



REPRESENTATION PETITION

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

PARTIES Include information for all parties involved.

EMPLOYER Lewis County Sheriff
 Contact Chris Panush
 Title Director of HR & Risk Management
 Address 351 NW North ST
 City, State, ZIP Chehalis, WA 98532
 Telephone 360-740-1209 Ext. _____
 Email Chris.Panush@lewiscountywa.gov

PETITIONER Teamsters Local 252
 Contact Rob DeKosa
 Title Senior Business Representative
 Address 217 E MAIN ST.
 City, State, ZIP Centralia, WA 98531
 Telephone 360-736-9979 Ext. 204
 Email rob252@teamsters252.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 Lewis County Sheriff Dept.
 Number of Employees in Bargaining Unit 6

Describe the existing or proposed bargaining unit:
operation of Sergeants want to separate from the existing Bargaining 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 12/31/2021

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 Rob DeKosa Title Senior Business Representative
 Address 217 E. Main ST City, State, ZIP Centralia, WA 98531
 Telephone 360-736-9979 Ext. 204 Email rob252@teamsters252.org
 Signature [Signature] Date 10/14/2021

From: [Rob DeRosa](#)
To: [PERC, Filing \(PERC\)](#)
Cc: [Brian Blaisdell](#)
Subject: FW: Scanned image from Teamsters 252
Date: Thursday, October 14, 2021 2:35:57 PM
Attachments: 20211014_143536.pdf
20211013_151656.pdf
20211013_151627.pdf
20211014_143559.pdf

External Email