

Metro Walls

Violations:

- 2014: A worker for a Metro Walls subcontractor falls and breaks his arm on the jobsite. Ponce, the sub to Metro Walls, had no workers compensation insurance. When the worker asked about paying his medical bills, his boss threatened to kill him if he went to a lawyer. *Hospital bill and claim denial attached.*
- 01/2015: Wage complaint filed against Metro Walls and their subcontractor DomRep *attached*
- 01/2016: Two wage complaints filed against Metro Walls and their subcontractor Steel Component Systems *attached*

Recent work on Callahan projects:

- 2014: 159 1st St, Cambridge MA
- 2014: Marriott Courtyard Hotel, Waltham MA
- 2015: 165 Cambridgelpark Drive, Cambridge MA
- 2016: River's Edge Mixed Use Development, Medford MA (incl. Steel Component systems)

Universal Drywall

Violations:

- 03/27/2013: OSHA citations at 1275 Turnpike St, North Andover MA, result in initial fine of \$20,020, negotiated down to \$6,500. Inspection number 898157.015
- 03/14/2014: OSHA citations at 155 6th St, Chelsea MA, result in initial fine of \$10,010 negotiated to \$2,000. Inspection number 963294.015
- 04/21/2014: OSHA citations at 16 Littleton Rd, Westford MA, result in \$5,600 fine. Inspection number 974675.015
- May 2014: MA AG sues Universal Drywall for misclassification of employees as independent contractors. *Press release attached*
- 10/26/2015: OSHA citations at 0 Penn St, Quincy MA, result in \$7,700 fine. Inspection number 1101542.015
- 02/17/2016: OSHA citations at 625 Burgin Pkwy, Quincy MA, result in \$4,131 fine. Inspection number 1126975.015

Recent work on Callahan projects:

- 2015-2016: Benchmark Assisted Living Facility, Woburn MA
- 2015-2016: 0 Penn St/625 E Burgin Pkwy, Quincy MA
- 2015-2016: "The District" NE Executive Park, Burlington MA

Diaz

Violations:

- July 2013, Death on the job (PineHills Independent Living) *article attached*

Recent work on Callahan projects:

- 2015-2016: Benchmark Assisted Living Facility, Woburn MA
- 2015-2016: Marina Bay Residences, Quincy MA
- 2015-2016: 480 Arsenal St Office building, Watertown MA

Force Corporation

Violations:

- 2013: OSHA fines Twin Pines (Force Corp's previous company name) \$290,700 *press release attached*
- 2013: OSHA fines Twin Pines another \$336,000, for willful, repeat, and serious violations. The inspection was initiated after a worker suffered broken ribs and leg injuries.
- December 2015: OSHA fines Force Corp \$91,000 for "imminent danger situation" *press release attached*
- 11/26/2015: Boston Globe article about CATS Academy project, wage theft.
- 2016: US Attorney's Office files a \$1.3 million collections claim against Twin Pines, for failure to pay OSHA fines
- 2016: US Department of Labor sues Force Corporation, Force Corp agrees to pay more than \$2.3 million in back wages and liquidated damages, plus an additional \$265,000 fine, for a total of more than \$2.6 million

Recent work on Callahan Projects:

- 2013: PineHills Independent Living, Plymouth MA
- 2016: Assembly Row Block 6, Somerville MA

J Kerrissey LLC

Violations:

- Dec 2015: Wage theft at the Quincy YMCA demolition *wage complaint attached*
- Concerns have been raised about the improper handling of asbestos on the Quincy YMCA demolition

Recent work on Callahan Projects:

- 2015-2016: Kerrissey worked for Callahan on the demolition of the Quincy YMCA

WOONSOCKET UC PC
25 JOHN A CUMMINGS WAY
WOONSOCKET RI 028953244

Return Service Requested

Thank you for choosing Woonsocket Urgent Care and Norwood Urgent Care for your health care needs.

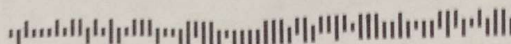
Please complete payment information

392805 105831 015697L

Account No	Statement Date	Amount Due
LOPLE002	02/19/2014	790.00
Mail Pay	Enter Payment Amount \$	
by Check	Payable To: WOONSOCKET URGENT CARE PC	Check No
Online Pay	MyProviderLink.com (Document ID: 73957925)	

LEONEL LOPEZ
332 RATHBUN STREET
WOONSOCKET RI 02895

WOONSOCKET URGENT CARE PC
25 JOHN A CUMMINGS WAY
WOONSOCKET RI 02895



☐ Check if your billing information has changed. Provide update(s) above or on the reverse side.

Please detach and return top portion with payment

Thank you for using Woonsocket Urgent Care and Norwood Urgent Care for your health care needs.

Messages

- Should you have any questions regarding your bill or if you would like to set up a payment plan, please contact us by phone at (401) 766-2700, option 2.
- Our billing department is open from 7:00am to 4:00pm Monday through Friday.
- For inquiries via email, please contact billing@norwoodurgentcare.com.
- THANK YOU FOR YOUR PROMPT PAYMENT

Statement Detail			Statement Date 2/19/2014 Account No LOPLE002					
Date	Name	Description	Charge	Paid by Insurance	Deductible	Paid by Guarantor	Adjustment	Remainder
01/15/14	LEONEL LOPEZ	Office or other outpatient visit for the BEACON DENIED CLAIM - POLICY CANCELLED IN OCT - PLEASE HAVE EMPLOYER CALL BILLING WITH NEW WC INSURANCE INFORMATION	300.00					300.00
01/15/14	LEONEL LOPEZ	Pulse OX	25.00					25.00
01/15/14	LEONEL LOPEZ	Application of short arm splint (forearm	275.00					275.00
01/15/14	LEONEL LOPEZ	Special casting material (e.g., fiberglass	40.00					40.00
01/15/14	LEONEL LOPEZ	Self-adherent bandage, elastic, nonknitt	25.00					25.00
01/15/14	LEONEL LOPEZ	Radiologic examination, wrist; complete,	125.00					125.00

Account Summary	Previous Balance	New Charges	Payments & Credits	Adjustments
		790.00	0.00	0.00

Amount Due
790.00

Aging	Past Due 30	Past Due 60	Past Due 90
	0.00	0.00	0.00

WOONSOCKET UC PC 25 JOHN A CUMMINGS WAY WOONSOCKET RI 028953244

Thank you for choosing Woonsocket Urgent Care and Norwood Urgent Care for your health care needs.



January 20, 2014

Landmark Medical Center
115 Cass Avenue
Woonsocket, RI 02895-4705

Re: Claimant: Leoneo Lopez
Insured: Ponce Drywall Inc
D/I: 01/15/2014
Claim #: 348559

Dear Landmark Medical Center:

We have received either a report or bill from you, which is related to the above claim. After careful review, we will be unable to process payment for this bill for the following reason(s).

