0)			Tel No.		
(b) (6), (b) (7)(C)					
By:	(b) (6), (b)		(b) (6) (b) (7)(C)		
	(7)(C)		(b) (6), (b) (7)(C)		
(signature or representative or person making charge)	An Individual		Cell No.		
Address: (b) (7)(C)		Date:	Fax No.		
(b) (6), (b) (7)(C)		9/27/18			
			e-Mail		

Case

DO NOT WRITE IN THIS SPACE

Date filed

UNITED STATES OF AMERICA

NATIONAL LABOR RELATIONS BOARD

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 IN THIS SPACE			
Case		Date Filed	
5-0	CB-228398	9/28/18	

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

A LABOR ORGANIZATION OF F					
1. LABOR ORGANIZATION OR IT	IS AGENTS	AGAINST WHICH CHAR			
a. Name United Food and Commercial Workers, Local 400			b. Union F Mark Fed	tepresentative derici, Presid	to contact ent
c. Address (<i>Street, city, state, and ZIP code</i>) 8400 Corporate Dr., Suite 200 Landover, MD 20785			d. Tel, No 301-459-		e. Cell No.
20,00			f. Fax. No		
			g. e-mail mfederic	i@local400.c	org
h. The above-named labor organization has engaged in and is engaged (list subsections) $8(b)(3)$ and $8(d)$ 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 Since on or about, 2018, and at all times thereafter representatives, has unduly and unlawfully delayed the ratif with respect to, the fully-negotiated tentative successor agree having expressly agreed to submit the tentative agreement to	ication vote ement reac	-named labor organizat e on, and otherwise refu hed with the Employer	used to ex	orncers, age	rgain in good faith
3. Name of Employer Macy's, Inc.		4a, Tel. No. (646) 787-4816	b. Cell No		c. Fax No. (646) 787-4201
		d. e-mail chanell.bracey-davis@	macys.co	m	
 Location of plant involved (street, city, state and ZIP code) Seven locations in Maryland and one location in Washington 	n, D.C.			er representati Bracey-Davis	
7. Type of establishment (factory, mine, wholesaler, etc.) Retail store	8. Identify p Retail sale	rincipal product or service	ļ	9. Number o	of workers employed
10. Full name of party filing charge Macy's, Inc.					
11. Address of party filing charge (street, city, state and ZIP code) Morgan, Brown & Joy, LLP, 200 State St., Boston, MA 021	109	11a, Tel. No. 617-523-6666	b. Cell No	•	c. Fax No. 617-367-3125
		d. e-mail soconnor@morganbro	wn.com		
12. DECLARATION I declare that I have read the above charge are true to the best of my knowled	and that the		1	Tel. No. 617-523-666	6
11-06	Sean P.	O'Connor, Attorney		Cell No.	
(signature of representative or person making charge)	(Print/type na	ame and title or office, if any)		Fax No. 517-367-31 2	5
Morgan, Brown & Joy, LLP, 200 State St., Boston	, MA			e-mail	
Address 02109		Date	:	soconnor@m	organbrown.com

