



**PUBLIC EMPLOYMENT RELATIONS COMMISSION**  
 112 Henry Street NE, Suite 300, Olympia WA 98506  
 PO Box 40919, Olympia WA 98504-0919  
 Phone: 360.570.7300 Email: filing@perc.wa.gov  
 Web: www.perc.wa.gov

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 OLYMPIA, WA  
 FEB - 6 2014  
 PUBLIC EMPLOYMENT  
 RELATIONS COMMISSION

**REPRESENTATION PETITION**

Amended Petition in Case # \_\_\_\_\_

Applicable Rules: Chapters 10-08, 391-08 and 391-25 WAC

**PARTIES** Include information for all parties involved.

**EMPLOYER** Coulee Medical Center  
 Contact J. Scott Graham, M.S.  
 Address 411 Fortyn Rd.  
 City, State, ZIP Grand Coulee, WA 99133  
 Telephone 509-633.1911 Ext. \_\_\_\_\_  
 Email \_\_\_\_\_

**PETITIONER** U.F.C.W. Local 1439  
 Contact Austin DePaolo  
 Address 1719 N. Atlantic Ave  
 City, State, ZIP Spokane, WA 99205  
 Telephone 509-328-6090 Ext. 203  
 Email austin@ufcw1439.org

**CURRENT BARGAINING REPRESENTATIVE**  
 (If one exists) N/A  
 Contact \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, ZIP \_\_\_\_\_  
 Telephone \_\_\_\_\_ Ext. \_\_\_\_\_  
 Email \_\_\_\_\_

**TYPE OF REQUEST** Select One. The petitioner requests:

- RECOGNITION** to be certified as the representative of employees currently unrepresented.
- CHANGE OF REPRESENTATIVE** to be certified as the representative of employees currently represented by another organization.
- DECERTIFICATION** to no longer be represented by the current organization.
- INCLUSION OF UNREPRESENTED EMPLOYEES** to have a group of employees added to an existing bargaining unit as described in WAC 391-25-440.
- EMPLOYER PETITION** a determination by the commission according to WAC 391-25-090.

**BARGAINING UNIT**

Description of Bargaining Unit: Indicate inclusions / exclusions

All full-time, part-time and per diem registered nurses included, supervisors and guards excluded

Department or Division Hospital and Clinic  
 Number of Employees in Unit 28  
 Collective Bargaining Agreement \_\_\_\_\_  
 If one exists, the bargaining unit's most recent collective bargaining agreement must be filed with this petition.  
 Contract Expiration Date: \_\_\_\_\_

**OTHER RELEVANT FACTS**

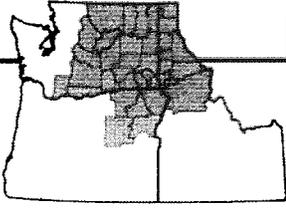
Additional information relating to the proposed bargaining unit is attached.

**SHOWING OF INTEREST**

The petition must be filed with a showing of interest indicating support of at least 30% of the employees in the bargaining unit. The showing of interest cards are confidential and are **ONLY** filed with PERC.

**AUTHORIZED SIGNATURE FOR PETITIONER**

Print Name Austin DePaolo Telephone 509-328-6090 Ext. 203  
 Title Union Representative Email austin@ufcw1439.org  
 Address 1719 N. Atlantic Ave  
 City, State, ZIP Spokane, WA 99205 Signature *Austin DePaolo* Date 2/4/2014

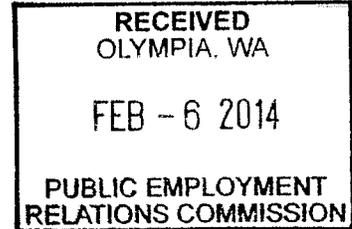


# Local 1439

1719 N. Atlantic St. • Spokane, WA 99205 • (509) 328-6090 • FAX (509) 326-2208  
LARRY HALL, President RON BANKA, Secretary-Treasurer

*SENT VIA FACSIMILE AND CERTIFIED U.S. MAIL*

February 4, 2014



Public Employment Relation Commission  
P.O. Box 40919  
Olympia, WA 98504-0919  
Fax: (360) 570-7334

To Whom it May Concern:

Please find enclosed a copy of a representation petition filed by United Food and Commercial Workers Local 1439 ("Union") requesting certification as the exclusive bargaining representative of the registered nurses at Coulee Medical Center in Grand Coulee, Washington.

Please contact me if you have any questions or concerns.

Sincerely,

Austin DePaolo  
UFCW Local 1439  
(509) 328-6090  
[austin@ufcw1439.org](mailto:austin@ufcw1439.org)

Enclosures

cc: Rick Chase  
J. Scott Graham (by certified mail only)

Chartered by United Food & Commercial Workers  
International Union, CLC

