

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

DO NOT WRITE IN THIS SPACE	
Case 31-CB-11494-1	Date Filed March 5, 2004

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 Assoc.		b. Union Representative to contact Jill Furillo	
c. Telephone No. (818)240-1900 Fax No. (818)240-8336	d. Address (Street, city, state, and ZIP code) 425 West Broadway, Suite 111 Glendale CA 91204		

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)

Within the last six (6) months, the above named labor organization, by and through its officers, agents and representatives has violated the Act, specifically its duty of fair representation to the undersigned, by withdrawing pending grievances pertaining to discipline imposed by the Employer.

3. Name of Employer Henry Mayo Newhall Memorial Hospital		4. Telephone No. (661)253-8370	
		Fax No. () -	
5. Location of plant involved (street, city, state and ZIP code) 23845 McBean Pkwy Valencia CA 91355		6. Employer representative to contact Mark Pulco	
7. Type of establishment (factory, mine, wholesaler, etc.) Hospital	8. Identify principal product or service Healthcare	9. Number of workers employed 1100	

10. Full name of party filing charge Tami Gurnett		12. Telephone No. (661)251-0642	
11. Address of party filing charge (street, city, state and ZIP code.) 15626 Poppyseed Lane Canvon Country CA 91387		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 Tami Gurnett Tami Gurnett An Individual
(signature of representative or person making charge)

15626 Poppyseed Lane (Print/type name and title or office, if any)

Address Canvon Country CA 91387 (Fax) () -
(661)251-0642 (Telephone No.) 3/6/04 (date)