FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case	Date Filed
25-CA-095682	1/2/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Sensata Technologies, Inc.

b. Tel. No. 815-235-6815

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
2520 South Walnut Street
Freeport, IL 61032

e. Employer Representative
Daryl Tessman
Plant Manager

g. e-Mail

h. Number of workers employed
100+

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Factory

j. Identify principal product or service
Automotive sensors

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* _____ of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

2. Basis of the Charge *(set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)*

In or about mid to late July 2012, the Employer, via human resources representatives during so-called "tier meetings," told employees that they were not to discuss internal procedures or practices with non-employees.

In or about mid-October 2012, the Employer reassigned employee (b) (6), (b) (7)(C) to a new position in retaliation for (b) (6), (b) protected concerted activities.

In or about late (b) (6), (b) (7)(C) 2010, the Employer suspended employees in retaliation for their protected concerted activities.

RECEIVED NLRB REGION 33 2012 JAN -2 AM 8:23 PEORIA, IL

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No. (b) (6), (b) (7)(C)

4c. Cell No.

4d. Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filed in when charge is filed by a labor organization)* N/A

6. DECLARATION

I (b) (6), (b) (7)(C) ments are true to the best of my knowledge and belief.

By (b) (6), (b) (7)(C) an individual
(Print/type name and title or office, if any)

Tel. No. (b) (6), (b) (7)(C)

Office, if any, Cell No.

Fax No.

e-Mail (b) (6), (b) (7)(C)

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

12-30-12
(date)

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

PRIVACY ACT STATEMENT

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

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U S C 3512

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-095927	1-7-13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Advance America

b. Tel. No 641-787-0200

c. Cell No 641-275-0052

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
1110 First Avenue East
Newton, IA 50208

e. Employer Representative
Amber Wogan

g. e-Mail

h. Number of workers employed
2

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Store Front

j. Identify principal product or service
Pay day loans

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* 8(a)(1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

On or about (b) (6), (b) (7)(C) 2012, the above-named Employer, by its officers, agents or representatives, discharged (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) who was employed at its facility located at (b) (6), (b) (7)(C) because of (b) (6), work-related Facebook post.

RECEIVED NLRB REGION 25 2013 JAN -7 P 12: 16

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No (b) (6), (b) (7)(C)

4c. Cell No.

4d. Fax No

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) an individual
(Print/type name and title or office, if any)

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

1/03/13
(date)

Tel. No (b) (6), (b) (7)(C)

Office, if any, Cell No

Fax No

e-Mail
(b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-096137	1/10/13

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring

1 EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer KEYSTONE STEEL & WIRE, DIVISION OF KEYSTONE CONSOLIDATED, INC.		b Tel. No. (309)697-7610 c Cell No.
d Address (street, city, state ZIP code) 7000 S ADAMS ST, BARTONVILLE, IL 61607-2855	e. Employer Representative KEN NOTARO, Vice President HR	f. Fax No. (309)697-7120 g e-Mail h Dispute Location (City and State) Bartonville, IL
i Type of Establishment (factory, nursing home, hotel) Factory	j Principal Product or Service Fencing Wire	k Number of workers at dispute location 1000

l The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On or about (b) (6), (b) (7)(C) 2012, the Employer terminated me for my protected concerted activity of complaining about extending my probationary period.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)

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

4a Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel No. 4c. Cell No. (b) (6), (b) (7)(C) 4d Fax No 4e e-Mail (b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6 DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel No
B (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) Individual	Office, if any, Cell No. (b) (6), (b) (7)(C)
(signature of representative or person making charge) Address: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	Print Name and Title Date	Fax No e-Mail (b) (6), (b) (7)(C)

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PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET
FORM NLRB-501
(2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-097791	2/6/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer
WINPAK HEATSEAL CORPORATION

b Tel No (309)477-6614
c. Cell No. (309)369-2365
f Fax No (309)477-6699
g e-Mail wayne.altpeter@winpak.com
h Number of workers employed 200

d. Address *(Street, city, state, and ZIP code)*
1821 RIVERWAY DRIVE
PEKIN, IL 61554

e. Employer Representative
WAYNE ALTPETER
MAINTENANCE MANAGER

i. Type of Establishment *(factory, mine, wholesaler, etc)*
Manufacturing Plant

j. Identify principal product or service
Foil lids

k The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

(1) In about ~~January 2013~~ Dec 2012, the above-named Employer, through (b) (6), (b) (7)(C) [redacted], interfered with employees' Section 7 rights by telling employees not to discuss terms and conditions of employment with other employees.

(2) On about (b) (6), (b) (7)(C) 2013, the above-named Employer terminated its employee (b) (6), (b) (7)(C) because it believed (b) (6) discussed terms and conditions of employment with other employees.

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NLRB
SUBREGION 33
2013 FEB -6 AM 10
PEORIA, IL

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)
(b) (6), (b) (7)(C)

4b Tel No (b) (6), (b) (7)(C)
4c Cell No. (b) (6), (b) (7)(C)
4d Fax No.
4e. e-Mail (b) (6), (b) (7)(C)

5 Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Individual
(Print/type name and title or office, if any)

02/06/13
(date)

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

Tel. No. (b) (6), (b) (7)(C)
Office, if any, Cell No (b) (6), (b) (7)(C)
Fax No
e-Mail (b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-098550	02/19/2013

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
United Natural Foods

b. Tel. No. (317)865-7140

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
655 East Commerce Parkway Drive
Greenwood, IN 46143

e. Employer Representative
Melissa Wang

g. e-Mail

h. Number of workers employed
250

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
warehouse

j. Identify principal product or service
organic food distribution

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
About (b) (6), (b) (7)(C) 2013 the above-named Employer discharged employee (b) (6), (b) (7)(C) in retaliation for (b)(6), protected concerted activity.

2013 FEB 15 A 11:45

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No.

4c. Cell No. (b) (6), (b) (7)(C)

4d. Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

(b) (6), (b) (7)(C) 6. DECLARATION
that the statements are true to the best of my knowledge and belief.

(b) (6), (b) (7)(C) an individual
(Print/type name and title or office, if any)

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

2/15/13
(date)

Tel. No.

Office, if any, Cell No.
(b) (6), (b) (7)(C)

Fax No.

e-Mail
(b) (6), (b) (7)(C)

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PRIVACY ACT STATEMENT

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

FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-098750	02/21/2013

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Trinity Episcopal Church

b. Tel. No 317-926-1346

c. Cell No. 317-250-7537

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
3243 North Meridian St.
Indianapolis, IN 46208

e. Employer Representative
Kevin Deprey

g. e-Mail

h. Number of workers employed
3

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Church and School

j. Identify principal product or service
maintenance

k The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* 8(a)(1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
On about (b) (6), (b) (7)(C) 2013, the above-named Employer discharged the Charging Party because of (b) (6) protected concerted activities.

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No (b) (6), (b) (7)(C)

4c. Cell No.

4d Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

6. DECLARATION
I [redacted] statements are true to the best of my knowledge and belief.

By (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) an individual
(Print/type name and title or office, if any)

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

Tel. No. (b) (6), (b) (7)(C)

Office, if any, Cell No.

Fax No.

e-Mail
(b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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ID #: (b) (6), (b) (7)(C)

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case	Date Filed
25-CA-098766	02/21/2013

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer: Amazon.Com Inc.

b. Tel. No.: 317 8379231

c. Cell No.:

f. Fax No.:

g. e-Mail:

h. Number of workers employed: 500

d. Address (*Street, city, state, and ZIP code*): 715 Airtech Parkway Plainfield, IN 46168

e. Employer Representative: Tim Hall, G.M.

i. Type of Establishment (*factory, mine, wholesaler, etc.*): Warehouse

j. Identify principal product or service: Shipping Products

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (*list subsections*) 8(a)(1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On February 11, 2013 I filed a complaints (2) with the NLRB Region 25. On Wed, February 13, 2013 at 1000 am I was taken off the [redacted] (where I maintain a good production rate) and placed on the [redacted] in the single cell and dock where it is more difficult to maintain rate. Retaliation. [redacted]

[redacted] (*local name and number*)

[redacted]

4b. Tel. No.: N/A

4c. [redacted]

4d. Fax No.:

4e. e-Mail:

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*): N/A

6. DECLARATION

I de[redacted]ment[redacted]

By [redacted] (*Print/type name and title or office, if any*)

Address [redacted]

Tel. No.:

Office, if any, Cell No.:

Fax No.:

e-Mail:

2013 FEB 19 P 12:32

2/19/13

WILLF[redacted]NMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-099832	3/7/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Deere and Company

b. Tel No 309/765-5267

c. Cell No

f. Fax No 309/749-0085

d. Address *(Street, city, state, and ZIP code)*
One John Deere Place
Moline, IL 61265

e. Employer Representative
David W. Meier, Senior Counsel, Law Department

g. e-Mail
meierdavidw@johndeere.com

h. Number of workers employed
>100

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Office

j. Identify principal product or service
Manufacturer of farm equipment

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act

2. Basis of the Charge *(set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)*

Within the past six months, the above-named Employer has coercively interrogated employees and created the impression of surveillance in an attempt to learn more about the protected concerted activities of employees.

