



REPRESENTATION PETITION

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

PARTIES Include information for all parties involved.

EMPLOYER King County

Contact Megan Pedersen

Title KC Office of Labor Relations Director

Address 500 4th Ave Room 450

City, State, ZIP Seattle, WA 98104

Telephone (206) 263-2898 Ext. _____

Email Megan.Pedersen@kingcounty.gov

PETITIONER Prof. & Tech. Employees Local 17

Contact Paul Marvy

Title Projects Administrator

Address 2900 Eastlake Ave E, Suite 300

City, State, ZIP Seattle, WA 98102

Telephone (206) 328-7321 Ext. 109

Email Paul@protec17.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 UNIT

Department or Division Dept. of Cmty & Hum Svcs

Number of Employees in Bargaining Unit 8

Describe the existing or proposed bargaining unit:
All Project/Program Manager I, II, III, IV in All Home.

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 Paul Marvy Title Projects Administrator

Address 2900 Eastlake Ave E, Suite 300 City, State, ZIP Seattle, WA 98102

Telephone (206) 328-7321 Ext. 109 Email Paul@protec17.org

Signature Date August 21, 2019

**BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION
STATE OF WASHINGTON**

Protec17

Case Number

Petitioner/Complainant/Filing Party

v.

CERTIFICATE OF SERVICE

King County

Respondent/Responding Party


I certify that I served a copy of this *(title of document)* Representation Petition (All Home PPMs)
on all parties or their counsel of record on *(date)* 8/21/19

To:	Name	Megan Pederson	<input checked="" type="checkbox"/> E-mail <input type="checkbox"/> Fax <input type="checkbox"/> Hand Delivery	<input type="checkbox"/> First Class U.S. Mail <input type="checkbox"/> Certified U.S. Mail <input type="checkbox"/> Registered U.S. Mail
	Organization	King County Office of Labor Relations		
	Address			
	City, State, ZIP			
	Email	Megan.Pedersen@kingcounty.gov		
	Fax			
To:	Name	Kristi Knieps	<input checked="" type="checkbox"/> E-mail <input type="checkbox"/> Fax <input type="checkbox"/> Hand Delivery	<input type="checkbox"/> First Class U.S. Mail <input type="checkbox"/> Certified U.S. Mail <input type="checkbox"/> Registered U.S. Mail
	Organization	King County Office of Labor Relations		
	Address			
	City, State, ZIP			
	Email	Kristi.Knieps@kingcounty.gov		
	Fax			
To:	Name		<input type="checkbox"/> E-mail <input type="checkbox"/> Fax <input type="checkbox"/> Hand Delivery	<input type="checkbox"/> First Class U.S. Mail <input type="checkbox"/> Certified U.S. Mail <input type="checkbox"/> Registered U.S. Mail
	Organization			
	Address			
	City, State, ZIP			
	Email			
	Fax			

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 8/21/2019

Print Name Paul Marvy

Signature 



From: [Paul Marvy](#)
To: [PERC, Filing \(PERC\)](#)
Subject: Representation Petition Protec17 & King County
Date: Wednesday, August 21, 2019 4:08:02 PM
Attachments: Rep Petition All Home PPMs.pdf
Cert of Service.pdf
MBR APP SCANS (8).zip

Please see the attached filings. Thank you.

Paul Marvy

PROTEC17 Projects Administrator

Phone: 800-783-0017 ext. 109

Email: paul@protec17.org

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