

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 Lund Food Holdings, Inc		b. Tel. No. (952) 915-3743
		c. Cell No. (612) 723-5963
		f. Fax No.
d. Address (Street, city, state, and ZIP code) 4100 West 50th St  MN Edina 55424	e. Employer Representative Casey Enevoldsen Vice President, Employee Experience	g. e-mail casey.enevoldsen@lfhi.com
		h. Number of workers employed 113
i. Type of Establishment (factory, mine, wholesaler, etc.) Retail (Grocery)	j. Identify principal product or service Retail Grocery	

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) 1 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)

--See additional page--

3. Full name of party filing charge (if labor organization, give full name, including local name and number)  
Michael LaCoste Organizing Director  
UFCW Local 663

4a. Address (Street and number, city, state, and ZIP code)  6160 Summit Dr N Suite 600 MN Brooklyn Center 55430	4b. Tel. No. (165) 126-2817
	4c. Cell No. (651) 262-8172
	4d. Fax No.
	4e. e-mail michaell@ufcw663.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)  
UFCW, AFL-CIO

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.



Michael LaCoste  
Organizing Director

(signature of representative or person making charge)

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

6160 Summit Dr N Suite 600

Address Brooklyn Center MN 55430

Date 06/13/2023 01:04:40 PM

Tel. No.  
(165) 126-2817

Office, if any, Cell No.  
(651) 262-8172

Fax No.

e-mail  
michaell@ufcw663.org

**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.

## Basis of the Charge

### 8(a)(1)

Within the previous six-months, the Employer has interfered with, restrained, and coerced its employees in the exercise of rights protected by Section 7 of the Act by threatening to retaliate against employees if they joined or supported a union.

Name of Employer's Agent/Representative who made the statement	Approximate date
Tom Gordon	06/13/2023

## **Additional Information in Support of Charge**

**Charging Party Name :** Michael LaCoste

**Inquiry Number :** 1-3326611251

**Date Submitted :** 06/13/2023 01:04:40 PM

Please provide a brief description of the specific conduct involved in your charge. The information you provide may be viewed by the charged party in the event of a formal proceeding, so PLEASE DO NOT GIVE A DETAILED ACCOUNT OF YOUR CHARGE OR A LIST OF POTENTIAL WITNESSES AT THIS TIME. A Board Agent will contact you to obtain this and other detailed information after your charge is docketed. After you submit this E-Filed Charge form, you will receive a confirmation email with an Inquiry Number (Sample Inquiry Number: 1-1234567890) and a link to the E-Filing web page. You may use the link and the Inquiry number provided in the email to e-file any additional documents you wish to present in support of your charge.

### **Additional Information Provided:**

Threats and intimidation of a member of the union's bargaining committee as a result of engaging in protected concerted activity under the Act.