



STATE HEADQUARTERS OFFICE
1212 JEFFERSON ST. S.E., SUITE 300 • OLYMPIA, WA 98501-2332
800-562-6002 • www.wfse.org

March 7, 2025

Michael Sellars, Executive Director
Public Employment Relations Commission
PO Box, WA 98504-0919

Dear Mr. Sellars:

We are hereby filing a request to be certified as the exclusive bargaining representative for all non-supervisory employees of the Commission on Hispanic Affairs.

Our records show that we have signed authorization cards from a majority of employees in this unit and ask that a cross check of employment records is conducted.

Thank you for your attention to the request.

Sincerely,

A handwritten signature in blue ink, appearing to read "Herb Harris".

Herb Harris
Manager of PERC Activities



REPRESENTATION PETITION

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

PARTIES Include information for all parties involved.

EMPLOYER Commission on Hispanic Affairs
Contact Maria Siguenza
Title Executive Director
Address PO Box 40924
City, State, ZIP Olympia, WA 98504
Phone 360-725-5660 **Ext.** _____
Email maria.siguenza@cha.wa.gov

PETITIONER Wash. Federation of State Employees
Contact Herb Harris
Title Manager of PERC Activities
Address 1212 Jefferson St, SE 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 _____

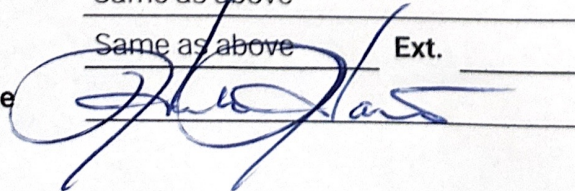
SECTION 2—Describe the Proposed Bargaining Unit:
 All non-supervisory employees of the Commission on Hispanic Affairs. Excluding all other employees.
Number of Employees in Proposed Unit 5

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 Same as above
Phone Same as above **Ext.** _____
Signature 

Title Manager of PERC Activities
City, State, ZIP Same as above
Email Same as above
Date 3/7/2025

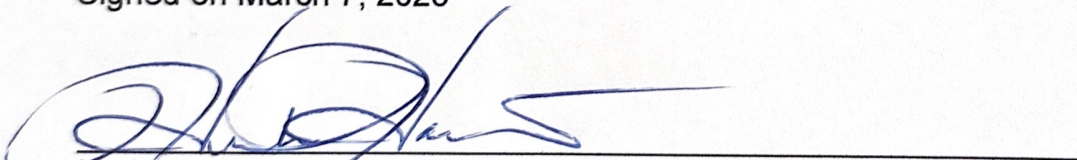
Certificate of Service

Commission on Hispanic Affairs

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 March 7, 2025, I sent via email a copy of the petition to Maria Siguenza, Executive Director, CHA and Office of Labor Relations/OFM. To the best of my knowledge and belief these are the representatives of the other parties that would need to be notified to fulfill our obligation under WAC 391-08-120(4).

Signed on March 7, 2025



Herb Harris
Manager of PERC Activities

From: [Herb Harris](#)
To: [PERC, Filing \(PERC\)](#); [OFM mi Labor Relations](#); [Siquenza, Maria \(CHA\)](#)
Cc: [Tim Tharp](#); [Kayla Rider](#); [Shannon Madden](#)
Subject: New Rep petition
Date: Friday, March 7, 2025 4:22:42 PM
Attachments: Complete Petition.pdf

External Email

Dear Parties,

Please find attached a representation petition for all non-supervisory civil service employees of the Commission on Hispanic Affairs.

If you have any problems opening the attachment, please let me know.

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