

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case 13-CA-354179	Date Filed 11/5/2024

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 Advocate Health & Hospitals Corporation d/b/a Good Samaritan Hospital		b. Tel. No. 914.474.3417
		c. Cell No. 914.474.3417
		f. Fax No.
d. Address (Street, city, state, and ZIP code) 3815 Highland Avenue Downers Grove, Illinois 60515	e. Employer Representative Nile Miller	g. e-mail Nile.miller@aah.org
		h. Number of workers employed 40,000
i. Type of Establishment (factory, mine, wholesaler, etc.) Hospital	j. Identify principal product or service Acute Medical Care	

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) 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)

For the past six months, the employer, through its supervisory, agents or others has interfered with employees rights by interrogating employees and by constructively discharging an employee for engaging in union activity and supporting employees rights to organize.

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

International Union of Operating Engineers, Local 399

4a. Address (Street and number, city, state, and ZIP code) 2260 South Grove Street Chicago, Illinois 60616	4b. Tel. No. 312.372.9870
	4c. Cell No.
	4d. Fax No. 312.842.1565
	4e. e-mail Vcolvett@iuoe399.com

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)

International Union of Operating Engineers

6. DECLARATION

I declare that I have read the above charge and that the statements are true to the best of my knowledge and belief.

s/ Valerie J. Colvett

Director - Legal Department

(signature of representative or person making charge)

(Printtype name and title or office, if any)

Address 2260 South Grove Street Chicago, Illinois 60616

Date 11/5/2024

Tel. No.
312.372.9870

Office, if any, Cell No.

Fax No.
312.842.1565

e-mail
Vcolvett@iuoe399.com

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.