



# UNFAIR LABOR PRACTICE COMPLAINT

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

## PARTIES Include information for all parties involved.

### COMPLAINANT

Contact \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

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

Email \_\_\_\_\_

### UNION

Contact \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

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

Email \_\_\_\_\_

### EMPLOYER

Contact \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

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

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

Email \_\_\_\_\_

## ALLEGED VIOLATION

Indicate who the alleged violation is against:

Employer  Union  Both\*

\*If the alleged violation is against both the union and the employer, two separate complaints must be filed with two statements of facts describing the alleged violation(s) against each respondent.

## BARGAINING UNIT

If the alleged violation relates to more than one bargaining unit, a separate complaint must be filed for each unit.

Identify Bargaining Unit \_\_\_\_\_

Collective Bargaining Agreement (CBA) \_\_\_\_\_

Have the Parties Ever Had a CBA?  Yes  No

Start Date \_\_\_\_\_ End Date \_\_\_\_\_

## STATEMENT OF FACTS

Prepare and submit with this complaint a statement of facts using numbered paragraphs to clearly and concisely describe the alleged violation(s).

The following must be included:

- Specific allegations and required elements;
- Times, dates, places, and participants in occurrences;
- Whether a related grievance has been filed and its status;
- A description of the remedies requested.

For more information refer to WAC 391-45-050.

## COMPLAINANT REPRESENTATIVE

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Signature \_\_\_\_\_

Title \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Email \_\_\_\_\_

Date \_\_\_\_\_

# Instructions for Filing an Unfair Labor Practice Complaint

*Do not file this page with PERC.*

## Who Can File a Complaint?

The complainant is the party who files the complaint and may be an individual employee, a union, or an employer.

If the complainant is the union or employer, contact information does not need to be entered twice. Indicate that the union or the employer is the same as the complainant.

For more detailed information about violations and required elements, please refer to our website at [perc.wa.gov/unfair-labor-practice](https://perc.wa.gov/unfair-labor-practice).

For applicable rules, visit [perc.wa.gov/laws-rules](https://perc.wa.gov/laws-rules) and refer to chapters 10-08, 391-08, and 391-45 WAC.

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## Filing Time Frame

A complaint must be filed within 6 months from the date the complainant knew or should have known of the alleged violation.

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## Filing and Service

Documents may be submitted to PERC by email attachment, by fax, by mail, or in person. Email filing is preferred and no paper copies are required.

- Email to [filing@perc.wa.gov](mailto:filing@perc.wa.gov)
- Fax to 360.570.7334
- Mail to PO Box 40919, Olympia WA 98504-0919
- Hand Deliver to 112 Henry St NE, Olympia, WA 98506

Service is required on all parties to the case and is considered complete when the document is received by email, fax, or hand delivery or when the document is put into the mail.

A certificate of service is required to show when, how, and on whom the document was served. A certificate of service form can be found at [perc.wa.gov/file-a-case](https://perc.wa.gov/file-a-case).