- ☐ Our investigation into this claim finds that it is not related to the employee's employment and therefore, not compensable. We suggest that you forward this bill directly to the patient and/or to his or her health care insurer.
- ☐ Our investigation into the services rendered appears to be unrelated to the claim. We suggest that you forward your bill directly to the patient and/or to his or her health care insurer.
- ☒ There is no coverage for this employer, and this claim has been denied.
- ☐ Other:

If you have any questions, please feel free to contact me. Thank you for your time.

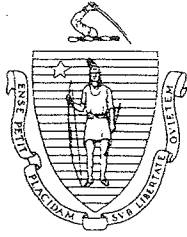
Sincerely,

Patricia Lavalley

Patricia Lavalley
Claim Representative
(401)825-2939

Tried TO CALL PT
Several Times -
(Language)

28CMPDL_V1



MARTHA COAKLEY
ATTORNEY GENERAL

THE COMMONWEALTH OF MASSACHUSETTS OFFICE OF THE ATTORNEY GENERAL

FAIR LABOR DIVISION
ONE ASHBURTON PLACE
BOSTON, MASSACHUSETTS 02108

(617) 727-2200
(617) 727-3465 HELPLINE
WWW.MASS.GOV/AGO

Non-Payment of Wage and Workplace Complaint Form- Page 1

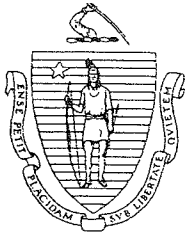
Please provide as much information as you can on this form and mail it to the above address.

Employee Information

First name Miguel Middle name Angel Last name Olivares
Social Security Number* N/A Date of birth 1-27-80 Gender M ☒ F
(month/day/year)
Current mailing address 113 - Linclon St
City Leominster State Ma Zip 01453 Email _____
Home phone _____ Cell phone 978-398-5603
Emergency contact name and phone Manny Gines
(friend / family member who can reach you)
Mailing address 29-Edicott City Worc. State Ma. Zip 01610
Start date of employment 1-12-2015 End date of employment 1-26-2015
(month/day/year) (month/day/year)

Please Read: Under most circumstances, the text of your complaint will be considered a public record and be available to any member of the public upon request. In response to such a request, we generally will not disclose your name, address, phone number, or any other information that identifies you and will not disclose this form in response to any request that specifically seeks the complaint you submitted. Your record in its entirety may, however, be disclosed to law enforcement and regulatory agencies who may assist in resolving your complaint.

*Providing a Social Security Number is voluntary. It will aid in processing your complaint, but we will proceed without one.



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Non-Payment of Wage and Workplace Complaint Form- Page 2

Name of Employee: Miguel A. Olivares

Do you speak English? Yes ☐ No ☒ What language would you prefer we contact you in? spanish

What type of work did you perform? Metal stud framing and sheetrock

Name of employer G.C. Congress Co. / Metro Walls / Don-Rep Drywall

Are you currently working for this employer? Yes ☐ No ☒ Trinidad Drywall same owner Wascar

If applicable, reason for end of employment? Quit ☐ Discharged ☒

Did you sign a contract with the employer? Yes ☐ No ☒

Is an attorney representing you? Yes ☐ No ☒

Has a community organization or union helped you file this complaint? Yes ☒ No ☐

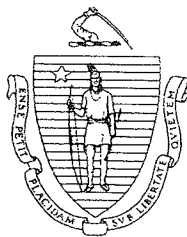
If yes, please provide name(s) of the attorney, organization, or union; as well as a contact person, address, and phone number. Manny Lires Carpenters union 508-400-9258

Did you ask to get paid the wages you are owed? Yes ☒ No ☐

If yes, what was the employer's response? Wascar said he paid Jonathan Nuño?

Have you taken any other action against the employer regarding this problem? Yes ☐ No ☒

If yes, please explain. Called Metro Walls office they said that's not they're problem because I didn't work for them to call Wascar
An employer does not have the right to threaten, discriminate, or retaliate against you because of your efforts to collect wages. If this has happened to you, please explain. _____



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Non-Payment of Wage and Workplace Complaint Form- Page 3

Employer Information. Please provide as much information as you can.

Company name Metro Walls / Dpm-Rep Drywall
Other business name(s) used by employer Trinity
Company address 178 White Hall Rd City Hooksett State N.H Zip 03106
Company owner/president name Tavarez Wascar Bautista License plate number(s) _____
Owner/president home address 130 Brook St. City Manchester State N.H Zip 03103
Owner/president phone (workplace, cell, and/or home) Cell: 603-858-5472
If known, total number of employees in company _____ Local manager/supervisor name(s) _____
City/town(s) where work was performed 678- Depot St. Easton, Ma. 02356

Reason for Filing Complaint. Check all that apply and provide details below. If you are not sure which category applies, just describe your situation below.

- | | | |
|--|--|---|
| <input type="checkbox"/> Minimum wage violation | <input type="checkbox"/> Meal period violation | <input type="checkbox"/> Child labor |
| <input checked="" type="checkbox"/> Non-payment of wages | <input checked="" type="checkbox"/> Overtime pay violation | <input type="checkbox"/> Unpaid commissions |
| <input type="checkbox"/> Vacation pay violation* | <input type="checkbox"/> Sunday overtime/holiday pay | <input type="checkbox"/> Failure to provide personnel records |
| | | <input type="checkbox"/> Other _____ |
- *If possible, please attach a copy of the company vacation policy.

(specify "Other")

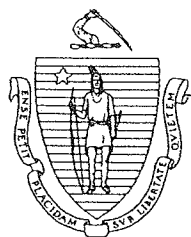
Time period of violation(s) is from 1-12-2015 to 1-26-2015 88 hrs.
(month/day/year) (month/day/year)

Your most recent rate of pay? \$ 17 hr. per hour or week (circle one) Total amount owed? \$ 1,496.00

Please provide detailed information about what happened and what you are owed. after working for two weeks we got all that snow Wascar told us because of the snow there was no work and that they will call us. He never called when I called he wouldn't return my call. When he finally called me back he said he'll pay next week and it continue like this for a while until I gave up. Then a friend told me about Manny Gines and that he can help me

I hereby certify that, to the best of my knowledge and belief, this is a true and accurate statement of the facts about my complaint.

