

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
CHARGE AGAINST EMPLOYER

DO NOT WRITE IN THIS SPACE	
Case 20-CA-179564	Date Filed 7/1/2016

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 Lyft, Inc.	b. Tel. No. (800) 346-4646
	c. Cell No.
	f. Fax No.
d. Address (Street, city, state, and ZIP code) 720 14th Street Sacramento CA 95814	e. Employer Representative
	g. e-Mail
	h. Number of workers employed 10000
i. Type of Establishment (factory, mine, wholesaler, etc.) Transportation	j. Identify principal product or service Transportation
k. 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 meaning of the Act, or these unfair labor practices are unfair 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) (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 maintaining work rules that prevent or discourage employees from engaging in protected concerted activities.	
3. Full name of party filing charge (if labor organization, give full name, including local name and number) (b)(6), (b) Title:	
4a. Address (Street and number, city, state, and ZIP code) One Embarcadero Center 38th Floor San Francisco CA 94111	4b. Tel. No. (415) 638-8800
	4c. Cell No.
	4d. Fax No.
	4e. e-Mail jsagafi@outtengolden.com
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)	
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.	
By <u>Jahan Sagafi</u> (signature of representative or person making charge)	Jahan Sagafi Title: _____ (Print/type name and title or office, if any)
One Embarcadero Center 38th Floor Address San Francisco CA 94111	Tel. No. (415) 638-8800
	Office, if any, Cell No.
	Fax No.
	e-Mail jsagafi@outtengolden.com
	07/1/2016 14:16:35 (date)

RECEIVED
 NLRB REGIONAL
 SAN FRANCISCO, CA
 2016 JUL -1 PM 2:35

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

Inquiry ID **(b)(6), (b)(7)(C)**

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 of 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 will cause the NLRB to decline to invoke its processes.

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