Within the past six months, the Employer has also maintained and enforced an overly broad social media policy.

On or about (b) (6), (b) (7)(C) 2012, the Employer terminated employees in retaliation for their protected concerted and/or union activities.

RECEIVED NLRB SUBREGION 33 2013 MAR -7 PM 2:58 PEORIA, IL

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No. (b) (6), (b) (7)(C)

4c. Cell No (b) (6), (b) (7)(C)

4d. Fax No.

4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

6. DECLARATION
(b) (6), (b) (7)(C) nd that the statements are true to the best of my knowledge and belief.

B [redacted] charge)

(b) (6), (b) (7)(C)
(Print/type name and title or office, if any)

X 3/22/13
(date)

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

Tel. No (b) (6), (b) (7)(C)

Office, if any, Cell No (b) (6), (b) (7)(C)

Fax No

e-Mail

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PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case	Date Filed
25-CA-100166	3/12/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Nestle USA

b. Tel. No. 815.754.2510

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
800 Nestle Court
DeKalb, IL 60115-8676

e. Employer Representative
Gavin Flynn

g. e-Mail

h. Number of workers employed
130

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
warehouse

j. Identify principal product or service
food products

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

2. Basis of the Charge *(set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)*

Since on or about [redacted] (b) (6), (b) (7)(C) 2013, Nestle USA interfered with workers rights to engage in protected concerted activity by indefinitely suspending [redacted] (b) (6), (b) (7)(C) an outspoken Union supporter, for an incident in which others have been given opportunity to avoid discipline.

Since on or about [redacted] (b) (6), (b) (7)(C) 2013, Nestle USA has discriminated against [redacted] (b) (6), (b) (7)(C) for engaging in protected Union activities by indefinitely suspending [redacted] (b) (6), (b) employment, while other employees were given opportunity to avoid discipline.

RECEIVED NLRB SUBREGION 33 2013 MAR 12 PM 3:04 PEORIA, IL

3. Full name of party filing charge *(If labor organization, give full name, including local name and number)*
International Union, United Automobile, Aerospace and Agricultural Implement Workers of America - UAW

4a. Address *(Street and number, city, state, and ZIP code)*
680 Barclay Blvd
Lincolnshire, IL 60069

4b. Tel. No. (847) 459.3888

4c. Cell No.

4d. Fax No. (847) 459.5680

4e. e-Mail
bcampbell@uaw.net

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)* AFL-CIO

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

By [signature] *(signature of representative or person making charge)*

Brandon W. Campbell, Int'l Rep. UAW
(Print/type name and title or office, if any)

Address 680 Barclay Blvd, Lincolnshire, IL 60069

3.12.13
(date)

Tel. No. (847) 459.3888

Office, if any, Cell No.

Fax No. (847) 459.5680

e-Mail
bcampbell@uaw.net

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

PRIVACY ACT STATEMENT

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

FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-100599	3/19/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Academy of Screen Printing and Awards

b. Tel. No. 309-686-0026

c. Cell No

f. Fax No

d. Address *(Street, city, state, and ZIP code)*
1316 E. War Memorial Drive,
Peoria, IL 61614

e. Employer Representative
Mike Hallar

g. e-Mail
academyofawards@gmail.co

h. Number of workers employed
5

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Retail service

j. Identify principal product or service
screen printing, embroidery

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

RECEIVED NLRB SUBREGION 33 2013 MAR 19 AM 10: 14 PEORIA, IL

2. Basis of the Charge *(set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)*
On about (b) (6), (b) (7)(C) 2013, the above-named Employer discharged the Charging Party for engaging in protected concerted activities by raising work safety concerns.

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel No.

4c. Cell No. (b) (6), (b) (7)(C)

4d. Fax No

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By: (b) (6), (b) (7)(C)
(Signature of person making charge)

(b) (6), (b) (7)(C) an individual
(Print/type name and title or office, if any)

3/16/13
(date)

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

Tel No

Office, if any, Cell No.
(b) (6), (b) (7)(C)

Fax No.

e-Mail
(b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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ID#: (b) (6), (b) (7)(C)

FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-101094	03/26/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Parkview Hospital, Inc. d/b/a Parkview Regional Medical Center

b. Tel. No. (260) 266-1000
c. Cell No.
f. Fax No.
g. e-Mail
h. Number of workers employed
In excess of 300

d. Address *(Street, city, state, and ZIP code)*
11109 Parkview Plaza Drive
Fort Wayne, Indiana 46805

e. Employer Representative
Sue Ehinger, PhD
President
Parkview Hospital

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Regional Medical Center

j. Identify principal product or service
Healthcare Services

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* (4) and (c) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

RECEIVED NLRB REGION 25 2013 MAR 22 12:5

2. Basis of the Charge *(set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)*
[redacted] and [redacted] were [redacted] employees of Parkview Regional Medical Center in the long-term/continuing care center located in Allen County, Indiana. Such care center is required by law to have a designated [redacted] had been the [redacted] and [redacted] had been the [redacted] of the evening shift nursing personnel until the [redacted] placed that in suspension. On September 27, 2012, the [redacted] confronted the entire evening shift nurse personnel who did not report to their floor because the [redacted] would not designate a [redacted] The employees requested a meeting with the [redacted] and indicated they would not report until the [redacted] had properly designated the [redacted] There was never any reported issues of lack of care for the patients in that the day shift continued to maintain patient care until replaced. The employees were terminated for failure to demonstrate recognized standards of conduct and for violations of policies and procedures on or about [redacted] 2012.

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
[redacted]

4a. Address *(Street and number, city, state, and ZIP code)*
[redacted]

4b Tel. No. [redacted]
4c. Cell No.
4d. Fax No.
4e. e-Mail
[redacted]

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)* N/A

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

B[redacted] *(Print/type name and title or office, if any)*

Address [redacted] 3/18/13 *(date)*

Tel. No. [redacted]
Office, if any, Cell No.
Fax No.
e-Mail
[redacted]

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-101126	03/26/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Parkview Hospital, Inc. d/b/a Parkview Regional Medical Center

b. Tel. No. (260) 266-1000

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
11109 Parkview Plaza Drive
Fort Wayne, Indiana 46805

e. Employer Representative
Sue Ehinger, PhD
President
Parkview Hospital

g. e-Mail

h. Number of workers employed
In excess of 300

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Regional Medical Center

j. Identify principal product or service
Healthcare Services

RECEIVED NLRB REGION 25 2013 MAR 26 PM 12:59

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list *subsections)* (4) and (c) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
(b) (6), (b) (7)(C) and (b) (6), (b) (7)(C) were (b) (6), (b) (7 employees of Parkview Regional Medical Center in the long-term/continuing care center located in Allen County, Indiana. Such care center is required by law to have a designated (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) had been the (b) (6), (b) (7)(C) and (b) (6), (b) (7)(C) had been the (b) (6), (b) (7)(C) of the evening shift nursing personnel until the (b) (6), (b) (7)(C) placed that in suspension. On September 27, 2012, the (b) (6), (b) confronted the entire evening shift nurse personnel who did not report to their floor because the (b) (6), (b) would not designate a (b) (6), (b) (7)(C) The employees requested a meeting with the (b) (6), (b) and indicated they would not report until the (b) (6), (b) had properly designated the (b) (6), (b) (7)(C) There was never any reported issues of lack of care for the patients in that the day shift continued to maintain patient care until replaced. The employees were terminated for failure to demonstrate recognized standards of conduct and for violations of policies and procedures on or about (b) (6), (b) (7)(C) 2012.

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No. (b) (6), (b) (7)(C)

4c. Cell No.

4d. Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)* N/A

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

By (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)
(Print/type name and title or office, if any)

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

3/18/13
(date)

Tel. No. (b) (6), (b) (7)(C)

Office, if any, Cell No.

Fax No.

e-Mail
(b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-101862	04/03/2013

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer
MDV, a wholly-owned subsidiary of Nash Finch Company

b Tel No 757-858-9300 x4411

c Cell No

f. Fax No

d. Address *(Street, city, state, and ZIP code)*
311 North Curry Pike Road
Bloomington, IN 47404

e. Employer Representative
Chris Jenson- Plant Manager

g. e-Mail

h Number of workers employed
44

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
warehouse

j Identify principal product or service
warehousing

k The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
On about (b) (6), (b) (7)(C) 2013, the above-named Employer terminated (b) (6), (b) (7)(C) in retaliation for (b) (6) union activities and other protected concerted activities.

