## BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION STATE OF WASHINGTON

Ň	Petitioner/Complainant/Filing Party /.	Case Number	
	Respondent/Responding Party		
I certify that I served a copy of this <i>(title of document)</i> on all parties or their counsel of record on <i>(date)</i>			
To:	Name Organization	E-mail	🗌 First Class U.S. Mail
	Address		
	City, State, ZIP	🗌 Fax	Certified U.S. Mail
	Email Fax	Hand Delivery	🗌 Registered U.S. Mail
To:	Name		
	Organization	🗌 E-mail	🗌 First Class U.S. Mail
	Address City, State, ZIP	🗌 Fax	Certified U.S. Mail
	Email	Hand Delivery	🗌 Registered U.S. Mail
	Fax		
To:	Name		
	Organization	🗌 E-mail	🗌 First Class U.S. Mail
	Address	☐ Fax	Certified U.S. Mail
	City, State, ZIP		
	Email Fax	Hand Delivery	Registered U.S. Mail
	1 0/		

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 \_\_\_\_\_

Print Name



Signature