

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

DO NOT WRITE IN THIS SPACE	
Case 20-CB-12302	Date Filed 11/17/2004

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

1. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT		
a. Name California Nurses Association		b. Union Representative to contact Vicky Carson
c. Telephone No. (510)273-2200	d. Address (street, city, state and ZIP code) 2000 Franklin Street, Suite 300, Oakland, CA 94612	
e. The above-named organization(s) or its agents has (have) engaged in and is (are) engaging in unfair labor practices within the meaning of section 5(b), subsection(s) (list subsections) <u>1(A)</u> of the National Labor Relations Act, and these unfair labor practices are unfair practices affecting commerce within the meaning of the 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 labor organization failed and refused to fairly represent Registered Nurse Francesca Gasaway by refusing to respond to her requests for information pertaining to her right to appeal a decision by CNA not to arbitrate her grievances against her former employer. As part of an ongoing pattern, CNA has also refused, despite multiple requests, to provide any documentation (such as constitution and by-laws) that describe Ms. Gasaway's rights and to provide a copy of any file CNA has maintained in this matter. These actions are based on arbitrary, capricious, unfair and otherwise unlawful reasons in violation of the rights guaranteed in Section 7 of the Act.		
3. Name of Employer Mills-Peninsula Health Services (Peninsula Hospital)		4. Telephone No. (650) 696-5400
5. Location of plant involved (street, city, state and ZIP code) 1783 El Camino Real, Burlingame, CA 94010		6. Employer representative to contact Judy DiPaolo
7. Type of establishment (factory, mine, wholesaler, etc.) Hospital	8. Identify principal product or service	9. Number of workers employed
10. Full name of party filing charge Francesca Gasaway		
11. Address of party filing charge (street, city, state and ZIP code) 20 Erin Lane, Half Moon Bay, CA 94019		12. Telephone No. (650) 712-8331
13. DECLARATION I declare that I have read the above charge and that the statements therein are true to the best of my knowledge and belief. By <u>Francesca Gasaway RN</u> An Individual (signature of representative or person making charge) (title or office, if any) Address <u>20 Erin Lane, Half Moon Bay, CA 94019</u> (650) 712-8331 <u>11/15/04</u> (Telephone No.) (date)		

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