Form NLRB - 501 (2-08)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

INSTRUCTIONS:

DO NOT WRITE IN THIS SPACE Date Filed Case 19-CA-204276 8-10-2017

File an original of this charge with NLRB Regional	Director in which the alleged unfair labor practice of	curred or is occurring.
a. Name of Employer Pacific Maritime Association		b. Tel. No. 206-352-3746
		c. Cell No.
d. Address (street, city, state ZIP code) 301 West Republican, Seattle WA 98119	e. Employer Representative	f, Fax No.
	Doug Stern	g. e-Mail
		h. Dispute Location (City and State) Seattle, Washington
Type of Establishment (factory, nursing home, hotel)	J. Principal Product or Service	k, Number of workers at dispute location
Stevedoring Employer	Stevedoring	200+
National Labor Relations Act, and these unfair tab	d is engaging in unfair labor practices within the mer for practices are practices affecting commerce within within the meaning of the Act and the Postal Reorg ise statement of the facts constituting the alleged un-	anization Act.
of rights protected by Section 7 of the Martinez because Karey Martinez eng 3. Full name of party filing charge (if labor organize)	loyer has interfered with, restrained, and of Act by allowing dispatcher Greg Anthony paged in protected activities. Pation, give full name, including local name and numerical series.	to moster and assault hairy
Jim Tessier 4a. Address (street and number, city, state, and ZIP code)		4b. Tel. No. 206-351-2742
		4c. Cell No. 206-351-2742
		4d. Fax No.
		4e. e-Mell laborrelations@comcast.net
5. Full name of national or international labor organization)	anization of which it is an affiliate or constituent unit	(to be tilled in when charge is filed by a labor
DECLARATION I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		Tel. No. 206-351-2742
Tiant	Jim Tessier, Labor Consultan	Office, If any, Cell No. 208-351-2742
(signature of representative or person making	charge) Print Name and Title	Fax No.
Address:	Date: 8/16/2017	a-Mail

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 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 docline to invoke its processes.