<u>Miguel A. Olivares</u> Signature	<u>Miguel A. Olivares</u> PRINT your name	<u>5-21-2015</u> Date signed
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Re: Wage Complaint Form Instructions

Please fill out this form as completely and accurately as possible. Also, attach photocopies of any supporting information such as pay stubs, work logs, and correspondence from your employer. Please keep the originals for your records. Return the completed form and materials to:

**Office of the Attorney General
Fair Labor Division
One Ashburton Place, Rm 1813
Boston, MA 02108**

Before we can process your complaint, our office must receive full and complete information from you. Please check to make certain you have provided the following:

- Your employer's complete name and address, including zip code
- Description of the work you performed
- Amount of wages you are owed, and your hourly or weekly rate of pay
- Exact dates worked but not paid
- City or town where you worked
- Last date you worked
- Date you made a personal demand to your employer for unpaid wages, and your employer's response
- Copies of pay stubs
- If you claim unpaid vacation, include a copy of your employer's vacation policy
- Any information that would

After reviewing the material you provide, the Attorney General's Office will determine whether or not to conduct a preliminary investigation and whether further action is warranted. This may include the following:

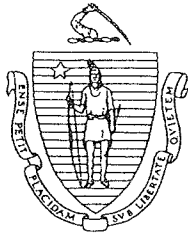
- Seeking restitution of your unpaid wages
- Issuing a civil citation against your employer
- Seeking criminal charges against your employer

If the Attorney General elects to institute a criminal or civil enforcement action, you will be required to be interviewed by and investigated by an investigator from this office. Later, you may also need to appear at a hearing.

If you wish to file your own lawsuit, ninety days after filing a complaint with this office, you may sue your employer in civil court for your wages, plus triple damages and legal fees. You may also request written permission from the Attorney General's Office to proceed before the end of the ninety-day waiting period.

Please note that it usually takes several weeks to review and conduct a preliminary investigation of your complaint.

Your complaint may be forwarded to your employer for response.



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Non-Payment of Wage and Workplace Complaint Form- Page 1

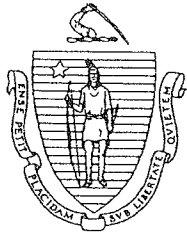
Please provide as much information as you can on this form and mail it to the above address.

Employee Information

First name JOSE Middle name APOLINAR Last name SANCHEZ
Social Security Number* 008-86-3474 Date of birth 08-23-71 Gender M ☒ X F
(month/day/year)
Current mailing address 2-DANIEL ST NASHUA
City NASHUA State N-H Zip 03060 Email _____
Home phone (603) 233-9516 Cell phone _____
Emergency contact name and phone Miguel PENA (603) 324-9601
(friend / family member who can reach you)
Mailing address _____ City _____ State _____ Zip _____
Start date of employment 01-04-16 End date of employment 01-04-16
(month/day/year) (month/day/year)

Please Read: Under most circumstances, the text of your complaint will be considered a public record and be available to any member of the public upon request. In response to such a request, we generally will not disclose your name, address, phone number, or any other information that identifies you and will not disclose this form in response to any request that specifically seeks the complaint you submitted. Your record in its entirety may, however, be disclosed to law enforcement and regulatory agencies who may assist in resolving your complaint.

**Providing a Social Security Number is voluntary. It will aid in processing your complaint, but we will proceed without one.*



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Non-Payment of Wage and Workplace Complaint Form- Page 2

Name of Employee: Jose Apolibar Sanchez

Do you speak English? Yes ☒ No ☐ What language would you prefer we contact you in? _____

What type of work did you perform? _____

Name of employer _____

Are you currently working for this employer? Yes ☐ No ☒

If applicable, reason for end of employment? Quit ☐ Discharged ☒

Did you sign a contract with the employer? Yes ☐ No ☒

Is an attorney representing you? Yes ☐ No ☒

Has a community organization or union helped you file this complaint? Yes ☒ No ☐

If yes, please provide name(s) of the attorney, organization, or union; as well as a contact person, address, and phone number. Manay Gines

Carpenter union

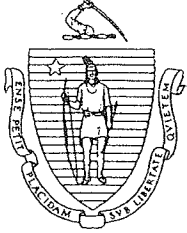
Did you ask to get paid the wages you are owed? Yes ☒ No ☐

If yes, what was the employer's response? Come to the office & when we go no one is there. This happen several times

Have you taken any other action against the employer regarding this problem? Yes ☐ No ☒

If yes, please explain. _____

An employer does not have the right to threaten, discriminate, or retaliate against you because of your efforts to collect wages. If this has happened to you, please explain. _____



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Non-Payment of Wage and Workplace Complaint Form- Page 3

Employer Information. Please provide as much information as you can.

Company name Steel Component Systems LLC
Other business name(s) used by employer Metro Walls
Company address 5 Coliseum Ave City Nashua State N.H. Zip 03063 Suite 302
Company owner/president name Vanessa L Boilard License plate number(s) _____
Owner/president home address _____ City _____ State _____ Zip _____
Owner/president phone (workplace, cell, and/or home) _____
If known, total number of employees in company 20 Local manager/supervisor name(s) Vinny owners husband
City/town(s) where work was performed Quincy Center 1400 Hancock St. Quincy, Ma.
Dellbrook Const. Co. Metro Walls awarded sub

Reason for Filing Complaint. Check all that apply and provide details below. If you are not sure which category applies, just describe your situation below.

☒ Minimum wage violation ☐ Meal period violation ☐ Child labor
☒ Non-payment of wages ☐ Overtime pay violation ☐ Unpaid commissions
☐ Vacation pay violation* ☐ Sunday overtime/holiday pay ☐ Failure to provide personnel records
*If possible, please attach a copy of the company vacation policy. ☐ Other _____ (specify "Other")

Time period of violation(s) is from 1-4-16 to 1-4-16
(month/day/year) (month/day/year)

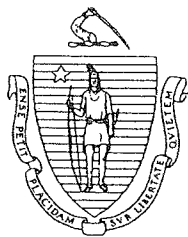
Your most recent rate of pay? \$ 26.86 per hour or week (circle one) Total amount owed? \$ 4040

Please provide detailed information about what happened and what you are owed. My friend Miguel
call him and he say he pay, but no pay we call Mary
gives Union carpenter

CERTIFICATION:

I hereby certify that, to the best of my knowledge and belief, this is a true and accurate statement of the facts about my complaint.

<u>J. APOIYAR SANCHEZ</u> Signature	<u>J. APOIYAR SANCHEZ</u> PRINT your name	<u>3-11-16</u> Date signed
--	--	-------------------------------



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Fair Labor Division
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Boston, MA 02108**

Before we can process your complaint, our office must receive full and complete information from you. Please check to make certain you have provided the following:

- Your employer's complete name and address, including zip code
- Description of the work you performed
- Amount of wages you are owed, and your hourly or weekly rate of pay
- Exact dates worked but not paid
- City or town where you worked
- Last date you worked
- Date you made a personal demand to your employer for unpaid wages, and your employer's response
- Copies of pay stubs
- If you claim unpaid vacation, include a copy of your employer's vacation policy
- Any information that would

After reviewing the material you provide, the Attorney General's Office will determine whether or not to conduct a preliminary investigation and whether further action is warranted. This may include the following:

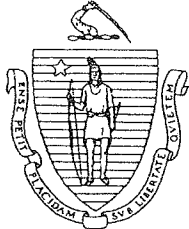
- Seeking restitution of your unpaid wages
- Issuing a civil citation against your employer
- Seeking criminal charges against your employer

If the Attorney General elects to institute a criminal or civil enforcement action, you will be required to be interviewed by and investigated by an investigator from this office. Later, you may also need to appear at a hearing.