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2013 APR -2 P 4:00

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b Tel No (b) (6), (b) (7)(C)

4c. Cell No (b) (6), (b) (7)(C)

4d Fax No

4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) An Individual
(Print/type name and title or office, if any)

Tel No (b) (6), (b) (7)(C)

Office, if any, Cell No

Fax No

e-Mail

4-1-13
(date)

Address (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

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

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case	Date Filed
25-CA-102268	4/9/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Carrier Corporation (United Technologies)

b. Tel. No. 317-270-7150

c. Cell No.

f. Fax No. 317-240-5211

d. Address *(Street, city, state, and ZIP code)*
7310 West Morris Street
Indianapolis, IN 46231

e. Employer Representative
Rejeana Pendelton
Senior Labor Relations Manager

g. e-Mail

h. Number of workers employed
Approximately 1,300

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Factory

j. Identify principal product or service
Residential Furnace Products

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* 8(a)3 of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
During the last six months and continuing, the above-named employer, by its agents, officers and/or representatives have unlawfully disparately and discriminatorily harassed, coerced and disciplined, (suspended) Union member and (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) because (b)(6) engaged in protected, concerted and Union activities.

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NLRB REGION 25
2013 APR -5 P 2:01

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industrial and Service Workers International Union, AFL-CIO, CLC

4a. Address *(Street and number, city, state, and ZIP code)*
1301 Texas Street, 2nd Floor
Gary, Indiana 46402

4b. Tel. No. 219-881-6222

4c. Cell No.

4d. Fax No. 219-886-8686

4e. e-Mail
aalfano@usw.org

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*
United Steel, Paper & Forestry, Rubber, Manufacturing, Energy, Allied Industrial & Service Workers Int'l Union

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

By _____ Anthony Alfano, Organizing Counsel
(Signature of representative or person making charge) *(Print/type name and title or office, if any)*

Address 1301 Texas Street, 2nd Floor, Gary, Indiana 46402 4/5/13 *(date)*

Tel. No. 219-881-6222

Office, if any, Cell No.

Fax No. 219-886-8686

e-Mail
aalfano@usw.org

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-102411	04/10/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer
BCLR Acquisition, Inc. d/b/a Quality Glass

b Tel. No. (574) 534-5051

c. Cell No.

f. Fax No. (574) 534-6651

d Address *(Street, city, state, and ZIP code)*
907 W. Pike St.
Goshen, IN 46526

e. Employer Representative
Ryan Casey
Owner

g. e-Mail

h. Number of workers employed
25

i Type of Establishment *(factory, mine, wholesaler, etc.)*
Glass Installer

j Identify principal product or service
Glass replacement

k The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
On or about (b) (6), (b) (7)(C) 2013, the above-named Employer, through (b) (6), (b) (7)(C) terminated its employee (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) in retaliation for (b) (6), protected concerted activity.

RECEIVED NLRB REGION 25 2013 APR -9 P 12:33

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b Tel. No. (b) (6), (b) (7)(C)

4c Cell No (b) (6), (b) (7)(C)

4d Fax No

4e e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Individual
(Signature of representative or person making charge) *(Print/type name and title or office, if any)*

4/1/13
(date)

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

Tel No (b) (6), (b) (7)(C)

Office, if any, Cell No. (b) (6), (b) (7)(C)

Fax No.

e-Mail
(b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-102737	04/15/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer North American Stamping Group (NASG) DBA Indiana Stamping

b. Tel. No.

c. Cell No.

f. Fax No.

g. e-Mail

h. Number of workers employed

d. Address *(Street, city, state, and ZIP code)*
3401 W. 8th Street
Muncie, Indiana 47302

e. Employer Representative
Tim Eisengruber
(Operations/Plant Mngr)

i. Type of Establishment *(factory, mine, wholesaler, etc.)* Factory

j. Identify principal product or service Automotive stamping facility

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* _____ of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

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2. Basis of the Charge *(set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)*

Workplace Harassment / Verbal Intimidation
Unjust Termination Retaliation
Violation of Title III of the Civil Rights Act of 1964

Instance Report Enclosed

3. [redacted] *full name, including local name and number)*

4a. Address *(Street and number, city, state, and ZIP code)*
[redacted]

4b. Tel. No.

4c. Cell No. [redacted]

4d. Fax No.

[redacted]

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

none

6. DECLARATION
[redacted] that the statements are true to the best of my knowledge and belief.

[redacted] *harge)*

[redacted] *(Print/type name and title or office, if any)*

Tel. No. [redacted]

Office, if any, Cell No.

Fax No.

Address [redacted]

4-9-13 *(date)*

[redacted]

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

PRIVACY ACT STATEMENT

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

FORM EXEMPT UNDER 44 U.S.C 3512

FORM NLRB-501
(9-07)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-103731	04/26/13

INSTRUCTIONS:
File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer: Faurecia

b. Number of workers employed: 1000

c. Address *(Street, city, state, and ZIP code)*: 601 S Gladstone Ave

d. Employer Representative: Kurt Nunamaker

e. Telephone No.: ( ) 812-348-4500
Fax No.: ( ) -

f. Type of Establishment *(factory, mine, wholesaler, etc.)*: Factory

g. Identify principal product or service:

h. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* Art 4 Sec 4.2 But not limited To of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
Unfair Termination, False Accused.

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NLRB REGION 25
2013 APR 25 P 2:24

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
[redacted]

4a. [redacted]

4b. Telephone No.: ( ) [redacted]
Fax No.: ( ) -

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filed in when charge is filed by a labor organization)*
IBEW Local 1424

6. DECLARATION
[redacted] I have read the above charge and that the statements are true to the best of my knowledge and belief.

By [redacted]
(Signature of representative or person making charge)

(Print/type name and title or office, if any)

Address

(fax) ( ) -
( ) -
(Telephone No.)

/ /
(date)

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

PRIVACY ACT STATEMENT

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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-104421	5/6/13

INSTRUCTIONS:

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Lawrence Manor		b. Tel. No X 317-898-1515 c. Cell No
d. Address (street, city, state ZIP code) 8935 E 46th ST Indianapolis, IN 46266	e. Employer Representative Christina Tinson	f. Fax No. g. e-Mail h. Dispute Location (City and State) Indianapolis, IN
i. Type of Establishment (factory, nursing home, hotel) X nursing home	j. Principal Product or Service X (b) (6), (b) (7)(C)	k. Number of workers at dispute location 1

l. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On about (b) (6), (b) (7)(C) 2013, the Employer terminated (b) (6), (b) (7)(C) for spreading false rumors in violation of the National Labor Relations Act.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No (b) (6), (b) (7)(C) 4c. Cell No 4d. Fax No. 4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**	Tel. No (b) (6), (b) (7)(C)
By: X (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) An Individual (signature of representative or person making charge) Print Name and Title	(b) (6), (b) (7)(C) Fax No
Address: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Date: 4/29/13	e-Mail

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

PRIVACY ACT STATEMENT

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NLRB REGION 25
2013 MAY -3 P 12:01

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U.S.C. 3512

DO NOT WRITE IN THIS SPACE

Case	Date Filed
25-CA-104599	5/8/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Developmental Service Alternative

b. Tel. No. 317-477-0093

c. Cell No.

f. Fax No.

d. Address (*Street, city, state, and ZIP code*)
5999 W. Memory Lane, Ste A
Greenfield, IN 46140

e. Employer Representative
~~Becky Baker~~ Doug Dugger

g. e-Mail

h. Number of workers employed
200

i. Type of Establishment (*factory, mine, wholesaler, etc.*)
Health care

j. Identify principal product or service
care services for group homes

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (*list subsections*) 8(a)(1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)
On (b) (6), (b) (7)(C) 2012, the above-named Employer discharged the Charging party in retaliation for (b) (6), (b) protected concerted activities regarding the implementation of a new web clock-in policy.

RECEIVED
NLRB REGION 25
2013 MAY -6 P 2:08

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a. Address (*Street and number, city, state, and ZIP code*)
(b) (6), (b) (7)(C)

4b. Tel. No.

4c. Cell No. (b) (6), (b) (7)(C)

4d. Fax No.

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

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

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

Tel. No.

By X (b) (6), (b) (7)(C)
(*Signature of representative or person making charge*)

(b) (6), (b) (7)(C) an individual
(*Print/type name and title or office, if any*)

Office, if any, Cell No.
(b) (6), (b) (7)(C)

Fax No.