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1901)
PRIVACY ACT STATEMENT

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

DO NOT WRITE	IN THIS SPACE	
Case	Date Filed	
05-CB-228508	9/27/18	

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

1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT								
a. Name Amalgamated Transit Union, AFL-CIO, Local 1764			(b) (6), (b) (7)(C)					
c. Address (Street, city, state, and ZIP code) 10000 New Hampshire Avenue, Silver Spring, MD.20903-1706			d. Tel. No. 301-431-7	100	e. Cell No. (b) (6), (b) (7)(C)			
			f. Fax. No. N/A					
			g. e-mail N/A					
h. The above-named labor organization has engaged in and is engaging in unfair labor practices within the meaning of section 8(b), subsections (1) and								
(list subsections) 8(b)(1)(b)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 th							
the Act and the Postal Reorganization Act.								
	o foots soost	ituding the alleged unfair is	har prodice	-1				
2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices) The above-named Union has restrained (b) (6), (b) (7)(C) in the exercise of rights protected by section 7 of the act and has violated their duty of fair representation by passing out personal information to co-workers that included my home address and telephone number and								
the information in question the act was witness by the memt	pers in the r	neeting and reported			1			
3. Name of Employer		4a, Tel. No.	b. Cell No.		c. Fax No.			
Transdev North America, Inc		301-909-7725	240-435-1020		N/A			
, , , , , , , , , , , , , , , , , , , ,								
d. e-mail conrad.marshall@tra			nsdev.com					
		Contrad.marsman@da						
5. Location of plant involved (street, city, state and ZIP code) 3201 Hubbard Rd, Hyattsville, MD. 20785			Employer representative to contact Conrad Marshall					
3201 Hubbard Rd, Hyalisville, IVID. 20763			Conrad Marshall					
7. Type of establishment (factory, mine, wholesaler, etc.)		rincipal product or service			of workers employed			
Transportation	Transport	ation Servioces		450				
10. Full name of party filing charge (b) (6), (b) (7)								
11. Address of party filing charge (street, city, state and ZIP code)	-	11a. Tel. No.	b. Celi No.		c. Fax No.			
		N/A	(b) (6), (b	o) (7)	N/A			
(b) (6), (b) (7)(C)		d. e-mail						
		(b) (6), (b) (7)(C)						
	12. DECLARATION Tel. No.							
I declare that I have read the above charge and that the statements N/A are true to the best of my knowledge and belief.								
(b) (6), (b) (7)(C) (b) (6), (b) (7)(C)				Cell No. (b) (6), (b)				
(signature of representative or person making charge) (Print/type name and title or office, if any)				Fax No.				
(b) (c) (b) (7)(0)				N/A				
(b) (6), (b) (7)(C) 09/24/2018			e-mail					
Address Date				(b) (6), (b) (7)(C)				

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

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

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

DO NOT WRITE IN THIS SPACE							
Case	Date Filed						
05-CB-228619	9/27/18						

INDICATIONS: File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.									
1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT									
a. Name US Austal Service/American Postal Workors Union Capully (b) (6), (b) (7)(C)				b. Union Representative to contact Ray Robinson, Executive Vice fres went					
a Address (Street, city, state, and ZIP code) 6139 Chillium Place NE			d. Tel. No.	91-0801	e, Cell No.				
Washington, DC 20011			f. Fax. No.						
_			g. e-mail						
h. The above-named labor organization has engaged in and is engaged (list subsections) practices are practices affecting commerce within the meaning of the the Act and the Postal Reorganization Act.	he Act, or th	of the Nation less unfair labor practices	nal Labor Re affecting co	elations Act, a ommerce withi	nd these unfair labor in the meaning of				
2. Basis of the Charge (set torth a clear and concise statement of the Briased Discrimination and unfair labor (D) (G), (D) (7)(C), violated Section 8 of the union failed to fairly represent the Equality Act 2010.	tacts consti r przes e Nati ne du	ituting the alleged unfair l hice due to onal Labor Rela e to coho I an	b) (6), (b) shows A unde	(7)(C) not because the	euse Law				
3. Name of Employer		4a. Tel. No.	b. Cell No.		c. Fax No.				
US Postal Service	į	301-499-7761	1361-3		361-324-5710				
		d. e-mail							
5. Location of plant involved (street, city, state and ZIP code). USPS Washington Nactional Distribution Center (BMC) 9201 Edgeworth Drive Capital Heights, MD 20790			6. Employer representative to contact Rebert Boris, Plant Manager						
	3. Identify p	rincipal product or service)	1	of workers employed				
Mail Processing Service	18 Mail	Processing + Del	very	6.9	29				
10. Full name of party filing charge (b) (6), (b) (7)(C)		J	.)						
(b) (6), (b) (7)(C)		11a. Tel. No. (b) (6), (b) (7)(C)	b. Cell No. (b) (6), (b) (7)(C)	c. Fax No.				
		d. e-mail (b) (6), (b) (7)(C)							
12. DECLARATION			1	b) (6), (b) (7)(C)				
b) (6), (b) (7)(C) the best of my knowledge (b) (6), (b) (7)(C)									
(b) (6),	(b) (7)(C)			Çeil No. o) (6), (b) (7	7)(C)				
) charge)				Fax No.					
(b) (6), (b) (7)(C)		Date 09-24-2018	P	(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**