

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

DO NOT WRITE IN THIS SPACE

Case
20-CB-12442

Date Filed
1/7/18/2005

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. LABOR ORGANIZATION OR ITS AGENTS AGAINST WHICH CHARGE IS BROUGHT

a. Name California Nurses Association		b. Union Representative to contact Corinne Comer	
c. Telephone No. (510)273-2200 Fax No. (510)663-5712	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 8(b), subsection(s) (list subsections) (1)(A) 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)
The above named labor organization refused to allow employees to vote on a new contract because it feared that the employees would vote to approve it.

3. Name of Employer Mills Peninsula Hospital		4. Telephone No. (650)696-5400 Fax No. () -	
5. Location of plant involved (street, city, state and ZIP code) 1728 El Camino Real Burlingame CA 94010		6. Employer representative to contact Debbie Goodin	
7. Type of establishment (factory, mine, wholesaler, etc.) hospital	B. Identify principal product or service Health Care	9. Number of workers employed 900	
10. Full name of party filing charge Mildred Runjavac			
11. Address of party filing charge (street, city, state and ZIP code.) 1124 Drake Avenue Burlingame CA 94010		12. Telephone No. (650)696-5592 Fax No. () -	

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 Mildred Runjavac Mildred Runjavac An Individual
(signature of representative or person making charge) (Print/type name and title or office, if any)
1124 Drake Avenue (Fax) () -
Address Burlingame CA 94010 (650)696-5592 7/14/2005
(Telephone No.) (date)