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

X 04/03/13
(*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

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(b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 05/06/2013 12:55 934 PAGE 02

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case: 25-CA-105188 | Date Filed: 5/15/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Laborers International Union of North America, Midwest Regional Office

b. Tel. No. 217-522-5158

c. Cell No.

f. Fax No. 217-522-5416

d. Address (Street, city, state, and ZIP code)
1 North Old State Capitol Plaza, Suite 525
Springfield, IL 62701

e. Employer Representative
David Penn, Director of Midwest Region Organizing Committee

g. e-Mail

h. Number of workers employed
40

i. Type of Establishment (factory, mine, wholesaler, etc.)
labor organization

j. Identify principal product or service
labor union

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)

The above-named Employer, by its officers, agents and representatives, since on or about [redacted] (b) (6), (b) (7)(C) 2013, has interfered with, restrained and coerced its employees in the exercise of their rights guaranteed by Section 7 of the Act, as amended, by acts and conduct including discharging (b) (6), (b) (7)(C) from [redacted] (b) (6), (b) position as (b) (6), (b) (7)(C)

RECEIVED NLRB REGION 33
2013 MAY 15 PM 2:22
PEORIA, IL

3. Full name of party filing charge (if labor organization, give full name, including local name and number)
(b) (6), (b) (7)(C)

4a. Address (Street and number, city, state, and ZIP code)
(b) (6), (b) (7)(C)

4b. Tel. No. (b) (6), (b) (7)(C)

4c. Cell No. (b) (6), (b) (7)(C)

4d. Fax No.

4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)

6. DECLARATION

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

(b) (6), (b) (7)(C) [redacted] charge)

(b) (6), (b) (7)(C) Individual
(Print/type name and title or office, if any)

Address

5/15/2013
(date)

Tel. No.

Office, if any, Cell No.

Fax No.

e-Mail

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

RECEIVED
NLRB REGION 25

DO NOT WRITE IN THIS SPACE	
Case 25-CA-105511	Date Filed 5/21/13

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

1 EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

2013 MAY 20 P 1:29

a. Name of Employer American Health Network of Indiana	b. Tel. No. 317-580-6340 c. Cell No. f. Fax No.
d. Address *(Street, city, state, and ZIP code)* 10689 North Pennsylvania Street Suite 200 Indianapolis IN 46280	e. Employer Representative Hardeep Sikand g. e-Mail h Number of workers employed 100+
i. Type of Establishment *(factory, mine, wholesaler, etc.)* Health Care	j. Identify principal product or service Health Care

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* 8(a)(3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

The employer hired a new [redacted] to oversee the operations of the company. The new [redacted] [redacted] changed the mobile employees' terms and conditions of employment by taking away their drive time pay, and requiring them to remain off the clock between facilities and while equipment was being set up. [redacted] approached management on behalf of the mobile employees to complain that the changes adversely impacted our Mobile team and was terminated for engaging in protected concerted activity. After [redacted] was terminated, I complained myself about the changes and I was terminated too.

Terminated [redacted] /13

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*

[redacted]

4a. Address *(Street and number, city, state, and ZIP code)* c/o Paul J. Cummings HENN LAW FIRM PC 625 N. Madison Avenue Greenwood IN 46142	4b Tel No 317-885-0041 4c. Cell No 4d. Fax No. 888-308-6503 4e. e-Mail Paul.Cummings@HennLawOnl

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

6. DECLARATION
[redacted] at the statements are true to the best of my knowledge and belief

[redacted] *(if any)*

[redacted] 5-16-13 *(date)*

Tel. No

Office, if any, Cell No.

Fax No

e-Mail

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

RECEIVED
NLRB REGION 25
2013 MAY 20 P 1:28

DO NOT WRITE IN THIS SPACE	
Case 25-CA-105520	Date Filed 5/21/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
American Health Network of Indiana

b. Tel. No 317-580-6340
c. Cell No.
f. Fax No
g. e-Mail
h. Number of workers employed 100+

d. Address *(Street, city, state, and ZIP code)*
10689 North Pennsylvania Street
Suite 200
Indianapolis IN 46280

e. Employer Representative
Hardeep Sikand

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Health Care

j. Identify principal product or service
Health Care

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* 8(a)(3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

The employer hired a new [redacted] to oversee the operations of the company. The new [redacted] [redacted] changed the mobile employees' terms and conditions of employment by taking away their drive time pay, and requiring them to remain off the clock between facilities and while equipment was being set up. [redacted] approached management on behalf of the mobile employees to complain that the changes adversely impacted our Mobile team and was terminated for engaging in protected concerted activity. I complained of [redacted] termination and management terminated me too.

Terminated [redacted] / 13

[redacted] filing charge *(if labor organization, give full name, including local name and number)*

4a. Address *(Street and number, city, state, and ZIP code)*
c/o Paul J. Cummings
HENN LAW FIRM PC
625 N. Madison Avenue
Greenwood IN 46142

4b. Tel. No. 317-885-0041
4c. Cell No
4d. Fax No. 888-308-6503
4e. e-Mail
Paul.Cummings@HennLawOnl

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

6. DECLARATION

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

By [redacted]

Address [redacted]

5/16/13
(date)

Tel. No
Office, if any, Cell No.
Fax No
e-Mail

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

RECEIVED
NLRB REGION 25
2013 MAY 28 P 1:28

DO NOT WRITE IN THIS SPACE	
Case 25-CA-105564	Date Filed 5/21/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
American Health Network of Indiana

b. Tel. No. 317-580-6340
c. Cell No
f. Fax No.
g. e-Mail
h. Number of workers employed 100+

d. Address *(Street, city, state, and ZIP code)*
10689 North Pennsylvania Street
Suite 200
Indianapolis IN 46280

e. Employer Representative
Hardeep Sikand

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Health Care

j. Identify principal product or service
Health Care

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* 8(a)(3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

The employer hired a new [redacted] to oversee the operations of the company. The new [redacted] [redacted] changed the mobile employees' terms and conditions of employment by taking away their drive time pay, and requiring them to remain off the clock between facilities and while equipment was being set up. [redacted] approached management on behalf of, and for the mutual aid and protection of, [redacted] fellow mobile employees to complain that the changes adversely impacted the the Mobile team, and was terminated for engaging in protected concerted activity.

Terminated [redacted] /13

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
[redacted]

4a Address *(Street and number, city, state, and ZIP code)*
c/o Paul J. Cummings
HENN LAW FIRM PC
625 N. Madison Avenue
Greenwood IN 46142

4b. Tel No 317-885-0041
4c Cell No.
4d Fax No. 888-308-6503
4e. e-Mail
Paul.Cummings@HennLawOnl

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By [redacted] [redacted]
(signature)

Address [redacted] 5-16-13
(date)

Tel. No.
Office, if any, Cell No
Fax No.
e-Mail

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

PRIVACY ACT STATEMENT

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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-105884	May 24, 2013

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer URS Corporation		b Tel. No. (309)676-5062 c. Cell No.
d Address (street, city, state ZIP code) 411 Hamilton Blvd. Ste 1810, Peoria, IL 61602	e. Employer Representative Bill Scefelbein	f Fax No. g e-Mail h Dispute Location (City and State) Peoria, IL
i. Type of Establishment (factory, nursing home, hotel) Maintenance	j. Principal Product or Service Maintenance Services	k Number of workers at dispute location 150

l. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On or about (b) (6), (b) (7)(C) 2013, the Employer suspended and then terminated me in retaliation for my protected concerted activity of expressing safety concerns on behalf of myself and other employees.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No 4e. e-Mail (b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel. No (b) (6), (b) (7)(C)
By (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) Individual	Office, if any, Cell No
(si[redacted]king charge) Address: (b) (6), (b) (7)(C)	Print Name and Title Date: 5/24/2013	Fax No. e-Mail (b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-106077	5/29/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer
Allied OSI Labs

b. Tel. No. 317-293-4858

c Cell No.

f. Fax No

d Address *(Street, city, state, and ZIP code)*
6299 Guion Road
Indianapolis IN 46268

e. Employer Representative
Cheryl - general manager

g. e-Mail

h. Number of workers employed
aprox. 40

i Type of Establishment *(factory, mine, wholesaler, etc)*
custom orthotics

j. Identify principal product or service
custom orthotics

k The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

On about (b) (6), (b) (7)(C) 2013, the above-named Employer terminated (b) (6), (b) (7)(C) in retaliation for (b) (6), protected concerted activities including by speaking up about production and management issues.

