



# REPRESENTATION PETITION

Is this an amended petition?  Yes  No If yes, provide the case number: \_\_\_\_\_

### PARTIES Include information for all parties involved.

**EMPLOYER** Dept. of Enterprise Services

**Contact** Harold Goldes

**Title** Information Governance Legal Council

**Address** PO Box 41401

**City, State, ZIP** Olympia, WA 98504-1401

**Phone** 360-407-8768 **Ext.** \_\_\_\_\_

**Email** harold.goldes@des.wa.gov

**PETITIONER** Wash. Federation of State Employees

**Contact** Herb Harris

**Title** Manager of PERC Activities

**Address** 1212 Jefferson St. Ste. 300

**City, State, ZIP** Olympia, WA 98501

**Phone** 360-352-7603 **Ext.** \_\_\_\_\_

**Email** herbh@wfse.org

**CURRENT BARGAINING REPRESENTATIVE**  
(If One Exists) \_\_\_\_\_

**Contact** \_\_\_\_\_

**Title** \_\_\_\_\_

**Address** \_\_\_\_\_

**City, State, Zip** \_\_\_\_\_

**Phone** \_\_\_\_\_ **Ext.** \_\_\_\_\_

**Email** \_\_\_\_\_

### TYPE OF REQUEST Select ONE of the following.

- NEW ORGANIZING** to be certified as the representative of employees currently unrepresented.
- ADD UNREPRESENTED EMPLOYEES** to an existing bargaining unit as described in WAC 391-25-080.
- CHANGE REPRESENTATIVE** of existing bargaining unit.
- REMOVE REPRESENTATIVE** of existing bargaining unit.

### BARGAINING UNIT

For a new organizing petition, fill out section 2. For a petition to add unrepresented employees, fill out **both** sections 1 and 2. For a petition to change or remove the representative, fill out section 1.

#### SECTION 1—Describe the Existing Bargaining Unit:

Number of Employees in Existing Unit \_\_\_\_\_

#### SECTION 2—Describe the Proposed Bargaining Unit:

Number of Employees in Proposed Unit 228

If a CBA exists, what is the expiration date? \_\_\_\_\_

### SHOWING OF INTEREST

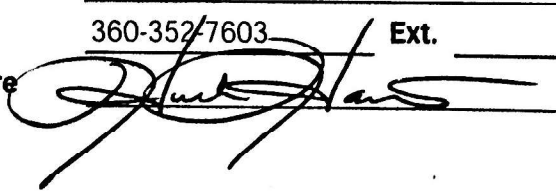
A showing of interest indicating the support of at least 30 percent of the employees in the bargaining unit must be filed with the petition. See instructions for more information.

### PETITIONER REPRESENTATIVE

**Name** Herb Harris

**Address** 1212 Jefferson St. Ste. 300

**Phone** 360-352-7603 **Ext.** \_\_\_\_\_

**Signature** 

**Title** Manager of PERC Activities

**City, State, ZIP** Olympia, WA 98501

**Email** herbh@wfse.org

**Date** 10/11/2024



**STATE HEADQUARTERS OFFICE**

1212 JEFFERSON ST. S.E., SUITE 300 • OLYMPIA, WA 98501-2332  
800-582-8002 • [www.wfse.org](http://www.wfse.org)

October 11, 2024

Public Employment Relations Commission  
112 Henry St. NE, Ste. 300  
Olympia, WA 98504

Dear Director Sellars:

The WFSE is filing this representation petition under RCW 41.56.510(2)(a)(iii),

A statewide unit for language access providers who provide spoken language interpreter services for any state agency through the department of enterprise services, excluding language access providers included in (a)(i) (DSHS) and (ii)(L&I) of this subsection.

Thank you for your prompt attention to this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "Herb Harris". The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Herb Harris  
Manager of PERC Activities

**OLYMPIA FIELD OFFICE**  
908 Columbia St. SW, Suite 500  
Olympia, WA 98501

**SEATTLE FIELD OFFICE**  
6363 7th Ave. S., Suite 220  
Seattle WA, 98108-3407

**SPOKANE FIELD OFFICE**  
222 W. Mission Ave., Suite 201  
Spokane, WA 99201-2301

**TACOMA FIELD OFFICE**  
6003 Tacoma Mall Blvd.  
Tacoma, WA 98409-0820

MEMBER CONNECTION CENTER: 833-MCC-WFSE (833-822-9373)




**Additional Information**

**Department of Enterprise Services – Language Access Providers**

**Proposed Bargaining Unit Description –**

**A statewide unit for language access providers who provide spoken language interpreter services for any state agency through the department of enterprise services, excluding language access providers included in other bargaining units.**

**October 11, 2024**



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**Herb Harris**

**Manager of PERC Activities, WFSE**

## **Certificate of Service**

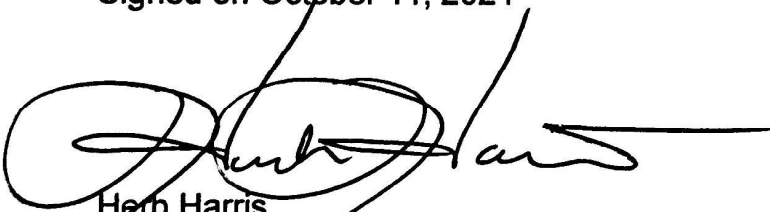
**Department of Enterprise Services**

**Language Access Providers**

As per PERC Commission requirements and WAC 391-08-120(4), I, Herb Harris do certify that the following facts regarding servicing of the Representation Petition is true.

On October 11, 2024, I sent via email a copy of the petition to Harold Goldes, DES and to OFM/LRD. To the best of my knowledge and belief these are the representatives of the other parties that should be notified to fulfill our obligations under WAC 391-08-120(4).

Signed on October 11, 2024

A handwritten signature in black ink, appearing to read 'Herb Harris', with a long horizontal stroke extending to the right.

Herb Harris  
Manager of PERC Activities

**From:** [Herb Harris](#)  
**To:** [PERC, Filing \(PERC\)](#); [Goldes, Harold \(DES\)](#); [OFM mi Labor Relations](#)  
**Cc:** [Tim Tharp](#); [Kayla Rider](#); [Benjamin Sercombe](#)  
**Subject:** New Representation Petition DES-LAP  
**Date:** Friday, October 11, 2024 9:57:50 AM  
**Attachments:** Petition.pdf

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External Email

Hello,

Please find a petition to represent the Language Access Providers at the Department of Enterprise Services.

A separate email will contain the showing of interest cards.

Thank you,

Herb

Herb Harris  
WFSE – Manager of PERC Activities  
1212 Jefferson St. SE Ste. 300  
Olympia, WA 98501  
Cell 360-402-4570  
Office 360-352-7603  
[herbh@wfse.org](mailto:herbh@wfse.org)