



Collective Bargaining by County Employees Act UNFAIR LABOR PRACTICE COMPLAINT

Under the [Collective Bargaining by County Employees Act](#) ("COBCA"), C.R.S. § 8-3.3-101 *et seq.*, a complaint alleging unfair labor practices may be filed with the Division of Labor Standards and Statistics ("Division") by a county employee, a covered county, or an employee organization. C.R.S. § 8-3.3-115 states the specific "unfair labor practices" prohibited by COBCA and generally includes failure to comply with any requirements stated in the statute. COBCA Rule 5 outlines the process for filing an unfair labor practice complaint, as well as the procedures for investigation, determination, and remedies in the event of a violation. Although some employment-related activities may be viewed as unfair, they may not fall within the Division's jurisdiction. For guidance, refer to the [COBCA Rules](#) and [INFO #15B](#).

Section I: Charging Party (<i>check one</i>) EMPLOYEE <input type="checkbox"/> EMPLOYEE ORGANIZATION <input type="checkbox"/> EMPLOYER <input type="checkbox"/>		
Full Name (<i>of individual or organization</i>)		
Mailing Address		
City	State	Zip Code
Telephone Number	Email Address	
Authorized Representative's Name (<i>if applicable</i>)		
Authorized Representative's Mailing Address		
City	State	Zip Code
Authorized Representative's Telephone Number	Authorized Representative's Email Address	

Section II: Charge Filed Against (<i>check one</i>) EMPLOYEE ORGANIZATION <input type="checkbox"/> EMPLOYER <input type="checkbox"/>		
Full Name (<i>of individual or organization</i>)		
Representative's Name/Title (<i>if applicable</i>)		
Mailing Address		
City	State	Zip Code
Telephone Number	Email Address	

Note: If you believe more than one party violated the Act, you will need to submit a separate unfair labor practice complaint, even if the allegations are the same.

Section III: Description of the Alleged Unfair Labor Practices

Before completing Section III, refer to Section 8-3.3-115 of the Collective Bargaining by County Employees Act for a description of the unfair labor practices the Division has the authority to investigate.

1. STATEMENT OF THE CHARGE – The charging party alleges that the above-named respondent(s) has engaged in (an) unfair labor practice(s) within the meaning of the Collective Bargaining by County Employees Act. To the extent you can, please indicate which subsections of C.R.S. § 8-3.3-115 you believe were violated to help the Division understand whether your allegations fall within COBCA.

☐ (1) ☐ (2)(a) ☐ (2)(b) ☐ (2)(c) ☐ (2)(d) ☐ (2)(e) ☐ (2)(f) ☐ (2)(g)

☐ (2)(h) ☐ (2)(i) ☐ (3)(a)(I) ☐ (3)(a)(II) ☐ (3)(a)(III) ☐ (5) ☐ (6)(a)

☐ Other: _____ (please specify)

2. BASIS OF THE CHARGE

Date(s) of alleged unfair labor practice(s).

Date(s) you were made aware of the alleged unfair labor practice(s).

Name(s) of individual(s) involved.

Location(s) of alleged unfair labor practice(s).

Please describe what happened in a clear and concise statement. *(Use and attach additional pages if necessary)*

3. RELIEF OR REMEDY SOUGHT BY CHARGING PARTY - State what you ask the Division to order if it finds that an unfair labor practice occurred.

I declare under penalty of perjury, § 18-8-501 et seq., C.R.S. that the information I have provided is true and correct.

*Please email, fax, or mail this
complaint to the address below.*

Charging Party Signature

Date

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Main: (303) 318-8441 | Toll Free: 1-888-390-7936 | Fax: (303) 318-8400 | Email: cdle_laborrelations@state.co.us