

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer National Audubon Society		b. Tel. No. 212-979-3196
		c. Cell No.
		f. Fax No.
d. Address (Street, city, state, and ZIP code) 225 Varick St New York, NY 10014	e. Employer Representative Jean-Jacques "JJ" Blitstein, Director of Labor Relations	g. e-mail jj.blitstein@audubon.org
		h. Number of workers employed 500

i. Type of Establishment (factory, mine, wholesaler, etc.) Non-profit	j. Identify principal product or service Environmental Non-Profit
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The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (list subsections) 3, 5 of the National Labor Relations Act, and these unfair labor practices are practices affecting commerce within the meaning of the Act, or these unfair labor practices are practices affecting commerce within the meaning of the Act and the Postal Reorganization Act.

2. Basis of the Charge (set forth a clear and concise statement of the facts constituting the alleged unfair labor practices)

The Employer through its agents, officers and/or representatives has violated the Act by unilaterally changing terms and conditions of employment regarding health care benefits to undermine the Union's role as exclusive representative of the bargaining unit.

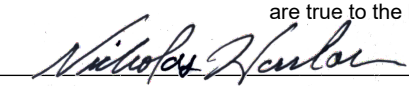
3. Full name of party filing charge (if labor organization, give full name, including local name and number)

Communications Workers of America, AFL-CIO

4a. Address (Street and number, city, state, and ZIP code) 80 Pine Street 37th FL New York, NY 10005	4b. Tel. No. 212-344-7332
	4c. Cell No.
	4d. Fax No.
	4e. e-mail LBenitez@cwa-union.org

5. Full name of national or international labor organization of which it is an affiliate or constituent unit (to be filled in when charge is filed by a labor organization)

Same - charging party is the international union

6. DECLARATION		Tel. No.
I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.		Office, if any, Cell No. 646-319-8375
 (signature of representative or person making charge)	Nick Hanlon, District Counsel (Print/type name and title or office, if any)	Fax No.
80 Pine Street, 37th Floor, New York, NY 10005 Address _____	Date 11/18/2022 _____	e-mail nhanlon@cwa-union.org

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 is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for 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 may cause the NLRB to decline to invoke its processes.