



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 Xuan-Trang Tran-Thien

Title Organizer

Address 2900 Eastlake Ave E, Suite 300

City, State, ZIP Seattle, WA 98102

Telephone (206) 328-7321 Ext. 106

Email Tran-Thien@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 KC Dept of Cmty & Human Svcs

Number of Employees in Bargaining Unit 17

Describe the existing or proposed bargaining unit:

All regular, probationary, provisional, temporary and term-limited temporary employees whose job classifications are Business & Finance Officer III, Business & Finance Officer IV, Contract Specialist I, Contract Specialist II and Contract Specialist III in King County's Dept of Community & Human Services to be added to the existing Professional & Technical Employees Local 17 Master Labor Agreement, Appendix 66.

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 December 31, 2020

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>Xuan-Trang Tran-Thien</u>	Title	<u>Organizer</u>
Address	<u>2900 Eastlake Ave E, Suite 300</u>	City, State, ZIP	<u>Seattle, WA 98102</u>
Telephone	<u>(206) 328-7321</u> Ext. <u>106</u>	Email	<u>Tran-Thien@protec17.org</u>
Signature	<u>/s/Xuan-Trang Tran-Thien</u>	Date	<u>July 30, 2020</u>

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

Professional & Technical Employees Local
17 (PROTEC17)

Petitioner/Complainant/Filing Party

v.

King County

Respondent/Responding Party

Case Number

CERTIFICATE OF SERVICE

I certify that I served a copy of this *(title of document)* Representation Petition (DCHS BFO III-IV & CS-1)
on all parties or their counsel of record on *(date)* July 30, 2020

To:	Name	Megan Pedersen		
	Organization	King County Office of Labor Rela	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	400 5th Ave, Room 450	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	Seattle, WA 98104	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email	Megan.Pedersen@kingcounty.g		
	Fax	(206) 205-1395		
To:	Name	David Levin		
	Organization	King County Office of Labor Rela	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	400 5th Ave, Room 450	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	Seattle, WA 98104	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email	David.Levin@kingcounty.gov		
	Fax	(206) 205-1395		
To:	Name			
	Organization		<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address		<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP		<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	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 July 30, 2020

Print Name Xuan-Trang Tran-Thien

Signature /s/Xuan-Trang Tran-Thien



From: [Xuan-Trang Tran-Thien](#)
To: [PERC, Filing \(PERC\)](#)
Cc: [Paul Marvy](#)
Subject: Petition for Representation - PROTEC17 & King County
Date: Thursday, July 30, 2020 3:31:55 PM
Attachments: PERC Filing-CoS for KC DCHS BFO III-IV & CS I-III 20200730.pdf
PERC Filing-Rep Petition for KC DCHS BFO III-IV & CS I-III 20200730.pdf
PERC Filing-Cards for KC DCHS BFO III-IV & CS I-III 20200730.pdf
PROTEC17 CBA with King County (DCHS) Effective thru 20201231.pdf

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Xuan-Trang Tran-Thien (she/her/hers)

PROTEC17 Organizer

(206) 328-7321 / (800) 783-0017 ext. 106

Tran-Thien@PROTEC17.org

2900 Eastlake Ave E, Suite 300

Seattle, WA 98102

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