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NLRB REGION 25
2013 MAY 28 P 4: 24

3 Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel No (b) (6), (b) (7)(C)

4c Cell No

4d Fax No

4e e-Mail

5 Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C)
(Signature of representative or person making charge)

(b) (6), (b) (7)(C) An Individual
(Print/type name and title or office, if any)

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

5/28/13
(date)

Tel No (b) (6), (b) (7)(C)

Office, if any, Cell No

Fax No

e-Mail

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

PRIVACY ACT STATEMENT

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INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U.S.C. 3512

DO NOT WRITE IN THIS SPACE

Case	Date Filed
25-CA-106187	05/30/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Indiana Corrugated

b. Tel. No. 765-651-0234

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
3112 S Boots St.
Marion, IN 46953

e. Employer Representative
Linda Sills

g. e-Mail

h. Number of workers employed
50

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Factory

j. Identify principal product or service
Boxes

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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 December 2012, the above-named employer discriminated against the Charging Party because [redacted] engaged in protected concerted activities. On [redacted] 2013, the above-named employer terminated the Charging Party because [redacted] engaged in protected concerted activities.

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NLRB REGION 25
2013 MAY 29 P 2:46

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
[redacted]

4a. Address *(Street and number, city, state, and ZIP code)*
[redacted]

4b. Tel. No.

4c. Cell No. [redacted]

4d. Fax No.

4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By [redacted] *(making charge)* [redacted] an individual *(Print/type name and title or office, if any)*

Address [redacted]

5-29-13 *(date)*

Tel. No.

Office, if any, Cell No.
[redacted]

Fax No.

e-Mail

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

PRIVACY ACT STATEMENT

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TN#: [redacted]

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-106301	6/3/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer Brookdale Place		b. Tel. No. 317-334-9400
		c. Cell No
d Address (street, city, state ZIP code) 2725 Lake Circle Drive Indianapolis, IN 46268	e. Employer Representative Melissa Nestor Executive Director	f. Fax No.
		g e-Mail
		h Dispute Location (City and State) Indianapolis, IN
i. Type of Establishment (factory, nursing home, hotel) Nursing home	j Principal Product or Service Assisted living	k. Number of workers at dispute location 100+

l The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

2 Basis of the Charge (*set forth a clear and concise statement of the facts constituting the alleged unfair labor practices*)

Within the past six months, and continuing to the present date, the Employer has interfered with, restrained, and coerced its employees by terminating employee (b) (6), (b) (7)(C) in retaliation for (b) (6), protected, concerted activities.

3 Full name of party filing charge (*if labor organization, give full name, including local name and number*)

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

4a Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel No. (b) (6), (b) (7)(C)
	4c. Cell No. (b) (6), (b) (7)(C)
	4d. Fax No.
	4e e-Mail

5 Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6 DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my**	Tel. No. (b) (6), (b) (7)(C)
By (b) (6), (b) (7)(C) (b) (6), (b) (7)(C), an individual	Office, if any, Cell No. (b) (6), (b) (7)(C)
(si (b) (6), (b) (7)(C) Print Name and Title	Fax No.
Address (b) (6), (b) (7)(C) Date:	e-Mail

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

PRIVACY ACT STATEMENT

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NLRB REGION 25
2013 MAY 30 P 1:17

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-107147	6/13/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Collision Revision		b. Tel. No. 309-478-1555 c. Cell No.
d. Address (street, city, state ZIP code) 2321 Lakecrest Dr Pekin, IL 61554	e. Employer Representative Todd Lindsey, Manager	f. Fax No. 309-478-1560 g. e-Mail h. Dispute Location (City and State) Pekin, IL
i. Type of Establishment (factory, nursing home, hotel) body shop	j. Principal Product or Service auto repair	k. Number of workers at dispute location 8

l. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On about [redacted] 2013, the Employer discriminated against employee [redacted] by dishcarging [redacted] for engaging in protected concerted activity.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)

[redacted]

4a. Address (street and number, city, state, and ZIP code) [redacted]	4b. Tel. No. [redacted] 4c. Cell No. 4d. Fax No. 4e. e-Mail [redacted]

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filed in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my** [redacted]		Tel. No. [redacted]
By: [redacted]	[redacted] an individual	Office, if any, Cell No.
(sign[redacted]harge) [redacted]	Print Name and Title Date: 6-9-2013	Fax No. e-Mail

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

PRIVACY ACT STATEMENT

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2013 JUN 13 AM 10:12
PEORIA, IL

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-107241	6/14/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Double M Trucking		b. Tel. No. 815-223-1828 c. Cell No.
d. Address (street, city, state ZIP code) 2774 Rockwell Rd LaSalle, IL 61301	e. Employer Representative Michael Mrowicki	f. Fax No. 815-223-8013 g. e-Mail h. Dispute Location (City and State) LaSalle, IL
i. Type of Establishment (factory, nursing home, hotel) trucking	j. Principal Product or Service construction materials	k. Number of workers at dispute location 4

l. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On about [redacted] 2013, the Employer discriminated against employee [redacted] by constructively discharging [redacted] in order to discourage union activities or membership.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
[redacted]

4a. Address (street and number, city, state, and ZIP code) [redacted]	4b. Tel. No. [redacted] 4c. Cell No. [redacted] 4d. Fax No. 4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

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

By: X [redacted]	[redacted] an indivdual	Tel. No. [redacted] Office, if any, Cell No. [redacted]
(signat[redacted]arge) [redacted]	Print Name and Title Date: X 6/11/13	Fax No. e-Mail

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

PRIVACY ACT STATEMENT

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[redacted]

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SUBREGION 33
2013 JUN 14 AM 11:41
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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-107972	6/25/13

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer URS Corporation		b. Tel. No. (309)676-5062 c. Cell No
d. Address (street, city, state ZIP code) 411 Hamilton Blvd. Ste 1810, Peoria, IL 61602	e. Employer Representative Bill Scefelbein	f. Fax No g. e-Mail h. Dispute Location (City and State) Peoria, IL
i. Type of Establishment (factory, nursing home, hotel) Maintenance	j. Principal Product or Service Maintenance Services	k. Number of workers at dispute location 150

l. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On or about (b) (6), (b) (7)(C) 2013, the Employer suspended and then terminated me in retaliation for my protected concerted activity of expressing safety concerns on behalf of myself and other employees.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C) 4c. Cell No. 4d. Fax No 4e. e-Mail (b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

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

By (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) Individual	Tel. No. (b) (6), (b) (7)(C) Office, if any, Cell No.
(sig e) Address (b) (6), (b) (7)(C)	Print Name and Title Date. 6/25/2013	Fax No. e-Mail (b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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NLRB
SUBREGION 33
2013 JUN 25 PM 4:12
PEORIA, IL

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case	Date Filed
25-CA-108529	7/3/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Laborers International union Midwest Region Organizing Committee

b. Tel. No. 217-522-5158

c. Cell No.

f. Fax No. 217-522-5416

g. e-Mail

d. Address (Street, city, state, and ZIP code) 1 North Old State Capitol Plaza Suite 525 Springfield IL, 62701

e. Employer Representative David Penn

h. Number of workers employed 45

i. Type of Establishment (factory, mine, wholesaler, etc.) union organizers

j. Identify principal product or service union membership

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)

The above named employer [redacted] has violated my rights under sec 7 of the NLRD to discourage union activity and I was terminated.

3. Full name of party filing charge (if labor organization, give full name, including local name and number)

[redacted]

4a. Address (Street and number, city, state, and ZIP code)

[redacted]

4b. Tel. No.

4c. [redacted]

4d Fax No.

[redacted]

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)

6. DECLARATION

I d[redacted] statements are true to the best of my knowledge and belief.

By [redacted]

[redacted]

Office, if any, Cell No.

Fax No.

Address [redacted]

[redacted]

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

PRIVACY ACT STATEMENT

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FORM EXEMPT UNDER 44 U.S.C. 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE

Case: 25-CA-108532 | Date Filed: 7/3/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer: Laborers International Union
Midwest Region Organizing Committee

b. Tel. No.: 217-522-5158

c. Cell No.:

f. Fax No.: 217-522-5416

g. e-Mail:

h. Number of workers employed: 45

d. Address (Street, city, state, and ZIP code): 1 North Old State Capitol Plaza
Springfield IL, 62701 suite 545

e. Employer Representative: David Penn

i. Type of Establishment (factory, mine, wholesaler, etc.): union organizers

j. Identify principal product or service: union membership

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (first subsections) (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)

The above named employer [redacted] has violated my rights under sec 7 of the NLRB to discourage union activity and I was terminated.

