FORM NLRB-501 (3-21)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD **CHARGE AGAINST EMPLOYER**

DO NOT WRITE IN THIS SPACE		
Case	Date Filed	

INSTRUCTIONS:

File an original with NLRB Regional Director for the region in	which the alleged unfair labor practice occurred or is occ	urring.
1. EMPL	OYER AGAINST WHOM CHARGE IS BROUGHT	
a. Name of Employer Google, LLC		b. Tel. No.
		c. Cell No.
		f. Fax. No.
d. Address (Street, city, state, and ZIP code) 1600 Amphitheatre Pkwy Mountain View, CA 94043	e. Employer Representative Fiona Cicconi, Chief People Officer	g. e-mail fcicconi@google.com
		h. Number of workers employed 54,000
i. Type of Establishment (factory, mine, wholesaler, etc.) Information Technology	j. Identify principal product or service Information Technology	
The above-named employer has engaged in and is engaged	i ging in unfair labor practices within the meaning of sect	tion 8(a), subsections (1) and
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) of the National Labor Relations Act, and these unfair labor		
practices are practices affecting commerce within the mea		·
meaning of the Act and the Postal Reorganization Act.	aning of the Act, of these diffall labor practices are pra-	cuces anecung commerce within the
and interfered with their Section 7 rights by termin concerted activity, namely, participation (or percei connected to their terms and conditions of work.		
3. Full name of party filing charge (if labor organization, gasee Attached	ive full name, including local name and number)	
4a. Address (Street and number, city, state, and ZIP code) Charging Parties can be reached through counsel, below		4b. Tel. No.
		4c. Cell No.
		4d. Fax No.
		4e. e-mail
5. Full name of national or international labor organization $N\!/A$	of which it is an affiliate or constituent unit (to be filled	in when charge is filed by a labor organization)
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.		Tel. No. 212-627-8100
are true to the best of the	Alek Felstiner, Levy Ratner, PC	Office, if any, Cell No.
(signature of representative or person making charge)	(Print/type name and title or office, if any)	Fax No.
Address 80 8th Ave, 8th Fl., New York, NY 1001	Date	e-mail afelstiner@levyratner.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.