

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 occurring.

1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT

a. Name of Employer GTI Clinic-Illinois Holdings, LLC d/b/a Green Thumb		b. Tel. No. 309-787-7109
		c. Cell No.
		f. Fax No.
d. Address (Street, city, state, and ZIP code) 875 N. Michigan Avenue Suite 3400 Chicago, IL 60611-1958	e. Employer Representative Ben Kovler, Chairman	g. e-mail ben@gtigrows.com
		h. Number of workers employed Approximately 366
i. Type of Establishment (factory, mine, wholesaler, etc.) Retail Dispensary	j. Identify principal product or service Cannabis	

The above-named employer has engaged in and is engaging in unfair labor practices within the meaning of section 8(a), subsections (1) and (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)

Within the past six months the above-named Employer unilaterally granted a fifty percent wage increase during a strike and discriminated against workers who had engaged in protected concerted activity by refusing to grant them a similar increase.

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

Teamsters Local 777	
4a. Address (Street and number, city, state, and ZIP code) Greg Glimco 7827 Ogden Avenue Lyons, IL 60534	4b. Tel. No. 708-777-1081
	4c. Cell No.
	4d. Fax No.
	4e. e-mail greg@teamster777.org

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.

/s/ David O'Brien Suetholz

David O'Brien Suetholz

(signature of representative or person making charge)

(Print/type name and title or office, if any)

Address HSG LaW, 515 Park Avenue, Louisville, KY 40208

Date: May 4, 2023

Tel. No. 502-636-4333
Office, if any, Cell No.
Fax No.
e-mail dave@hsglawgroup.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.