If you wish to file your own lawsuit, ninety days after filing a complaint with this office, you may sue your employer in civil court for your wages, plus triple damages and legal fees. You may also request written permission from the Attorney General's Office to proceed before the end of the ninety-day waiting period.

Please note that it usually takes several weeks to review and conduct a preliminary investigation of your complaint.

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Non-Payment of Wage and Workplace Complaint Form- Page 1

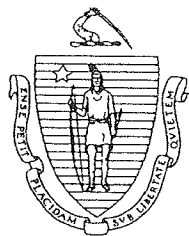
Please provide as much information as you can on this form and mail it to the above address.

Employee Information

First name Miguel Middle name Pina Last name Medrano
Social Security Number* _____ Date of birth 09-28-57 Gender M X F _____
(month/day/year)
Current mailing address Kinsley ST #70
City Nashua State NH Zip 03060 Email _____
Home phone _____ Cell phone 603-324-96-01
Emergency contact name and phone 603-233-95-10
(friend / family member who can reach you)
Mailing address 603-2 Daniel ST City Nashua State NH Zip 03060
Start date of employment 1-04-16 End date of employment 1-04-16
(month/day/year) (month/day/year)

Please Read: Under most circumstances, the text of your complaint will be considered a public record and be available to any member of the public upon request. In response to such a request, we generally will not disclose your name, address, phone number, or any other information that identifies you and will not disclose this form in response to any request that specifically seeks the complaint you submitted. Your record in its entirety may, however, be disclosed to law enforcement and regulatory agencies who may assist in resolving your complaint.

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Non-Payment of Wage and Workplace Complaint Form- Page 2

Name of Employee: Miguel Piña Medrano

Do you speak English? Yes ___ No X What language would you prefer we contact you in? spanish

What type of work did you perform? Drywall

Name of employer Steel Component Systems LLC

Are you currently working for this employer? Yes ___ No X

If applicable, reason for end of employment? Quit X Discharged ___

Did you sign a contract with the employer? Yes ___ No X

Is an attorney representing you? Yes ___ No X

Has a community organization or union helped you file this complaint? Yes X No ___

If yes, please provide name(s) of the attorney, organization, or union; as well as a contact person, address, and phone number. MANNY GINES Carpenters Union

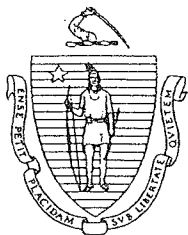
Did you ask to get paid the wages you are owed? Yes X No ___

If yes, what was the employer's response? come to the office I'll pay you

Have you taken any other action against the employer regarding this problem? Yes ___ No X

If yes, please explain. Come to The office and we go

An employer does not have the right to threaten, discriminate, or retaliate against you because of your efforts to collect wages. If this has happened to you, please explain. _____



MARTHA COAKLEY
ATTORNEY GENERAL

THE COMMONWEALTH OF MASSACHUSETTS OFFICE OF THE ATTORNEY GENERAL

FAIR LABOR DIVISION
ONE ASHBURTON PLACE, ROOM 1813
BOSTON, MASSACHUSETTS 02108

(617) 727-2200
(617) 727-3465 HELPLINE
WWW.MASS.GOV/AGO

Non-Payment of Wage and Workplace Complaint Form- Page 3

Employer Information. Please provide as much information as you can.

Company name Steel Component Systems, LLC

Other business name(s) used by employer sub of Metro Walls

Company address 5-Coliseum AVE. City Nashua State N.H. Zip 03063 *State 302*

Company owner/president name Vanessa L. Boilard License plate number(s) _____

Owner/president home address _____ City _____ State _____ Zip _____

Owner/president phone (workplace, cell, and/or home) _____

If known, total number of employees in company 20 Local manager/supervisor name(s) Vinny owner husband

City/town(s) where work was performed 1400-Hancock St. Quincy, Ma. Quincy Center

Dellbrook G.C. Metro Walls awarded bid for Strywall

Reason for Filing Complaint. Check all that apply and provide details below. If you are not sure which category applies, just describe your situation below.

☐ Minimum wage violation

☒ Non-payment of wages

☐ Vacation pay violation*

☐ Meal period violation

☐ Overtime pay violation

☐ Sunday overtime/holiday pay

☐ Child labor

☐ Unpaid commissions

☐ Failure to provide personnel records

☐ Other _____

*If possible, please attach a copy of the company vacation policy.

(specify "Other")

Time period of violation(s) is from 1-4-2016 to 1-4-2016
(month/day/year) (month/day/year)

Your most recent rate of pay? \$ 26.00 per hour or week (circle one) Total amount owed? \$ 1,040

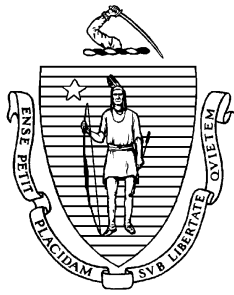
Please provide detailed information about what happened and what you are owed. We worked one day outside it was freezing out we asked if we can work inside for the day because Vinny had his guys inside working, he said no so we worked outside 8 hours and told him that we don't want to work for him outside anymore. We ask for our pay he said to go to his office at 5:00 pm the next day we did his wife said she don't know anything about us and our pay. We call Vinny then he stop taking our calls.

I hereby certify that, to the best of my knowledge and belief, this is a true and accurate statement of the facts about my complaint.

Miguel Pina
Signature

Miguel Pina
PRINT your name

3-11-16
Date signed



MARTHA COAKLEY
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FOR IMMEDIATE RELEASE
May 16, 2014

MEDIA CONTACT:
Grant Woodman
(617) 727-2543

**AG COAKLEY SUES NEW HAMPSHIRE DRYWALL COMPANY FOR ALLEGEDLY
MISCLASSIFYING WORKERS ON CONSTRUCTION PROJECTS**

Allegations of Unfair Competition Include Work on Public Schools in Boylston and Douglas

BOSTON – A New Hampshire drywall company and its owner have been sued for allegedly misclassifying employees as independent contractors, Attorney General Coakley's office announced today.

The lawsuit, filed Thursday in Suffolk Superior Court, alleges that Universal Drywall, LLC and its owner, Richard Pelletier of Auburn, NH, violated the Massachusetts Consumer Protection Act and the Massachusetts False Claims Act to gain an unfair competitive advantage over companies in Massachusetts.

"Employers are required to pay employees a lawful wage for each hour of work on construction projects, maintain accurate payroll records, and produce those records upon demand," AG Coakley said. "We enforce these laws not only to protect workers, but to level the playing field for all businesses that play by the rules."

In 2013, The Fair Labor Division of the Attorney General's Office began an investigation into Universal's hiring practices at a residential construction project in Chelsea known as One North of Boston. The investigation began after the AG's Office received reports that the company had been hiring workers from New Hampshire and misclassifying them as independent contractors, in violation of the Massachusetts Independent Contractor Law.

