UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U.S.C. 3512

WRIT	E IN	THIS	SPACE	
	Dat	e File	d	

DO NOT

Case

INSTRUCTIONS:

File an original and 4 copies of this charge with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOY	ER AGAINST WHOM CHARGE IS BROUGHT	· · · · · · · · · · · · · · · · · · ·
Name of Employer		b. Number of Workers Employed
Address (street, city, State, ZIP, Code)	d. Employer Representative	e. Telephone No.
		Fax No.
Type of Establishment (factory, mine, wholesaler, etc.)	g. Identify Principal Product or Service	
The above-named employer has engaged in and is engaging subsections)	of the National L	ection 8(a), subsections (1) and <i>(list</i> abor Relations Act, and these unfair labor
Basis of the Charge (set forth a clear and concise statement		practices.)
y the above and other acts, the above-named employer l laranteed in Section 7 of the Act. Full name of party filing charge <i>(if labor organization, give ful</i>		employees in the exercise of the rights
. Address (street and number, city, State, and ZIP Code)		4b. Telephone No.
		Fax No.
Full name of national or international labor organization of wh	6. DECLARATION	
Full name of national or international labor organization of wh I declare that I have read the above charge	6. DECLARATION and that the statements are true to the best	in when charge is filed by a labor organization
Full name of national or international labor organization of wh	6. DECLARATION and that the statements are true to the best	in when charge is filed by a labor organization