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[redacted]

4a. [redacted]

4b. Tel. No.:

4c. Cell No.: [redacted]

4d. Fax No.:

[redacted]

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)

6. DECLARATION

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

By [redacted] (Signature of representative or person making charge) [redacted] (Print/type name and title or office, if any)

Address [redacted]

7/2/13 (date)

Tel. No.: [redacted]

Office, if any, Cell No.:

Fax No.:

e-Mail: [redacted]

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

PRIVACY ACT STATEMENT

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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-109084	7-15-13

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring

1 EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer GCA Services Group		b Tel No (630) 859-4064 c Cell No (630) 405-4008
d Address (street, city, state ZIP code) 325 Rte 31 South Montgomery, IL 60538	e Employer Representative Alvin Campbell Regional Manager	f Fax No (630) 859-3626 g e-Mail acampbell@gcaservices.com h Dispute Location (City and State) Mossville, Illinois
i Type of Establishment (factory, nursing home, hotel) Factory	j Principal Product or Service Janitorial Services	k Number of workers at dispute location 50

l The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On or about (b) (6), (b) (7)(C) 2013, the above-named Employer, through (b) (6), (b) (7)(C) at its facility located at 14009 Old Galena Road, Mossville, IL 61552, terminated its employee (b) (6), (b) (7)(C) because (b) (6) engaged in protected concerted activities.

3 Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b Tel No (b) (6), (b) (7)(C) 4c Cell No 4d Fax No 4e e-Mail (b) (6), (b) (7)(C)

5 Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6 DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel No (b) (6), (b) (7)(C)
By (b) (6), (b) (7)(C) (signature of representative or person making charge)	(b) (6), (b) (7)(C) Individual Print Name and Title	Office, if any, Cell No (b) (6), (b) (7)(C) Fax No
Address (b) (6), (b) (7)(C)	Date 7/15/13	e-Mail (b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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

2013 JUL 15 AM 10:58
PEORIA, IL
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SUBREGION 33
(b) (6), (b) (7)(C)

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-109230	7/16/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer KB Specialty Foods		b. Tel. No (812) 663-8184 c. Cell No
d. Address (street, city, state ZIP code) 1225 N. Broadway St, Greensburg, IN 47240	e. Employer Representative Nick Cortinello	f. Fax No. g. e-Mail h. Dispute Location (City and State) Greensburg, IN
i. Type of Establishment (factory, nursing home, hotel) Factory	j. Principal Product or Service Food Preparation	k. Number of workers at dispute location 300

l. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On or about [redacted] 2013, the Employer violated the National Labor Relations Act by issuing me a layoff in retaliation of my protected concerted activity of complaining about my working conditions.

3. Full name of party filing charge (*if labor organization give full name, including local name and number*)
[redacted]

4a. Address (street and number, city, state, and ZIP code) [redacted]	4b. Tel. No 4c. Cell No [redacted] 4d. Fax No 4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel. No.
By: [redacted]	[redacted] Individual	Office, if any, Cell No. [redacted]
(Signature of representative or person making charge) Address [redacted]	Print Name and Title Date 7·8·13	Fax No e-Mail

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

PRIVACY ACT STATEMENT

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NLRB REGION 25
2013 JUL 15 P 12:35

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-109414	7/18/13

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Steppo Supply & Construction		b. Tel. No. (708)889-0940 c. Cell No.
d. Address (street, city, state ZIP code) 3450 Ridge Rd, Lansing, IL 60438	e. Employer Representative Eileen Stepanovich, President	f. Fax No (708)889-0941 g. e-Mail h. Dispute Location (City and State) Indianapolis, IN
i. Type of Establishment (factory, nursing home, hotel) construction	j. Principal Product or Service heavy highway/tunneling	k. Number of workers at dispute location 1

l. The above-named employer has engaged in and is engaging unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On (b) (6), (b) (7)(C) 2013, Steppo Construction, the Employer, discriminated against employee (b) (6), (b) (7)(C) by terminating (b) (6), (b) because of (b) (6), union and protected concerted activity.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No 4c. Cell No (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION
I declare that I have read the above charge and that the statements are true to the best of

(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C) Print Name and Title	Tel. No (b) (6), (b) (7)(C) Office, if any, Cell No. Fax No.
Address: (b) (6), (b) (7)(C)	Date: 7-11-2013.	e-Mail (b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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NLRB REGION 25
2013 JUL 17 P 1:31

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-109501	07/19/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Allied OSI Labs

b. Tel. No. 317-293-4858

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
6299 Guion Rd.
Indianapolis, IN 46268

e. Employer Representative
Debbie Robertson

g. e-Mail
drobertson@aolabs.com

h. Number of workers employed
40

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
manufacturer

j. Identify principal product or service
custom orthotics

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* (a)(4) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
On about (b) (6), (b) (7)(C) 2013, the above-named Employer terminated the Charging Party because (b) (6) engaged in protected concerted activities and because (b) (6) provided testimony to the National Labor Relations Board.

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NLRB REGION 25
2013 JUL 18 P 12: 30

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No.

4c. Cell No. (b) (6), (b) (7)(C)

4d. Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C)
(Signature of representative or person making charge)

(b) (6), (b) (7)(C) an Individual
(Print/type name and title or office, if any)

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

07/16/2013
(date)

Tel. No.

Office, if any, Cell No.
(b) (6), (b) (7)(C)

Fax No.

e-Mail
(b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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ID # (b) (6), (b) (7)(C)

INSTRUCTIONS: ✓ 25-CA-111106 | 8/13/13

File an original together with four copies and a copy for each additional charged party named in item 1 with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Faurecia		b. Number of workers employed 1000
c. Address *(Street, city, state, and ZIP code)* 601 South Gladstone Ave.	d. Employer Representative Hyun Allister	e. Telephone No. ( ) - 812 348-4301 Fax No. ( ) -
f. Type of Establishment *(factory, mine, wholesaler, etc.)* Factory	g. Identify principal product or service Automotive Parts	

h. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* Article 4, section of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are unfair practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

[redacted] *(Forth a clear and concise statement of the facts constituting the alleged unfair labor practices)*

[redacted] asked me to go to 4410. I asked [redacted] why couldnt [redacted] could not do it. Since [redacted] was just standing the [redacted] told me to shut up and let [redacted] run [redacted] lines and is aid this is fucking bullshit and [redacted] started cursing at me as well I told [redacted] to leave me alone went to get my gloves [redacted] said lets go to the office.
I felt like I was being discriminated against.

3. Full name of party filing charge *(If labor organization, give full name, including local name and number)*

[redacted]

4b. Telephone No. [redacted]

[redacted]

Fax No. ( ) -

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

6. DECLARATION

[redacted] and that the statements are true to the best of my knowledge and belief.

By [redacted] [redacted]

Address [redacted] (fax) ( ) - ( ) - (Telephone No.) 8/12/13 (date)

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

PRIVACY ACT STATEMENT

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[redacted]

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-113468	9/16/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Memorial Medical Center

b. Tel. No. (217) 788-3000

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
701 N 1st St
Springfield, IL 62781

e. Employer Representative
Michelle Long

g. e-Mail

h. Number of workers employed
3500

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Hospital

j. Identify principal product or service
Medical Services

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
On about (b) (6), (b) (7)(C) 2013, the above-named Employer discriminated against the Charging Party for engaging in protected concerted activities by terminating (b) (6), (for discussing work conditions with employees.

RECEIVED NLRB SUBREGION 33 2013 SEP 16 P 4:57 PEORIA, IL

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No. (b) (6), (b) (7)(C)

4c. Cell No.

4d. Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C)
(Signature of representative or person making charge)

(b) (6), (b) (7)(C) An Individual
(Print/type name and title or office, if any)

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

9/15/2013
(date)

Tel. No. (b) (6), (b) (7)(C)

Office, if any, Cell No.

Fax No.

e-Mail
(b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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ID#: (b) (6), (b) (7)(C)

INTERNET
FORM NLRB-501
(2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U S C 3512

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-114087	10/18/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Windstar Lines, Inc.

b. Tel. No. (888)494-6378

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
1903 N. U.S. Highway 71
P.O. Box 786
Carroll, IA 51401

e. Employer Representative
Jeff Greteman, President

g. e-Mail

h. Number of workers employed PT
APPROX 175 WITH DRIVERS

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Transportation

j. Identify principal product or service
Bus Company

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* ______ of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

On or about [redacted] 2013, the above named Employer discharged [redacted] because of [redacted] engaged in protected concerted activity. [redacted]

I WAS FIRED BY [redacted] [redacted] + [redacted]

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NLRB
SUBREGION 33
2013 Oct 17 AM 10:
PEORIA, IL

3. [redacted] party filing charge *(if labor organization, give full name, including local name and number)*

4a. Address *(Street and number, city, state, and ZIP code)*
[redacted]

4b. Tel. No. [redacted]

4c. Cell No. [redacted]

4d. Fax No

4e. e-Mail
[redacted]

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By [redacted] [redacted]
(signature of representative or person making charge) *(Print/type name and title or office, if any)*

Tel. No. [redacted]

Office, if any, Cell No. [redacted]

Fax No.

e-Mail

Address [redacted] X 10-2-2013 *(date)*

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

PRIVACY ACT STATEMENT

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I.D. [redacted]

FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

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NLRB REGION 25

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-115540	10/24/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

2013 OCT 24 P 12: 28

a. Name of Employer
The Tech Group

b. Tel. No. (765) 654-5517
c. Cell No.
f. Fax No.
g. e-Mail

d. Address *(Street, city, state, and ZIP code)*
2810 W State Rod 28
Frankfort, IN 46041

e. Employer Representative
Alan Schoonveld,
General Manager

h. Number of workers employed
Abt. 200

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Factory

j. Identify principal product or service
Various injection mold products

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* _____ of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

On about (b) (6), (b) (7)(C) 2013, the above-named employer terminated its employee (b) (6), (b) (7)(C) because (b)(6) engaged in protected concerted activities, including postings (b)(6) made on Facebook.

