



COMMONWEALTH OF MASSACHUSETTS
DEPARTMENT OF LABOR RELATIONS
CHARGE OF PROHIBITED PRACTICE
M.G.L. c.150E

DO NOT WRITE IN THIS SPACE

Case No.

Date Filed

MUP-14-3800 06-26-14

INSTRUCTIONS: Answer all applicable questions. Failing to provide information may result in the dismissal of the charge.

Note: Pursuant to 456 CMR 15.04, the DLR will not issue a complaint unless the charging party has complied with the applicable provisions of M.G.L. c.150E, §§13 and 14.

1. Employer Town of Winthrop	2. Representative to contact James McKenna	4. Telephone Number 617-846-1078
3. Address (street and No., city/town, state, and ZIP code) 1 Metcalf Square, Winthrop, MA 02152		5. Fax Number 617-846-5458
6. Employee Organization (if any): Teamsters Local Union No. 25	7. Representative to contact John A. Murphy	9. Telephone Number 617-241-8825
8. Address (street and No., city/town, state, and ZIP code) 544 Main Street, Boston, MA 02129		10. Fax Number 617-242-4284

11. This charge is filed against (check one)

☒ Employer ☐ Employee Organization

12. The above named employer or employee organization has engaged or is engaging in a prohibited practice within the meaning of Massachusetts General Law, Chapter 150E, Section(s) (enter all appropriate sections/subsections)

Subsections 6 and 10

Failing to specify an appropriate section/subsection may result in the dismissal of the charge.

13. Summary of basis of Charge (be specific as to names, dates, addresses, etc.)

On or about Monday, June 23, 2014, the above mentioned Employer refused to bargain with the Union.

DLR JUN 26 '14 PM 1:06

By these and other acts, the party complained of has interfered with, restrained, and/or coerced rights guaranteed by the Law.

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Revised 08/13

14. (a) Is there a collective bargaining agreement that may apply to the conduct that is alleged to have violated the Law? ☒ Yes ☐ No

(b) If you checked "Yes" in question 14(a), please list all of the clauses alleged to apply and attach a copy of each.

(c) Is there a grievance concerning this matter pending? ☐ Yes ☒ No

15. Without limiting your rights to later amend your remedial request, please explain what remedy you seek. Include the amount of any financial remedy to which you claim entitlement.

Require Employer to bargain in good faith with union.

16. Have you attempted to settle this case? ☒ Yes ☐ No
If not, why not?

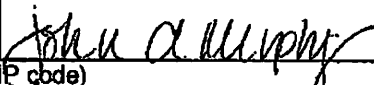
Note: The DLR may decline to issue a complaint unless reasonable settlement efforts have been made by the charging party. 468 CMR 15.04(1).

INFORMATION ON CHARGING PARTY

17. Name Teamsters Local Union No. 25	18. Representative to contact John A. Murphy	20. Telephone Number 617-241-8825
19. Address (street and No., city/town, state, and ZIP code) 544 Main Street, Boston, MA 02129		21. Fax Number 617-242-4284
22. The Charging Party is an: ☐ Individual ☒ Employee Organization ☐ Employer		

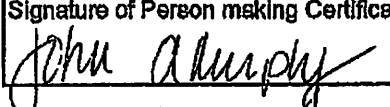
DECLARATION

I have read the above charge of prohibited practice and swear under the pains and penalties of perjury that the information contained in it is true and complete to the best of my knowledge and belief.

Name (print) John A. Murphy	Signature 	Title (if any) Business Agent
Address (street and no., city/town, state, and ZIP code) 544 Main Street, Boston, MA 02129		Telephone Number 617-241-8825

CERTIFICATE OF SERVICE

I hereby certify that I have served a copy of this Charge of Prohibited Practice on the following representative of the opposing party.

Name John A. Murphy	Address (street and no., city/town, state, and ZIP code) 544 Main Street, Boston, MA 02129	Telephone Number 617-241-8825
Method of Service ☐ In hand ☒ First Class Mail ☒ Other (specify): <u>email</u>		
Signature of Person making Certification 		Telephone Number 617-241-8825