



# REPRESENTATION PETITION

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

### PARTIES Include information for all parties involved.

**EMPLOYER** City of Bellingham  
 Contact Elizabeth Monahan  
 Title HR Director  
 Address 104 W. Magnolia St.  
 City, State, ZIP Bellingham, WA 98225  
 Telephone 360-778-8220 Ext. \_\_\_\_\_  
 Email hr@cob.org

**PETITIONER** WSCCCE Council 2, AFSCME  
 Contact Bill Keenan  
 Title Director of Organizing  
 Address P.O. Box 750  
 City, State, ZIP Everett, WA 98206-0750  
 Telephone 425-864-6619 Ext. \_\_\_\_\_  
 Email bilk@council2.com

**CURRENT BARGAINING REPRESENTATIVE**  
 If one exists Guild of the Pacific NW Employees  
 Contact Dean Tharp  
 Title Representative  
 Address 3303 Northshore Rd.  
 City, State, ZIP Bellingham, WA 98226  
 Telephone 360-303-8734 Ext. \_\_\_\_\_  
 Email deantharp0@gmail.com

### 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** Police  
**Number of Employees in Bargaining Unit** 24

**Describe the existing or proposed bargaining unit:**  
 All Support Employees of the Bellingham Police Department including, records, warrant officers, parking, litter, accounting, and IT, excluding supervisors and confidential employees.

**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** 12/31/21

### 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 Bill Keenan Title Director of Organizing  
 Address P.O. Box 750 City, State, ZIP Everett, WA 98206-0750  
 Telephone 425-864-6619 Ext. \_\_\_\_\_ Email bilk@council2.com  
 Signature  Date 10/1/2021

**From:** [Copier](#)  
**To:** [Bill Keenan](#)  
**Subject:** Message from "RNP5838794A5B99"  
**Date:** Friday, October 1, 2021 1:14:51 PM  
**Attachments:** 20211001131934174.pdf

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This E-mail was sent from "RNP5838794A5B99" (IM 7000).

Scan Date: 10.01.2021 13:19:34 (-0700)

Queries to: [copier@council2.com](mailto:copier@council2.com)

**From:** [Copier](#)  
**To:** [Bill Keenan](#)  
**Subject:** Message from "RNP5838794A5B99"  
**Date:** Friday, October 1, 2021 1:23:03 PM  
**Attachments:** 20211001132742731.pdf

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Queries to: [copier@council2.com](mailto:copier@council2.com)

**From:** [Bill Keenan](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Subject:** Change of Representation Petition  
**Date:** Friday, October 1, 2021 1:56:01 PM  
**Attachments:** Message from RNP5838794A5B99.msg  
Message from RNP5838794A5B99.msg

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External Email

Attached you will find a Change of Representation Petition for the support employees in the City of Bellingham Police Department. A copy of the current collective bargaining agreement is also attached.

Thank you.

Bill Keenan  
Director of Organizing  
WSCCCE/Council 2  
425-303-8818 x 227  
425-303-8906 fax  
bilk@council2.com

