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FORM NLRB-508

FORM EXEMPT UNDER 44 U.S.C. § 3512

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

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
31-CB-11889	10-26-2005

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 Attn: Jane Lawhon, Esq.
c. Telephone No. (510) 793-2200	d. Address (street, city, state and ZIP code) 2000 Franklin Street, 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) (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 past six (6) months, the above-named labor organization, through its officers and agents, has violated Section 8(b)(1)(A) of the Act by negotiating a collective bargaining agreement with the Employer prior to the Union being certified as the collective bargaining representative.	
By this and other acts, the above named employer has interfered with, and coerced employees in the exercise of the rights guaranteed in Section 7 of the Act.	
3. Name of Employer Catholic Healthcare West	4. Telephone No. (415) 438-5706
5. Location of plant involved (street, city, state and ZIP code) 185 Bay Street, Suite 300, San Francisco, CA 94107	6. Employer representative to contact Lloyd Dean
7. Type of establishment (factory, mine, wholesaler, etc.) Hospital Administration	8. Identify principal product or service Healthcare
9. Number of workers employed 350+	10. Full name of party filing charge Jamie Pair
11. Address of party filing charge (street, city, state and ZIP code) 6318 Cupertino Ct., Bakersfield, CA 93313	12. Telephone No. (661) 831-8774
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 Signature <i>Jamie Pair</i> Typed or printed name: Jamie Pair Address 6318 Cupertino Ct., Bakersfield, CA 93313	Title Individual Telephone No. (661) 831-8774 Date 10/26/05

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

T.W.