These reports mirrored previous claims reported to the AG's Office regarding the company's hiring practices on publicly-funded projects at the Tahanto Regional High School in Boylston and the Douglas Intermediate School in Douglas in 2011 and 2012. These ongoing investigations, in conjunction with the Chelsea project, revealed a pattern of unfair competition through the unlawful misclassification of workers at all three projects.

The lawsuit alleges that Universal employed this practice to save costs associated with hiring the same workers as lawful employees. As a result, Universal was able to obtain

contracts by underbidding its competitors by requiring the workers and not the company, to absorb the burden of an employer's overhead costs.

The lawsuit further alleges that Universal was responsible for creating and submitting false records relating to the misclassified workers employed on the Tahanto High School and Douglas Intermediate School projects, in violation of the Massachusetts False Claims Act.

The Attorney General's Office is responsible for enforcing the laws regulating the payment of wages and employee misclassification, in addition to laws protecting consumers and businesses from unfair competition.

Workers who believe that their rights have been violated are strongly urged to call the AG's Fair Labor Hotline at (617) 727-3465. More information about the state's wage and hour laws is also available in multiple languages at the AG's Workplace Rights website: www.massworkrights.com. Further information about youth employment may also found at www.mass.gov/ago/youthemployment.

The matter is being handled by Matthew Berge, Chief of the Fair Labor Division and Assistant Attorney General Jennifer Cotter, and was investigated by Deputy Chief of Investigations Greg Reutlinger, and Investigators Jennifer Pak and Tom Lam of Attorney General Coakley's Fair Labor Division.

#####



Printed from: *Boston Herald* (<http://bostonherald.com>)

Death at Pinehills spurs probe

Friday, July 26, 2013 -- Anonymous (not verified)

Diaz Construction fined eight times since 2005

Business & Markets

Saturday, July 27, 2013

Author(s):

Donna Goodison

The owner of Diaz Construction Co., whose worker was killed on a Plymouth job site Tuesday, said the Avon company tries to go "by the book" when it comes to safety.

But Leonel Diaz's company has been cited by the U.S. Occupational Safety & Health Administration for 19 safety violations totaling \$46,000 in initial fines — 15 of which were deemed serious violations — since 2005, according to OSHA records.

OSHA is investigating the death of Jason Faria, a Diaz Construction employee who died at The Pinehills residential community in Plymouth, where the Mirabeau Inn & Spa is under development. The Fall River man was killed when a concrete form to which he was harnessed came loose and fell, according to Mike Fish, a partner at the project's general contractor, JK Scanlon Co.

Diaz Construction is a subcontractor on the project for whom Faria had worked for four years.

"Everything looked safe," Diaz told the Herald yesterday. "Nobody knows how it happened. We have a safety officer, and we try to do everything by the book. That's why he was tied up."

Faria would have turned 27 years old yesterday.

His stepfather, Mario Benjamin, said he was unaware of Diaz Construction's past safety violations.

"I work in construction, and a lot of companies do get fined," Benjamin said. "This is just a tough situation. What I know is he was tied up on his harness on a concrete form ... and the form started to slip down, and he tried to unhook the harness to jump off, but he

couldn't."

An OSHA spokesman confirmed the agency has launched an investigation. OSHA has fined Diaz Construction for safety violations on eight separate occasions after job site inspections that were planned or the result of complaints in 2005, 2006, 2007, 2010 and 2011, according to OSHA documents.

The violations ranged from issues with scaffolding, protruding steel, protective helmets and protecting employees from potentially hazardous loose rock or soil to daily excavation inspections, protecting employees from cave-ins, portable ladders, safety training, and eye and face protection, the documents state.

Diaz, who told the Herald that he wasn't on the job site when Faria died, said he was awaiting OSHA's report on the incident.

"The hard part is that we lost Jason," Diaz said. "Everybody feels sorry about that. He was a good worker, a nice kid. We're sorry for him and his family."

Source URL:

http://bostonherald.com/business/business_markets/2013/07/death_at_pinehills_spurs_probe

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OSHA Regional News Release

**U.S. Department of Labor
Office of Public Affairs**

Region 1

Region 1 News Release: 13-1109-BOS/BOS 2013-073

May 28, 2013

Contact: Ted Fitzgerald Andre J. Bowser

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Email: fitzgerald.edmund@dol.gov bowser.andre.j@dol.gov



PLAN. PROVIDE. TRAIN.

Three simple steps to preventing falls.

**Massachusetts contractor faces \$290,700 in US Labor Department OSHA fines
for willful, repeat fall hazards at Durham, NH, work site
Workers of Twin Pines Construction Inc. exposed to falls of up to 30 feet**

CONCORD, N.H. – The U.S. Department of Labor's Occupational Safety and Health Administration has cited Twin Pines Construction Inc. for alleged willful, repeat and serious violations of workplace safety standards at its Durham work site on 10 Pettee Brook Lane. The wood framing contractor, based in Everett, Mass., faces a total of \$290,700 in proposed fines following an inspection by OSHA's Concord Area Office.

Workers performing framing work were found exposed to falls ranging from 9 feet up to 30 feet due to missing or inadequate fall protection safeguards. OSHA standards require that employees working 6 feet or more above a lower level be protected against falls by personal fall arrest systems, guardrails or safety nets. Additional fall hazards stemmed from ladder misuse and personal fall arrest systems that could allow workers to fall more than 6 feet and strike lower levels. As a result, three willful citations were issued with \$200,500 in fines. A willful violation is one committed with intentional, knowing or voluntary disregard for the law's requirements, or with plain indifference to worker safety and health.

"The sizable penalties proposed here reflect the gravity and recurring nature of these hazards, plus this employer's knowledge of and refusal to correct them," said Rosemarie Ohar, OSHA's New Hampshire area director. "This is unacceptable. Falls remain the number one killer in construction work, having cost the lives of 264 workers in 2010. Employers who fail to supply and ensure the use of proper and effective fall protection safeguards are gambling with the lives and well-being of their employees."

Four repeat citations, with \$75,900 in fines, are for hazards similar to those cited in 2009 and 2011 at work sites in Boston, Lakeville, Lexington, New Bedford and Newbury, Mass., and in Portsmouth. These hazards include lack of fall protection training, no eye protection for workers using pneumatic nail guns, ungrounded electrical cords and missing handrails. A repeat violation exists when an employer previously has been cited for the same or a similar violation of a standard, regulation, rule or order at any other facility in federal enforcement states within the last five years.

Finally, Twin Pines was issued three serious citations, with \$14,300 in fines, for wood and metal trusses inadequately braced during installation, missing fire extinguishers and no protection from falling objects. A serious violation occurs when there is substantial probability that death or serious physical harm could result from a hazard about which the employer knew or should have known.

The citations can be viewed at http://www.osha.gov/ooc/citations/Twin_Pines_Construction_Inc._764941_0523_13.pdf.

