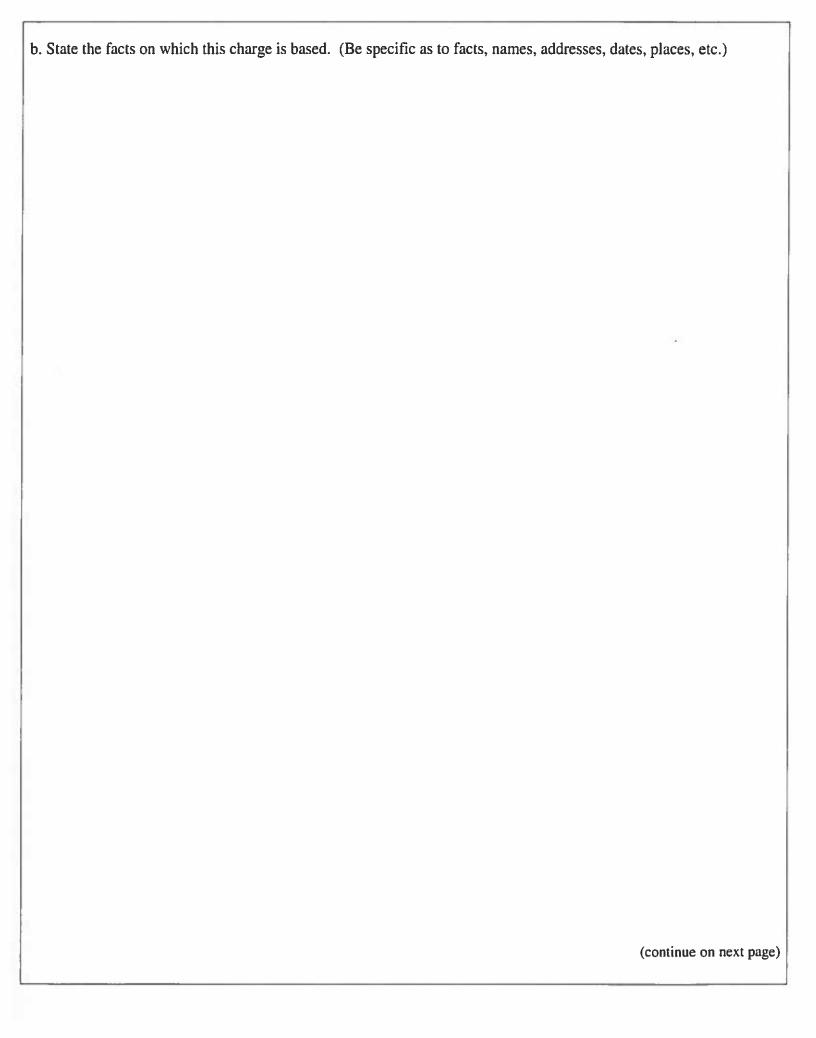
GOVERNMENT OF THE VIRGIN ISLANDS PUBLIC EMPLOYEES RELATIONS BOARD

CHARGE OF UNFAIR LABOR PRACTICE

DO NOT WRITE IN THIS SPACE 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. 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)



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.	charge and the statements the	erein are true to the best of	
By(Signature of representative or person filing charge)	- - Ti	tle if any	
(- gg.,		,	
Address	Phone	Date	
5. CERTIFICATION OF SERVICE			
I certify that on this date, I did cause a copy of this charge to be s	erved upon all interested parti	ies by	
() mailing () delivering a copy to:			
(Signature)		Date	

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	CASE NO.	
	DATE FILED	
1. PARTY AGAINST WHOM CHARGE IS BROU	GHT	
a. Name of employer, employee, or employee organization against whom charge is brou-	ght.	
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	
	o. I none	
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 prac	tices with the meaning of Section 378	
alleged to be violated).	361 et seq. (identify the subsection	
anoged to be violated).	×.	
State the Court of the transfer of the transfe		
o. State the facts on which this charge is based. (Be specific as to facts, names, addresses,	dates, places, etc.)	

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