



STATE HEADQUARTERS OFFICE

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June 14, 2019

Michael Sellars, Executive Director
Public Employment Relations Commission
PO Box, 40919
Olympia, WA 98504

Dear Mr. Sellars:

This petition is filed under WAC 391-25-440, the Self Determination rule.

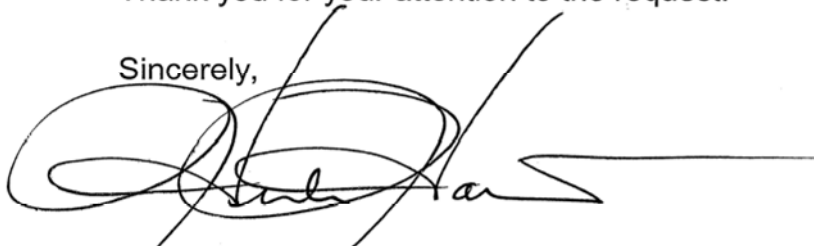
We are hereby filing a request to be certified as the exclusive bargaining representative for certain civil service employees at the Department of Social and Health Services.

We are filing to add the classification of Developmental Disability Administrator to the existing DSHS Institutions Supervisors bargaining unit.

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,



Herb Harris
Coordinator of PERC Activities

OLYMPIA FIELD OFFICE
906 Columbia St. SW, Suite 500
Olympia, WA 98501
(360) 786-1303
1-800-624-0256
Fax: (360) 780-1338

SEATTLE FIELD OFFICE
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222 W. Mission Ave., Suite 201
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TACOMA FIELD OFFICE
6003 Tacoma Mall Blvd.
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VANCOUVER FIELD OFFICE
11818 SE Mill Plain Blvd., Suite 202
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1-800-967-9356
Fax: (360) 735-1121

YAKIMA FIELD OFFICE
3804 Kern Road, Suite B
Yakima, WA 98902-7801
(509) 452-9855
1-800-439-9855
Fax: (509) 457-1939



REPRESENTATION PETITION

Is this an amended petition? ☐ Yes ☐ No If yes, enter the case number: _____**PARTIES** Include information for all parties involved.

EMPLOYER Dept. of Social and Health Services
Contact Anthony Ventresco
Title Employee Relation Manager
Address PO Box 54854
City, State, ZIP Olympia, WA 98504-5854
Telephone 509-368-4757 Ext. _____
Email ventra@dshs.wa.gov

PETITIONER Wash. Federation of State Employees
Contact Herb Harris
Title Coordinator of PERC Activities
Address 1212 Jefferson St. SE Ste. 300
City, State, ZIP Olympia, WA 98501
Telephone 360-352-7603 Ext. _____
Email herbh@wfse.org

CURRENT BARGAINING REPRESENTATIVE

If one exists _____
Contact _____
Title _____
Address _____
City, State, ZIP _____
Telephone _____ Ext. _____
Email _____

TYPE OF REQUEST Select ONE of the following.

- ☐ **RECOGNITION** to be certified as the representative of employees currently unrepresented.
- ☒ **INCLUSION OF UNREPRESENTED EMPLOYEES** to have a group of employees added to an existing bargaining unit as described in WAC 391-25-440.
- ☐ **CHANGE OF REPRESENTATIVE** to be certified as the representative of employees currently represented by another organization.
- ☐ **DECERTIFICATION** to no longer be represented by the current organization.
- ☐ **EMPLOYER PETITION** a determination by the commission according to WAC 391-25-090.

BARGAINING UNITDepartment or Division DDANumber of Employees in Bargaining Unit 292 adding 80**Describe the existing or proposed bargaining unit:**

Adding the Developmental Disability Administrators to the Institutions supervisors bargaining unit.
The DSHS Institutions supervisors bargaining unit was last describe in PERC decision 12689-A.

Collective Bargaining Agreement (CBA):

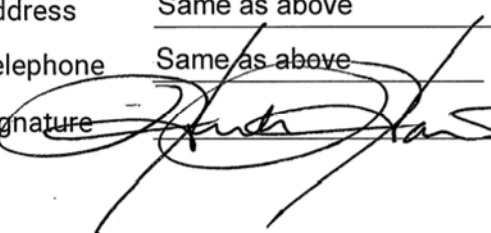
If one exists, the bargaining unit's most recent collective bargaining agreement must be filed with this petition.

CBA Expiration Date _____

SHOWING OF INTEREST The showing of interest cards are confidential and are filed ONLY with PERC.

The petition must be filed with a showing of interest indicating support of at least 30 percent of the employees in the bargaining unit. Showing of interest cards may be submitted electronically, provided the copy is legible.

AUTHORIZED CONTACT FOR PETITIONER

Name	<u>Herb Harris</u>	Title	<u>Coordinator of PERC Activities</u>
Address	<u>Same as above</u>	City, State, ZIP	<u>Same as above</u>
Telephone	<u>Same as above</u> Ext. _____	Email	<u>Same as above</u>
Signature		Date	<u>6/14/19</u>

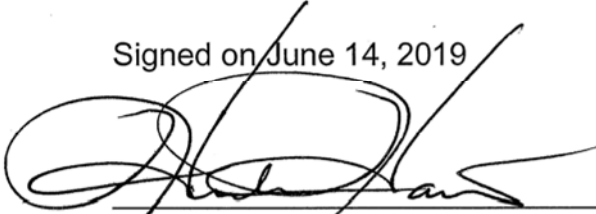
Certificate of Service

Department of Social and Health Services
Self Determination Petition

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 June 14, 2019 I sent via email, a copy of the petition to Anthony Ventresco, DSHS and Franklin Plaistowe, OFM/HR. In addition, the petition was hand filed with PERC which included the showing of interest. 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 June 14, 2019



Herb Harris
Coordinator of PERC Activities

From: [Herb Harris](#)
To: [PERC, Filing \(PERC\)](#); [Plaistowe, Franklin \(OFM\)](#); [Ventresco, Tony \(DSHS/HRD\)](#)
Cc: [Tim Tharp](#); [Benjamin Peterson](#)
Subject: Representation Petition
Date: Friday, June 14, 2019 4:37:59 PM
Attachments: Petition w-o showing of Interest.pdf

Hello

Please find an attached petition to add positions to the DSHS Institutions Supervisors bargaining unit.

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

Thanks

Herb

Herb Harris
Coordinator of PERC Activities
(360) 352-7603
1-800-562-6002
herbh@wfse.org