STATE OF IOWA

THE PUBLIC EMPLOYMENT RELATIONS BOARD

PROHIBITED PRACTICE COMPLAINT

INSTRUCTIONS—Submit an original and one (1) copy of this complaint to the Board. The party filing this complaint must serve the party against whom the complaint is brought as specified in PERB rules 2.15 and 3.4.

FOR PERB USE ONLY
Case No. _____

1. PARTY AGAINST WHOM THIS COMPLAINT IS BROUGHT
   a. NAME (Give full name of agency, organization or person charged.)

   b. ADDRESS (Street Number, City, State, Zip Code)

2. BASIS OF COMPLAINT — The undersigned alleges that the above-named party has engaged in or is engaging in prohibited practices within the meaning of section(s) _____ of the Public Employment Relations Act as follows: (Briefly state the facts supporting this complaint including names, dates and places involved in the alleged violation. Use additional sheets if needed.)

3. REMEDY SOUGHT

4. NAME OF EMPLOYER (If different from item 1)

5. PARTY FILING THIS COMPLAINT
   a. NAME

   b. ADDRESS

   c. TELEPHONE

Signature

Date

Revised 09/03