

FORM NLRB-501
(9-07)UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER**DO NOT WRITE IN THIS SPACE**

Case

Date Filed

INSTRUCTIONS:

File an original together with four copies and a copy for each additional charged party named in item 1 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 General Die Casters, Inc.	b. Number of workers employed 123	
c. Address (street, city, state, ZIP code) 2150 Highland Rd., Twinsburg, Ohio 44087	d. Employer Representative Ronald Mason	e. Telephone No. (614) 734-9450 Fax No.
f. Type of Establishment (factory, mine, wholesaler, etc.) Factory	g. Identify principal product or service Die Casts	
h. 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) <u>8(a)(5)</u> 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 unfair 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)		
<p>Since on or about October, 2008, the above-named Employer has failed and refused to bargain collectively and in good faith with the Union by engaging in surface bargaining. Specifically, the Employer has failed and/or refused to send a negotiating committee prepared to meet and negotiate on all mandatory subjects of bargaining. Lastly, the Employer has failed and/or refused to bargain at times that permitted bargaining unit members to participate in negotiations.</p> <p>Therefore, since October, 2008, the Employer has interfered with, coerced or restrained its employees in the exercise of the rights guaranteed in Section 7 of the Act.</p>		
3. Full name of party filing charge (if labor organization, give full name, including local name and number) Teamsters Local No. 24		
4a. Address (street and number, city, state, and ZIP code) 727 Grant Street, Akron, Ohio 44311	4b. Telephone No. (330) 434-8126 Fax No.	
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 Brotherhood of Teamsters		
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.		
By <u>Brian Smith</u> Brian Smith	(fax) <u>216 447-9296</u>	Attorney <u>3-9-2009</u> (Print/type name and title or office, if any) (date)
Address <u>4807 Rockside Rd., Ste. 260, Independence, Ohio 44131</u>	<u>(216) 867-0246</u> (Telephone No.)	

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 litigations. 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 will cause the NLRB to decline to invoke its processes.