

FORM EXEMPT UNDER 44 U.S.C 3512

INTERNET  
FORM NLRB-601  
(2-08)

UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case <b>14-CA-29544</b>	Date Filed <b>10/16/08</b>

**INSTRUCTIONS:**

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

**1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT**

a. Name of Employer <b>Service Employee International Union</b>		b. Tel. No. <b>314-533-3633</b>
		c. Cell No.
		f. Fax No. <b>314-533-1805</b>
d. Address (Street, city, state, and ZIP code) <b>5585 Pershing Ave. St. Louis, MO 63112</b>		g. e-Mail
e. Employer Representative <b>Barbara Black, President</b>		h. Number of workers employed <b>12</b>
i. Type of Establishment (factory, mine, wholesaler, etc.)	j. Identify principal product or service	

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) **8a(1) and 8a (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 **Barbara Black, (President)** by its representative since July 2008 has continuously harassed me, has continuously made false accusations against me and maliciously threaten to terminate me because of my Union activity, also announcing to other collective bargain members that she is going to terminate me.

RECEIVED  
REGION 14  
OCT 15 P 1:24  
ST. LOUIS MO 63103

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

**Pamela Bryant, SEIU Local 2000**

4a. Address (Street and number, city, state, and ZIP code)  
**5585 Pershing Ave.  
St. Louis, MO 63112**

4b. Tel. No. **314-533-3633**  
4c. Cell No.  
4d. Fax No. **314-533-1805**  
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   
(Signature of representative or person making charge)

**Pamela Bryant, Union Representative**  
(Printtype name and title or office, if any)

Tel. No. **314-910-3720**  
Office, if any, Cell No.  
Fax No. **314-533-1805**  
e-Mail

Address **5585 Pershing Ave.**

(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.