



REPRESENTATION PETITION

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

PARTIES Include information for all parties involved.

EMPLOYER CITY OF EVERSON
Contact MANDY HADEEN
Title CITY CLERK
Address P.O. BOX 315 - 111 W Main St
City, State, ZIP EVERSON, WA 98247
Phone (360) 966-3411 **Ext.** 1100
Email mhadeen@ci.everson.wa.us

PETITIONER Everson Police Officer Association
Contact Derrick Charlton
Title President
Address P.O. Box 315 - 111 W Main ST
City, State, ZIP Everson, WA 98247
Phone (509) 280-6121 **Ext.** _____
Email dvcharlton@yahoo.com

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:

ALL FULL-TIME UNIFORMED EMPLOYEES OF THE CITY OF EVERSON, EXCLUDING RANKS ABOVE SERGEANT AND CONFIDENTIAL EMPLOYEES.

Number of Employees in Existing Unit 6

SECTION 2—Describe the Proposed Bargaining Unit:

Number of Employees in Proposed Unit _____

If a CBA exists, what is the expiration date? 12/31/25

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 A.W. Buster McGehee
Address 2230 Collins Road
Phone 253-405-7698 **Ext.** _____
Signature

Title NFOP Labor Specialist
City, State, ZIP Buckley, WA 98321
Email awmcgehee@fop.net
Date October 19th, 2025

BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION
STATE OF WASHINGTON

EVERSON POLICE OFFICERS
ASSOCIATION

v.

CITY OF EVERSON

Case Number

CERTIFICATE OF SERVICE

I certify that I served a copy of this (title of document) Representation Petition
on all parties or their counsel of record on (date) 10/19/2025

To: Name Mandy Hadeen Organization City of Everson Address P.O. Box 315 – 111 W Main Street City, State, ZIP Emerson, WA 98247 Email mhadeen@ci.everson.wa.us Fax	☒ E-mail ☐ First Class U.S. Mail ☐ Fax ☐ Certified U.S. Mail ☐ Hand Delivery ☐ Registered U.S. Mail
To: Name Organization Address City, State, ZIP Email Fax	☐ E-mail ☐ First Class U.S. Mail ☐ Fax ☐ Certified U.S. Mail ☐ Hand Delivery ☐ Registered U.S. Mail
To: Name Organization Address City, State, ZIP Email Fax	☐ E-mail ☐ First Class U.S. Mail ☐ Fax ☐ Certified U.S. Mail ☐ Hand Delivery ☐ Registered U.S. Mail

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Date signed and submitted October 19th, 2025

Print Name A.W. Buster McGehee

Signature





Certificate of Service (2019)

From: [Buster McGehee](#)
To: [PERC, Filing \(PERC\)](#)
Subject: Everson Police Officers Association Petition
Date: Sunday, October 19, 2025 2:15:50 PM
Attachments: Everson Police Association PERC Petition 10.19.25.pdf

External Email

PERC Filing

Attached you will find the following documents

Representation Petition
Showing of Interest cards
Certificated of service

Contact me if you have any questions.

Buster McGehee



Buster McGehee

Labor Specialist

National Fraternal Order of Police

253-405-7698

awmcgehee@fop.net

WARNING

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