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*

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

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No. (b) (6), (b) (7)(C)
4c. Cell No.
4d. Fax No.
4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C)
(signa[redacted]aking charge)

(b) (6), (b) (7)(C) an individual
(Print/type name and title or office, if any)

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

X 10-21-2013
(date)

Tel. No. (b) (6), (b) (7)(C)
Office, if any, Cell No.
Fax No.
e-Mail

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

PRIVACY ACT STATEMENT

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Inquiry ID (b) (6), (b) (7)(C)

FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

RECEIVED
NLRB REGION 25

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-116013	10/31/13

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

2013 OCT 28 P 12:41

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
REGENCY BEAUTY INSTITUTE

b. Tel. No. 574-254-0495

c. Cell No.

f. Fax No. 574-254-0552

g. e-Mail

h. Number of workers employed

d. Address *(Street, city, state, and ZIP code)*
8150 GRAPE RD STE A
MISHAWAKA, IN 46545

e. Employer Representative
C. RUSSELL, CM

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
COSMETOLOGY SCHOOL

j. Identify principal product or service
BEAUTY CULTURE

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

I feel discriminated against because [redacted] educators were allowed to do business operations and I was not. I feel discriminated against because I was misled and not coached by management and corporate. In addition the only formal write up was fabricated.

[redacted] local name and number)

4b. Tel. No.

[redacted]

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled organization)*

6. DECLARATION

I [redacted] tements are true to the best of my knowledge and belief.

Tel. No. [redacted]

By [redacted]

Office, if any, Cell No.

Fax No.

Address [redacted] 10/22/13 *(date)*

WIL[redacted] MPRISONMENT (U.S[redacted]

PRIVACY ACT STATEMENT

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[redacted]

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET
FORM NLRB-501
(2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-116155	11/1/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Columbus Regional Hospital

b. Tel. No. (812) 379-4441

c. Cell No.

f. Fax No.

d. Address *(Street, city, state, and ZIP code)*
2400 East 17th Street
Columbus, IN 47201

e. Employer Representative
Jim Bickel, CEO

g. e-Mail

h. Number of workers employed

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Hospital

j. Identify principal product or service
Medical Care/Ambulance Serivic

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

There is a difference in the level of care provided by the older medics as compared to the younger medics. I and others have brought this to management's attention by the (b) (6), (b) (7)(C) and myself.

I was vocal about the leadership of the paramedics and other problems, working conditions and job-related problems and the need to fix those problems that affected not only myself, but other paramedics and the work environment as a whole. I believe that this activity is protected under Section 8 (a) (1) of the National Labor Relations Act. I believe I was severely disciplined for this activity in violation of protected rights under the National Labor Relations Act. As a result of the discipline, I have suffered substantial financial loss. I believe the severe discipline and subsequent significant financial loss was implemented in an attempt to keep me from speaking out against engage in protected concerted activity.

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No. (b) (6), (b) (7)(C)

4c. Cell No.

4d. Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

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

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

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

10-22-13
(date)

Tel. No. (b) (6), (b) (7)(C)

Office, if any, Cell No.

Fax No.

e-Mail

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NLRB REGION 25
OCT 31 P 2: 16

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

PRIVACY ACT STATEMENT

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

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD

CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-116640	November 8, 2013

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring

1 EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Dabco Logistics d/b/a Bolin Trucking		b Tel No (309) 392-2197 c Cell No. (309) 840-4520
d Address (street, city, state ZIP code) 850 W. Birchwood St Morton, IL 61550	e Employer Representative Ron Bolin Safety Director	f Fax No (309) 392-2923 g e-Mail bolinfax@gmail.com h Dispute Location (City and State) , Morton, IL
i Type of Establishment (factory, nursing home, hotel) Trucking business	j Principal Product or Service Transportation of freight	k Number of workers at dispute location 20

l The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

During the past six months, the above-named Employer has ignored me and subjected me to verbal abuse because of my protected concerted activities, including making complaints about the workplace.

On about [redacted] 2013, the Employer suspended me for one week because of my protected concerted activities.

3 Full name of party filing charge (*if labor organization, give full name, including local name and number*)
[redacted]

4a Address (street and number, city, state, and ZIP code) [redacted]	b Tel No [redacted] 4c Cell No [redacted] 4d Fax No 4e e-Mail [redacted]

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NLRB
SUBREGION
2013 NOV -8 PM 07
PEORIA, IL

5 Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6 DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel No [redacted]
B[redacted]	[redacted] Individual	Office, if any, Cell No [redacted]
(signature of representative or person making charge)	Print Name and Title	Fax No
Address [redacted]	Date 11-8-13	e-Mail [redacted]

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

PRIVACY ACT STATEMENT

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INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

FORM EXEMPT UNDER 44 U.S.C 3512

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-116920	11/14/13

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NLRB REGION 25
2013 NOV 12 P 12: 25

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Walmart

b. Tel. No.
765-677-7002

c. Cell No.

f. Fax No.

g. e-Mail

h. Number of workers employed
200 +

d. Address *(Street, city, state, and ZIP code)*
100 Fischer Pkwy.
Gas City, IN 46933

e. Employer Representative
Scott Murphy

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
distribution center

j. Identify principal product or service
Frozen food

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* _____ of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
Employee handbook not readily available to employees, did not follow own rules in the removal of an employee, employee participated in activity to improve working conditions.

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
(b) (6), (b) (7)(C)

4a. Address *(Street and number, city, state, and ZIP code)*
(b) (6), (b) (7)(C)

4b. Tel. No.

4c. Cell No. (b) (6), (b) (7)(C)

4d. Fax No.

4e. e-Mail
(b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)*

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

By (b) (6), (b) (7)(C) (s[redacted]e or person making charge) (b) (6), (b) (7)(C) (Print/type name and title or office, if any)

Address (b) (6), (b) (7)(C) 11/7/13 (date)

Tel. No.

Office, if any, Cell No.

Fax No.

e-Mail

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

PRIVACY ACT STATEMENT

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)

FORM EXEMPT UNDER 44 U S C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case 25-CA-116980	Date Filed 11/14/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Alcoa, Inc.

b. Tel. No. 563-459-2201
c. Cell No.
f. Fax No.
g. e-Mail
h. Number of workers employed 2300

d. Address *(Street, city, state, and ZIP code)*
4879 State Street
Bettendorf, IA 52722

e. Employer Representative
Rob Woodall

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Manufacturing

j. Identify principal product or service
Aluminum

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* subsection (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*
On [redacted]/13 Union [redacted], [redacted] was given discipline for "professional behavior" for the use of vulgar language during the execution of [redacted] union duties.

