

**GOVERNMENT OF THE VIRGIN ISLANDS
PUBLIC EMPLOYEES RELATIONS BOARD**

CHARGE OF UNFAIR LABOR PRACTICE

INSTRUCTIONS: File an original and 4 copies of this charge with the PERB. Simultaneously with filing the charge, serve a copy of the charge on each known interested party by delivering or mailing it to that party.

DO NOT WRITE IN THIS SPACE

CASE NO.

DATE FILED

1. PARTY AGAINST WHOM CHARGE IS BROUGHT

a. Name of employer, employee, or employee organization against whom charge is brought.

b. Address of party being charged.

c. If employer or employee organization, name or representative.

d. Phone

2. PARTY FILING CHARGE

a. Full name of individual, employer, employee, or employee organization filing charge.

b. Official position, if any.

c. Phone

d. Address

e. If employer or employee organization, name or representative.

3. BASIS OF CHARGE

a. The party named in part 1, above has engaged in and/or is engaging in unfair labor practices with the meaning of Section 378 _____ of the Public Employees Relations Act, 24 V.I.C. ss 361 et seq. (identify the subsection alleged to be violated).

b. State the facts on which this charge is based. (Be specific as to facts, names, addresses, dates, places, etc.)

(Continue on next page)

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(continue on next page)

c. State the relief sought

4. DECLARATION

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

By _____ Title if any
(Signature of representative or person filing charge)

_____ Address _____ Phone _____ Date

5. CERTIFICATION OF SERVICE

I certify that on this date, I did cause a copy of this charge to be served upon all interested parties by

() mailing () delivering a copy to: _____

_____ (Signature) _____ Date

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