OSHA has created a Stop Falls Web page at <http://www.osha.gov/stopfalls> with detailed information in English and Spanish on fall protection standards. The page offers fact sheets, posters and videos that vividly illustrate various fall hazards and appropriate preventive measures.

"All employers must plan ahead to identify fall hazards and use the proper type of fall protection, provide proper and properly maintained equipment and train workers to protect themselves against fall hazards," said Ohar.

Twin Pines Construction Inc. has 15 business days from receipt of its citations and proposed penalties to comply, meet informally with OSHA's area director or contest the findings before the independent Occupational Safety and Health Review Commission.

To ask questions, obtain compliance assistance, file a complaint or report workplace hospitalizations, fatalities or situations posing imminent danger to workers, the public should call OSHA's toll-free hotline at 800-321-OSHA (6742) or the agency's Concord office at 603-225-1629.

Under the Occupational Safety and Health Act of 1970, employers are responsible for providing safe and healthful workplaces for their employees. OSHA's role is to ensure these conditions for America's working men and women by setting and enforcing standards, and providing training, education and assistance. For more information, visit <http://www.osha.gov>.

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U.S. Department of Labor news materials are accessible at <http://www.dol.gov>. The information above is available in large print, Braille or CD from the COAST office upon request by calling 202-693-7828 or TTY 202-693-7755.


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OSHA Regional News Release

**U.S. Department of Labor
Office of Public Affairs**

Region 1

Region 1 News Release: 13-1865-BOS/BOS-13-144

Sept. 16, 2013

Contact: Ted Fitzgerald Andre Bowser

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**Massachusetts contractor faces more than \$336,000 in US Labor
Department OSHA fines for willful, repeat and serious safety violations
Workers of Twin Pines Construction Inc. repeatedly exposed to unchecked fall hazards**

BOSTON – Repeat violator Twin Pines Construction Inc. of Everett, Mass., has been cited by the U.S. Department of Labor's Occupational Safety and Health Administration for willful, repeat and serious violations of workplace safety standards at worksites in Plymouth and Reading, Mass. The wood framing contractor faces a combined total of \$336,200 in proposed fines following inspections by OSHA's Braintree and Andover area offices begun in March.

The Plymouth inspection was initiated March 15 after a worker suffered broken ribs and leg injuries when an unbraced wooden roof truss system collapsed around him at a worksite located at 1 Shinglewood. The Reading inspection was opened the same day after OSHA received a complaint about possible safety hazards at the 1 Jacobs Way jobsite.

At the Plymouth worksite, OSHA found that the trusses were not adequately braced during their installation, exposing employees to being struck by them. The workers were also exposed to falls of up to 12 feet during the installation of the trusses. Inspectors identified an impalement hazard from uncovered anchor bolts and additional fall and struck-by hazards from a misused ladder and uninspected and untagged rigging. These conditions resulted in OSHA issuing Twin Pines two willful, two repeat and four serious citations with \$196,200 in proposed fines. The repeat violations stem from similar hazards cited by OSHA in 2009 and 2011 at jobsites in Walpole, Mass. and Portsmouth, N.H.

OSHA found employees at the Reading worksite working without fall protection while framing exterior walls, making final deck attachments, constructing leading edges and receiving construction building materials. This lack of fall protection exposed them to falls of from 10 to 20 feet. As a result, OSHA issued two willful citations, with \$140,000 in fines, to Twin Pines.

"The large penalties proposed in these cases reflect the gravity and recurring nature of these hazards, and demonstrate this employer's knowing, active and ongoing disregard for its workers' safety," said Marthe Kent, OSHA's New England regional administrator. "Falls remain the number one killer in construction work. Employers who deliberately and repeatedly fail to supply and ensure the use of effective fall protection safeguards are repeatedly gambling with their workers' lives."

The citations can be viewed at http://www.osha.gov/ooc/citations/TwinPines896909_09062013.pdf* and http://www.osha.gov/ooc/citations/Twin_Pines_Construction_Inc_896591_09-05-13.pdf*.

Twin Pines Construction Inc. has been placed in OSHA's Severe Violator Enforcement Program, which mandates targeted follow-up inspections to ensure compliance with the law. OSHA's SVEP focuses on recalcitrant employers that endanger workers by committing willful, repeat or failure-to-abate violations. Under the program, OSHA may inspect any of the employer's facilities if it has reasonable grounds to believe there are similar violations.

A willful violation is one committed with intentional, knowing or voluntary disregard for the law's requirements, or with plain indifference to worker safety and health. A serious violation occurs when there is substantial probability that death or serious physical harm could result from a hazard about which the employer knew or should have known. A repeat violation exists when an employer previously has been cited for the same or a similar violation of a standard, regulation, rule or order at any other facility in federal enforcement states within the last five years.

Twin Pines Construction Inc. has 15 business days from receipt of its citations and proposed penalties to comply, meet informally with OSHA's area director or contest the findings before the independent Occupational Safety and Health Review Commission.

To ask questions, obtain compliance assistance, file a complaint or report workplace hospitalizations, fatalities or situations posing imminent danger to workers, the public should call OSHA's toll-free hotline at 800-321-OSHA (6742) or the agency's Braintree (617-565-6924) or Andover (978-837-4460) offices.

OSHA has created a Stop Falls Web page at <http://www.osha.gov/stopfalls> with detailed information in English and Spanish on fall protection standards. The page offers fact sheets, posters and videos that vividly illustrate various fall hazards and appropriate preventive measures.

Under the Occupational Safety and Health Act of 1970, employers are responsible for providing safe and healthful workplaces for their employees. OSHA's role is to ensure these conditions for America's working men and women by setting and enforcing standards, and providing training, education and assistance. For more information, visit <http://www.osha.gov>.

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OSHA Regional News Release

U.S. Department of Labor
Office of Public Affairs

Region 1

Dec. 17, 2015

BOS 2015-228

**Habitual workplace safety violator Force Corp.
again exposes roofing workers to potentially fatal fall hazards
Company faces \$91K in proposed fines following North Andover OSHA inspection**

ANDOVER, Mass. Falls, broken bones, and death.

These were the hazards faced by Force Corp. employees as they performed a roofing job on July 7, 2015, at 2-4 Johnson St. in North Andover. A U.S. Department of Labor Occupational Safety and Health Administration inspector driving by the work site saw three employees on a roof exposed to falls of up to 18 feet without fall protection.

Following the inspection, OSHA cited the Woburn-based roofing contractor for one willful violation for the lack of fall protection and four serious violations for other hazards. Force Corp. faces \$91,000 in proposed fines.

The willful citation stems from the company's knowledge of the fall hazard. Since December 2013, OSHA has cited Force Corp. for fall-related hazards at work sites in Bridgeport and Hartford, Connecticut, and in Everett and Needham.

