



# REPRESENTATION PETITION

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

**PARTIES** Include information for all parties involved. **TYPE OF REQUEST** Select ONE of the following.

**EMPLOYER** City of Seattle  
Contact Jana Sangy  
Title Director of Labor Relations  
Address 700 5th Ave, Suite 5500  
City, State, ZIP Seattle, WA 98104  
Telephone (206) 684-7912 Ext. \_\_\_\_\_  
Email jana.sangy@seattle.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 \_\_\_\_\_

- 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** Sea Police Dept/Hum Svcs Dept  
**Number of Employees in Bargaining Unit** 7

**Describe the existing or proposed bargaining unit:**  
  
All regular, probationary and temporary employees whose job classification is Victim Advocate in the City of Seattle's Police Department and Human Services Department to be added to the existing PROTEC17 bargaining unit included in the Collective Bargaining Agreement - Appendix A - Professional Unit.

**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, 2021

**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 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  
Signature /s/Xuan-Trang Tran-Thien Date September 30, 2020

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

Professional & Technical Employees  
Union Local 17 (PROTEC17)

Petitioner/Complainant/Filing Party

v.

City of Seattle

Respondent/Responding Party

Case Number

**CERTIFICATE OF SERVICE**

I certify that I served a copy of this (*title of document*) Representation Petition (HSD/SPD Victim Adv) on all parties or their counsel of record on (*date*) 09/30/2020

To:	Name	Jana Sangy		
	Organization	City of Seattle	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	700 5th Ave, Suite 5500	<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	jana.sangy@seattle.gov		
	Fax	(206) 684-4157		
To:	Name	Michael South		
	Organization	City of Seattle	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	700 5th Ave, Suite 5500	<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	michael.south@seattle.gov		
	Fax	(206) 684-4157		
To:	Name	Amy Ardena		
	Organization	City of Seattle	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	700 5th Ave, Suite 5500	<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	amy.ardena@seattle.gov		
	Fax	(206) 684-4157		

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 September 30, 2020

Print Name Xuan-Trang Tran-Thien

Signature /s/Xuan-Trang Tran-Thien



**From:** [Xuan-Trang Tran-Thien](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Cc:** [Shaun Van Eyk](#)  
**Subject:** Petition for Representation - PROTEC17 & City of Seattle  
**Date:** Wednesday, September 30, 2020 3:47:32 PM  
**Attachments:** PERC Filing-CoS HSD-SPD Victim Advocates 20200930.pdf  
PERC Filing-Rep Petition HSD-SPD Victim Advocates 20200930.pdf  
Union Authorization Cards (Combined).pdf  
PROTEC17 CBA with City of Seattle Effective thru 20211231.pdf

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Included in this email:

1. Petition for Representation
2. Certificate of Service
3. Collective Bargaining Agreement
4. Union Authorization Cards

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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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