



REPRESENTATION PETITION

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

PARTIES Include information for all parties involved.

EMPLOYER Grays Harbor Transportation
 Contact Ken Mehin
 Title General manager
 Address 705 30th St
 City, State, ZIP Hoquiam WA, 98550
 Telephone 3605322770 Ext. _____
 Email www.ghtransit.com

PETITIONER Amalgamated Transit Union
 Contact David Sharwark
 Title President
 Address 906 Columbia St SW # 301
 City, State, ZIP Olympia WA, 98501
 Telephone 3602299869 Ext. _____
 Email president.ba@atu1765.org

CURRENT BARGAINING REPRESENTATIVE
 If one exists ATU 1765
 Contact David Sharwark
 Title President
 Address 906 Columbia St SE # 301
 City, State, ZIP Olympia WA, 98501
 Telephone 3602299869 Ext. _____
 Email president.ba@atu1765.org

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 Supervisor/dispatcher
Number of Employees in Bargaining Unit 5
Describe the existing or proposed bargaining unit:
Supervisor/dispatchers certified at the beginning of 2020.

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 12-19-2019

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 David Sharwark Title President
 Address 906 Columbia St SE #301 City, State, ZIP Olympia St SE 98501
 Telephone 3602299869 Ext. _____ Email president.ba@atu1765.org
 Signature Date 10-2-2020

From: president.ba@atu1765.org
To: [PERC, Filing \(PERC\)](#)
Cc: vp.aba@atu1765.org; fin.sec@atu1765.org
Subject: Filing new unit
Date: Friday, October 2, 2020 10:02:43 AM
Attachments: GHT supervisordispatcher october 2020 cert perc.pdf

Emily Whitney,

Thank you for the help.

David Sharwark

President ATU Local 1765
906 Columbia St. S.W. #301
Olympia Wa. 98501

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Office- 360.539.4671
Cell- 360.229.9869