"This was an imminent danger situation. These employees were one slip, trip or misstep away from a deadly or disabling fall. We began an inspection immediately," said Anthony Covello, OSHA's area director for Middlesex and Essex counties. "Even after the employees donned fall protection equipment, it was defective and inadequate at preventing falls. Force Corp.'s disregard of this safety requirement placed its employees at risk needlessly. This is unacceptable behavior that must change before a worker's life or career is destroyed."

OSHA also found employees using ladders that did not extend at least 3 feet above upper landings for required stability; damaged and uninspected safety harnesses; and a safety lanyard that was too long to prevent employees from falling. The workers were also exposed to an electric shock hazard from a power tap not designed for a construction site.

[View the citations here](#)*.

OSHA has a Stop Falls online resource with detailed information in English and Spanish on fall protection standards. The page offers fact sheets, posters and videos that vividly illustrate various fall hazards and appropriate preventive measures. OSHA standards require that an effective form of fall protection be in use when workers perform construction activities 6 feet or more above the next lower level.

The agency's ongoing Fall Prevention Campaign, which began in 2012, was developed in partnership with the National Institute for Occupational Safety and Health and NIOSH's National Occupational Research Agenda program. The campaign provides employers with lifesaving information and educational materials on how to prevent falls, provide the right equipment for workers and train employees to use that gear properly.

Force Corp. has 15 business days from receipt of its citations and penalties to comply, meet with OSHA's area director, or contest the findings before the independent Occupational Safety and Health Review Commission.

To ask questions, obtain compliance assistance, file a complaint, or report amputations, eye loss, workplace hospitalizations, fatalities or situations posing imminent danger to workers, the public should call OSHA's toll-free hotline at 800-321-OSHA (6742) or the agency's Andover Area Office at 978-837-4460.

#

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Release Number: 15-2374-BOS

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Carpenters union targets Braintree school project

Says site violating wage laws



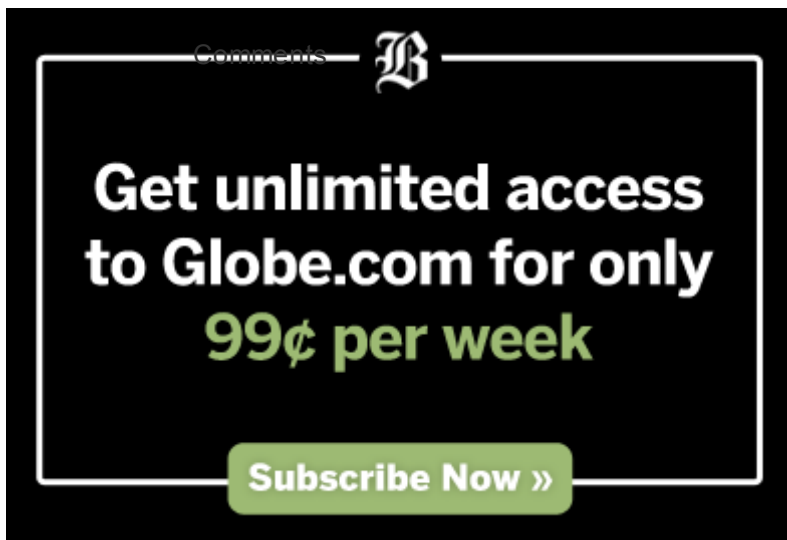
DAVID L. RYAN/GLOBE STAFF

A British company plans to relocate its CATS Academy Boston from Newton to 20 acres in Braintree that were previously home to a Kindred Healthcare nursing and rehab hospital.

By Jon Chesto | GLOBE STAFF NOVEMBER 26, 2015

BRAINTREE — Forget about the giant inflatable rat or the long picket line.

The New England Regional Council of Carpenters is taking a different route in its protest of the wage law violations that the union group says have taken place at the CATS Academy Boston construction project in Braintree for much of the year.



The union is using its political connections to help turn the heat up on the project's framing contractor, Force Corporation of Woburn, and subcontractor AB Construction. They're part of the construction team converting a former hospital to an academic campus for CATS, a private school in Newton owned by a British company.

Since the spring, union leaders say they have been gathering proof of labor abuses at the site, in particular the lack of overtime payments and failure to withhold taxes for workers.

Union officials started meeting with Braintree leaders, including Mayor Joseph Sullivan, back in April to air their grievances. They reached out to Attorney General Maura Healey's office, the state agency responsible for enforcing wage-and-hour laws. And last month, they went to the US Department of Labor's local office to complain.

It's not unusual for union leaders to try to alert authorities when they see abuses, but it's not typical for the group to embark on this kind of extended campaign involving multiple levels of government. It remains unclear just how much traction the union carpenters have received from their complaints — representatives for the Department of Labor and Healey's office declined to comment about any action their agencies might be taking — but they aren't giving up.

The Boston-based labor group says it's concerned about the unfair treatment of these workers. But there's another issue that's driving the union: the desire to make sure its contractors have an even playing field.

"For a legitimate company, whether you're union or not, you can't compete with someone who uses the underground economy," said Brian Richardson, an organizing director at the carpenters union. "These people aren't paying payroll taxes, FICA, Medicaid, all the rest. Right off the bat, there's a 30 percent savings by misclassifying."

Several carpenters who worked at the CATS site, all Spanish-speaking immigrants, recently told the Globe that they were not being paid overtime for the work they did beyond 40 hours a week; they said their regular rates were \$14 to \$17 an hour. Union officials say these workers, who have since found other jobs, also didn't have taxes taken out of their paychecks.

The union provided the Globe with an AB Construction timesheet for a worker embedded at the project on behalf of the union. It showed that he was being paid "straight time" for overtime hours and had no taxes withheld.

Force manager Claudio Da Silva said the contractor hasn't violated any labor laws on the project. AB Construction, the subcontractor, also sent a timesheet to the Globe, for a different worker, to show that taxes were in fact being taken out of the workers' paychecks.

Da Silva said this dispute is simply about bad blood between the union and the nonunion contractor. He said his team can finish a construction job more quickly and at a much higher quality than a unionized firm.

"We can take the job and do a good job for the owner," Da Silva said. "The union guys don't like that."

The project's developer, too, denied the allegations. The private school campus is

Spokesman ^{Comments} Bob LaRochelle said Force, the framing contractor, has assured the developer that it is fully insured and in full compliance with all state and federal laws. He also said the developer has no reason to believe any subcontractors are anything but compliant with all wage rules.

“*These people aren’t paying payroll taxes, FICA, Medicaid, all the rest.’*”

“We have a relationship with Force that goes back several years and includes several projects around New England,” LaRochelle said in an e-mail. “Our experience with them has been one of quality work delivered in a professional manner.”

Anderson Dos Santos, president of AB Construction, declined to comment about the union’s concerns.

A representative for CATS also declined to comment, saying it wasn’t involved in the hiring of subcontractors for the Braintree project. The British company plans to relocate its Newton operation in mid-2016 to the campus-like setting on 20 acres that were previously home to a Kindred Healthcare nursing and rehab hospital. The school will accommodate up to 700 students and 100 employees.