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PEORIA, IL

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
International Brotherhood of Electrical Workers, Local 1379

4a. Address *(Street and number, city, state, and ZIP code)*
P.O. Box 772
Bettendorf, IA 52722

4b. Tel. No. 309-235-3120
4c. Cell No 563-484-9079
4d. Fax No.
4e. e-Mail
pres.ibew1379@att.net

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)* International Brotherhood of Electrical Workers

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

By _____ Duane Smith/President-Business Mgr
(signature of representative or person making charge) *(Print/type name and title or office, if any)*

Address 818 17th Avenue, East Moline, IL 61244 11/13/13 *(date)*

Tel No. 309-235-3120
Office, if any, Cell No. 563-484-9079
Fax No
e-Mail pres.ibew1379@att.net

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

PRIVACY ACT STATEMENT

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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-117047	11/15/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer TITAN TIRE CORPORATION OF FREEPORT		b. Tel. No (815)235-4185
		c. Cell No.
d. Address (street, city, state ZIP code) 3769 Us Highway 20 E, Freeport, IL 61032-9653	e. Employer Representative Steve Strauss	f. Fax No.
		g. e-Mail
		h. Dispute Location (City and State) Freeport, IL
i. Type of Establishment (factory, nursing home, hotel) Factory	j. Principal Product or Service Tires	k. Number of workers at dispute location

l. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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 September 17, 2013, the Employer has interfered with, restrained, and coerced its employees by ending superseniority through a mid-term modification to the collective-bargaining agreement.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No. (b) (6), (b) (7)(C)
	4c. Cell No.
	4d. Fax No.
	4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**	Tel. No (815)275-2697
By: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	Office, if any, Cell No.
(signature of representative or person making charge) Print name and title	Fax No
Address: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) Date: 11-11-13	e-Mail (b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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

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FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET FORM NLRB-501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-117465	11/20/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer
Hawkeye Paving Corporation

b. Tel. No. 563-355-6834

c. Cell No.

f. Fax No. 563-359-6266

d. Address *(Street, city, state, and ZIP code)*
801 42nd Street
Bettendorff, IA 52722

e. Employer Representative
Glen Perkins, President

g. e-Mail

h. Number of workers employed
126

i. Type of Establishment *(factory, mine, wholesaler, etc.)*
Construction

j. Identify principal product or service
Paving

k. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and *(list subsections)* (3) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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)*

On (b) (6), (b) (7)(C) 2013, the Employer laid off (b) (6), (b) (7)(C) and (b) (6), (b) (7)(C) because of their support for Local 150 and in violation of the Act. On June 15, 2013, and at various times thereafter, the Employer's (b) (6), (b) (7)(C) interrogated (b) (6), (b) (7) (b) (6), (b) (7)(C) concerning the Union's organizing drive in violation of the Act. At various times, the Employer has retaliated against (b) (6), (b) (7)(C) and (b) (6), (b) (7) and discriminated against them in violation of the Act.

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SUBREGION 33
2013 NOV 20 AM 7:02
PEORIA, IL

3. Full name of party filing charge *(if labor organization, give full name, including local name and number)*
International Union of Operating Engineers, Local 150, AFL-CIO

4a. Address *(Street and number, city, state, and ZIP code)*
6200 Joliet Road
Countryside, IL 60525

4b. Tel. No. 708-482-6800

4c. Cell No.

4d. Fax No. 708-482-7186

4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit *(to be filled in when charge is filed by a labor organization)* International Union of Operating Engineers, AFL-CIO

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

By [signature] *(signature of representative or person making charge)*

Steven A. Davidson, Attorney *(Print/type name and title or office, if any)*

Address 6140 Joliet Road Countryside, IL 60525

11/20/2013 *(date)*

Tel. No 708-579-6663

Office, if any, Cell No.

Fax No 708-588-1647

e-Mail

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

PRIVACY ACT STATEMENT

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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-117952	11/27/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer OSF St. James Medical Center		b. Tel. No (815)842-2828 c. Cell No.
d. Address (street, city, state ZIP code) 2500 W Reynolds, Pontiac, IL 61764	e. Employer Representative Ken Buetke	f. Fax No. g. e-Mail h. Dispute Location (City and State) Pontiac, IL
i. Type of Establishment (factory, nursing home, hotel) hospital	j. Principal Product or Service health care	k. Number of workers at dispute location 300

l. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On (b) (6), (b) (7)(C) 2013, the Employer discriminated against employee (b) (6), (b) (7)(C) by disciplining (b) (6), (b) and giving (b) (6), (b) a decision making leave for engaging in protected concerted activities.

On (b) (6), (b) (7)(C) 2013, the Employer discriminated against employee (b) (6), (b) (7)(C) by discharging (b) (6), (b) for engaging in protected concerted activities.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C) an Individual

4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No. 4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No 4e. e-Mail (b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel. No.
By: X (b) (6), (b) (7)(C) (signature of representative or person making charge)	(b) (6), (b) (7)(C) an individual Print Name and Title	Office, if any, Cell No. (b) (6), (b) (7)(C) Fax No.
Address: (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)	Date: X 11/25/2013	e-Mail (b) (6), (b) (7)(C)

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

PRIVACY ACT STATEMENT

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

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REGION 33
2013 NOV 27 AM 10: 30
PEORIA, IL

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-118597	12/9/13

File an original of this charge with NLRB Regional Director in which the alleged unfair labor practice occurred or is occurring

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer UNITED STATES POSTAL SERVICE		b. Tel. No. (309)671-8822 c. Cell No.
d. Address (street, city, state ZIP code) 95 State St, Peoria, IL 61601	e. Employer Representative Daryl Ashbacher	f. Fax No (309)674-8983 g. e-Mail h. Dispute Location (City and State) Peoria, IL
i. Type of Establishment (factory, nursing home, hotel) Postal Service	j. Principal Product or Service U.S. Mail	k. Number of workers at dispute location 200

l. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On or about (b) (6), (b) (7)(C) 2013, the Employer terminated me in retaliation for my protected activity of filing grievances.

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C)

4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b. Tel. No. 4c. Cell No. (b) (6), (b) (7)(C) 4d. Fax No 4e. e-Mail

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel. No
By: (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Office, if any, Cell No. (b) (6), (b) (7)(C)
(sig[redacted]harge) Address: (b) (6), (b) (7)(C)	Print Name and Title Date: 12-9-13	Fax No. e-Mail

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

PRIVACY ACT STATEMENT

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2013 DEC -9 PM 2:35
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(b) (6), (b) (7)(C)
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REGION 33

Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-118988	12/16/13

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

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a Name of Employer WINDSTAR LINES, INC.		b Tel No. (888)494-6378 c Cell No
d Address (street, city, state ZIP code) ~~1905N US HIGHWAY 71 PO BOX 780 CARROLL IA 51401~~ 10608 JKT CENTER DR DUBUQUE IA 52003	e. Employer Representative ~~JEFF ORSTEMAN~~ BRENDA SCHUMACHER	f. Fax No g e-Mail h. Dispute Location (City and State) ~~Carroll IA~~ DUBUQUE, IA
i Type of Establishment (factory, nursing home, hotel) Transportation	j Principal Product or Service Bus	k Number of workers at dispute location 175

l The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

On or about [redacted] 2013, the above named Employer discharged [redacted] because [redacted] engaged in protected concerted activity of discussing waged with employees.

3 Full name of party filing charge (*if labor organization, give full name, including local name and number*)
[redacted]

4a Address (street and number, city, state, and ZIP code) [redacted]	4b Tel No. [redacted] 4c Cell No. [redacted] 4d. Fax No. 4e e-Mail [redacted]

5 Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6 DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.**		Tel No [redacted]
By [redacted]	[redacted] an individual	Office, if any, Cell No [redacted]
(signature of representative or person making charge) Address [redacted]	Print Name and Title Date 12-12-2013 [redacted]	Fax No e-Mail [redacted]

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

PRIVACY ACT STATEMENT

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

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Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-CA-119517	12/23/13

RECEIVED NLRB REGION 25

INSTRUCTIONS:

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

2013 DEC 20 P 12:51

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer Cracker Barrel		b. Tel. No (317)398-0385 c. Cell No. (502)797-3946
d. Address (street, city, state ZIP code) 1898 Morristown Rd., Shelbyville, IN 46176	e. Employer Representative Doug Heisel, District Manager	f. Fax No. (317)398-1394 g. e-Mail h. Dispute Location (City and State) Shelbyville, IN
i. Type of Establishment (factory, nursing home, hotel) Restaurant	j. Principal Product or Service Food service	k. Number of workers at dispute location 107

l. The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices 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*)

During the last six months , the Employer has interfered with, restrained, and coerced its employees by promulgating and maintaining a rule prohibiting employees from fraternizing with each other.
On (b) (6), (b) (7)(C) 2013, the Employer interfered with, restrained, and coerced its employee (b) (6), (b) (7)(C) by terminating [redacted] for discussing [redacted] wages, hours, and/or other terms and conditions of employment with other employees. for commenting on facebook

3. Full name of party filing charge (*if labor organization, give full name, including local name and number*)
(b) (6), (b) (7)(C) an individual

4a. Address (street and number, city, state, and ZIP code) (b) (6), (b) (7)(C)	4b Tel No. 4c Cell No. (b) (6), (b) (7)(C) 4d. Fax No. 4e. e-Mail (b) (6), (b) (7)(C)

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (*to be filled in when charge is filed by a labor organization*)

6. DECLARATION **I declare that I have read the above charge and that the statements are true to the best of my kno**[redacted]	Tel. No.
By: X [redacted] (b) (6), (b) (7)(C) an individual	Office, if any, Cell No. (b) (6), (b) (7)(C)
(signatu[redacted]harge) Address: (b) (6), (b) (7)(C) [redacted]	Print Name and Title Date: X 12.5.13
	Fax No. e-Mail (b) (6), (b) (7)(C)

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

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