FMCS F-7 Notice Submission Form

F-7 Notice To the Federal Mediation and Conciliation Service

OMB NO. 3076-0004

Expires 11-30-2024

FMCS accepts the "FMCS F-7 Notice" as required by Section 8(d)(3) of the National Labor Relations Act (NLRA). Please note that FMCS does <u>NOT</u> send F-7 notices to State agencies. You can view the NLRA here directly on the National Labor Relations Board (NLRB) website.

When submitted, this online form provides you with a confirmation number for proof of submission and future reference. Please retain your confirmation number to reference in future communication with FMCS personnel.

NOTES:

- 1. The F-7 notice and confirmation number that you receive will be sent to the official filer and the chief negotiators/representatives of both parties via email.
- 2. FMCS is not responsible for inaccurate information entered into this form.
- 3. Internet Explorer is no longer supported by this form. To ensure proper submission, please use any current browser (i.e., Edge, Chrome, Firefox, Safari, etc.).
- 4. FMCS no longer accepts F7 Notice submissions by phone, mail or email.

* = required field

Please avoid typographic errors to avoid processing delays. Please do not use all capital letters when completing the form.

Notice Background

This notice is filed by the * (select)

Union Employer

Employer Information

Organization Name* (text entry or select organization name from drop down of over 5000 organization names in the FMCS database)

Address Line 1 *

Address Line 2

City *

State* (select) AK AL AR AS AZ CA CO CT DC DE FL FM GA GU HI IA ID IL IN KS KY LA MA MB MD ME MH MI MN MO MP MS MT NC ND NE NH NJ NM NV NY OH OK ON OR PA PR PW RI SC SD TN TX UM UT VA VI VT WA WI WV WY

Zip Code*

Employer Web Site

Employer Industry or Work Activity * (select) Health Care entities treating patients (including hospitals, nursing and care facilities, clinics, HMOs, ambulatory care, etc.), Manufacturing, Construction, Natural Resources (including agriculture, mining, energy extraction, refining, etc.) Transportation and Warehousing, Wholesale Trade, Retail Trade, Accommodation and Food Services, Utilities and Power Generation, Telecommunications & Information (including publishing, internet, data processing, and related services), Real Estate/Property (including development, management, sales, rental and leasing), Professional, Scientific, Financial, Business, and Organizational Services Education Arts, Entertainment, Leisure, and Recreation, Non-Profit Organization, Other Industry Not Specified Above

Employer Work Sector*(select):Private Sector, Federal Sector (pop-up if selected), Public Sector (pop-up if selected)

Federal Sector Pop-Up: The Federal Sector (agencies or related unions) should not file an F-7. If you need mediation assistance in your negotiations, use our website main page link "All Federal Sector Service Requests".

Public Sector Pop-Up: The Public Sector (municipality, city, county, or state) should not file an F-7. If you need mediation assistance in your negotiations, send an email to <u>clientservices@fmcs.gov</u>.

To expedite your request, please provide the following information:

- 1. Your contact information.
- 2. Your L/M counterpart's contact information.
- 3. Type of service requested (contract or grievance mediation, training, other and explain).
- 4. Location (city/state) of the bargaining unit.
- 5. Will the parties be in-person or virtual.
- 6. Number of people expected to attend.

Employer Chief Negotiator or Labor Relations Director

First Name *

Last Name *

Business Email *

Confirm Email *

Primary Phone *

Ext

CBA and Bargaining Unit Information

Type of Upcoming Negotiation* (select) Successor Contract (Expiring existing contract), Contract Re-Opener (Mid-term re-opener of existing contract), Initial Contract (Initial or First contracts usually do not file. This may cause a duplication in the system since we are already notified by the NLRB. These cases automatically get assigned a mediator and you should be contacted shortly. If you need a mediator, email us at clientservices@fmcs.gov and indicate that your mediator request is related to an initial contract and who the involved parties are.)

Estimated Bargaining Unit Size * (select) 2 to 20, 21 to 50, 51 to 100, 101 to 200, 201 to 300, 301 to 400, 401 to 500, 501 to 600, 601 to 700, 701 to 800, 801 to 900, 901 to 1000, 1001 to 1100, 1101 to 1200, 1201 to 1300, 1301 to 1400, 1401 to 1500, 1500+, Number if over 1500.

Contract Expiration Date *

Contract Reopen Date* (appears if Contract Re-Opener is selected)

Location of Negotiation

City *

State * (select) AK AL AR AS AZ CA CO CT DC DE FL FM GA GU HI IA ID IL IN KS KY LA MA MB MD ME MH MI MN MO MP MS MT NC ND NE NH NJ NM NV NY OH OK ON OR PA PR PW RI SC SD TN TX UM UT VA VI VT WA WI WV WY

Zip Code *

Union Information

Union Full Name * (drop down of over 5000 union names in the FMCS database or text entry via selection of "Other")

Union Unit Number: (Local, Lodge, District, Chapter, etc.)

Address Line 1 *

Address Line 2

City *

| State * (select) AK AL AR AS AZ CA CO CT DC DE FL FM GA GU HI IA ID IL IN KS KY LA MA MB MD ME MH MI MN MO MP MS MT NC ND NE NH NJ NM NV NY OH OK ON OR PA PR PW RI SC SD TN TX UM UT VA VI VT WA WI WV WY |
|--|
| Zip Code * |
| Primary Function of Bargaining Unit Employees (Nurses, Janitors, Clerks, Bldg. Engineers, etc.) |
| Union Chief Negotiator or Business Agent |
| First Name * |
| Last Name * |
| Business Email * |
| Confirm Email * |
| Primary Phone * |
| Ext |
| |
| Official Filing This Notice |
| First Name * |
| Last Name * |
| Title * |
| Business Email * |
| Confirm Email * |
| Primary Phone * |
| Ext |
| Please be patient while submitting your F-7 to FMCS. Do not click the 'Submit' button more than once. Doing so may cause a duplicate submission and no confirmation page. |

1. The confirmation that you submitted the F-7 Notice will be sent to the filer and the chief negotiators/representatives of both parties via e-mail

NOTE:

2. You should receive a date, time **AND** a confirmation number on the page you receive after you submit online

If there is no confirmation number on the page, your notice was not successfully received. Please contact FMCS if this occurs at F7notice@fmcs.gov.

Privacy Act Statement. 29 U.S.C. § 172, et seq., authorize the FMCS to require the reporting of this information. The primary use of the information on this form is to allow FMCS officials to provide mediation services. Additional disclosures of the information on this report may be made: (1) to a Federal, State, or local law enforcement agency if FMCS becomes aware of a violation or potential violation of law or regulation; (2) to a court or party in a court or Federal administrative proceeding if the Government is a party or in order to comply with a judge-issued subpoena; (3) to the National Archives and Records Administration or the General Services Administration in record management inspections; (4) to the Office of Management and Budget during legislative coordination on private relief legislation; and (5) in a judicial or administrative proceeding if the information is relevant to the subject matter.(6) This information may be used by FMCS to contact parties concerning trainings, events, presentations, conferences, and other education opportunities and programs. This information will not be disclosed to any requesting person unless authorized by law. Failure to provide the requested information could result in FMCS's delay or inability to provide services.