Richardson said the union first heard about wage abuses in March, and asked a union member to apply for a job at the site. That person worked for a few months there, Richardson said, and produced time sheets that showed no taxes were being taken out of his paychecks, and that he was not being paid overtime even though he worked more than 10 hours on some days.

This could be a tricky balance for Braintree’s mayor, who wants to see CATS Academy built: Sullivan said he is excited about the project — which town officials estimate will be worth at least \$40 million — and the full-time jobs it will provide. Braintree officials estimate that it will contribute more than \$500,000 a year in taxes.

Comments
But Sullivan also said he wants to make sure all labor laws are being followed on the site. He said he mentioned the issue in a conversation with Healey several weeks ago to make sure her office was paying attention to the union's complaints.

Merit Construction Alliance president Ron Cogliano said his group, which represents a number of nonunion contractors, doesn't condone the behavior that the union has alleged. If true, he said, it hurts his group's members as well. But he said the union's long history of making frequent complaints about nonunion firms can water down its arguments in front of regulators: "They have an insatiable appetite for dues, and bringing on as many members as they can."

Jon Chesto can be reached at jon.chesto@globe.com. Follow him on Twitter @jonchesto.

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Non-Payment of Wage and Workplace Complaint Form

Office of the Attorney General
Fair Labor Division
One Ashburton Place
Boston, MA 02108

Employee Information:

Last Name: **Sanay**

First Name: **Franklin**

Date of Birth: **10/20/1984**

Social Security Number: **XXX-XX-**

Email (optional):

Address: **40 Glenwood Street**

City: **Brockton**

State: **MA**

Zip: **02301**

Phone: **774-434-0809**

Extension:

Emergency Contact Name: **Cristian Castillo**

Emergency Contact Phone: **774-259-3243**

Emergency Contact Address: **40 Glenwood Street**

City: **Brockton**

State: **MA**

Zip: **02301**

Start date of employment: **09/13/2015**

End date of employment: **10/23/2015**

Do you speak English? **NO**

What language do you prefer we
contact you in? **Spanish**

Veteran of U.S. Military Service OR **NO**
Active Duty U.S. Military:

Describe the type of work you
performed: **General Labor/Demolition**

If applicable, reason for end of
employment? **Quit**

Did you sign a contract with the
employer? **NO**

Is an attorney representing you? **NO**

Has a community organization or
union helped you file this complaint? **YES**

If yes, please provide name(s) of the
attorney, organization, or union; as
well as a contact person, address, and
phone number (optional): **The New England Carpenters Union, Organizer Martin Sanchez, 617-869-2700, @ 750 Dorchester Ave.
Boston MA 02125.**

Did you ask to get paid the wages you
are owed? **YES**

If yes, what was the employer's response? **I called the owner several times and ask for the money that he owes me, he has differents awnsers all the time, that He has no received payment from the General Contractor,.. To wait another week, and Letely thread me with INS for my Legal Status in the Country.**

Have you taken any other action against the employer regarding this problem? **NO**

If yes, please explain (optional):

Has your employer threatened, discriminated, or retaliated against you because of your efforts to collect wages? **YES**

If yes, please explain (optional): **Thead me to report me with INS because of my Legal Status in this Country**

Employer Information:

Company name: **J. Kerrissey LLC**

Other business name(s) used by employer:

Address: **20 Sunrise Avenue**

City: **Plymouth**

State: **MA**

Zip: **02360**

Phone: **508-559-9907**

Extension:

Owner name: **Joseph Kerrissey** Owner phone number (optional):

Owner license plate number(s):

Owner Street Address: **170 Oak Hill Way**

City: **Brockton**

State: **MA**

Zip: **02301**

Number of employees in the company (optional): **7**

Local manager/supervisor name(s): **Zack**

City/town(s) where work performed: **Chelmsford, MA / Quincy, MA**

Reason For Filing Complaint:

Reason for filing complaint (must check at least one)

Minimum wage violation: **NO**

Non-payment of wages: **YES**

Vacation pay violation: **NO**

Meal period violation: **NO**

Overtime pay violation: **NO**

Sunday overtime/holiday pay: **NO**

Child labor: **NO**

Unpaid commissions: **NO**
Failure to provide personnel records: **NO**
Tips: **NO**
Prevailing wage: **NO**
Independent contractor misclassification: **NO**
Earned sick leave: **NO**
Pay-related disparity/discrimination (including based on gender): **NO**
Domestic worker law violation: **NO**
Domestic violence/abusive situation employment leave: **NO**
Retaliation: **NO**
Other: **NO**
Other:

Time period of violation(s) is:
From: **09/13/2015** To: **10/23/2015**

Your most recent rate of pay: **Hourly**
Hourly Rate: **18.00** Salary Rate: Other:
Total Amount Owed? **3,360**

Please provide detailed information about what happened and what you are owed: **I Worked in diffents jobsites for this company, and always with problems to get pay... I am the onlu one taking action ,but this company owe payments to other workers as well. I been asking several times for my payments owed, but with no luck, differents excuses all the times and letely theads to report me with the authorities for my immigration status**

Instructions:

Please attach copies of any documents that support your claim, such as pay stubs and work logs. You will have an opportunity to provide these documents electronically on the confirmation page you receive after submitting your complaint.

If you elect to mail supporting documents in on paper, DO NOT SEND ORIGINALS. Your documents will NOT be returned to you. Please retain a copy for your records and send us photocopies of any documentation you think may be helpful in resolving the complaint. Please be sure to print a copy of your submitted complaint and attach it to the supporting documents.

Please do NOT include financial account numbers, credit or debit card numbers, your complete social security number, etc., or other sensitive personal information. We will contact you if we need any of this information.

Read the Following Before Signing Below:

I. Disclosure of Your Complaint.

Public Record.
Under most circumstances, your complaint, and any documents submitted with your complaint, will be considered a public record and available to any member of the public upon request. In response to such a request, we generally will not disclose your name, address, phone number, or any other information that identifies you and will not disclose this form in response to any request that specifically seeks the complaint you submitted.

Disclosure to the Employer.

In order to resolve your complaint we may release any and all information with regard to this complaint, including the form itself, to the employer you are complaining about. However, we will not disclose your contact information.

Disclosure to Other Entities.

Your complaint and any related information may be disclosed in its entirety to other law enforcement and regulatory agencies.

II. Consulting With a Private Attorney.

The AGO cannot give you legal advice and is not able to be your private attorney, but represents the public interest. If you have any questions concerning your individual legal rights or responsibilities you should contact a private attorney.

Signed By: **Franklin Sanay**

By filling in my name above and checking this box, I acknowledge that I have read and understood the provisions above and certify that the information I have provided is true and correct to the best of my knowledge, and I adopt this as my online signature.

Declaration: **YES**

Submitted on: **12/22/2015 07:37:27 AM EST**