



# REPRESENTATION PETITION

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

### PARTIES Include information for all parties involved.

**EMPLOYER** Douglas Okanogan Co. Fire Dist. 15  
 Contact Tonya Vallance  
 Title EMS Director  
 Address 412 W Indian Ave  
 City, State, ZIP Brewster WA 98812  
 Telephone 509.689.4041 Ext. \_\_\_\_\_  
 Email tonya@docfd15.com

**PETITIONER** Teamsters Local Union 760  
 Contact Paul Parmley  
 Title Business Representative  
 Address 1211 W Lincoln Ave  
 City, State, ZIP Yakima WA 98902  
 Telephone 509.452.7194 Ext. \_\_\_\_\_  
 Email paul@teamsters760.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** EMS Employees  
**Number of Employees in Bargaining Unit** 3  
**Describe the existing or proposed bargaining unit:**  
All full time EMT classifications excluding the EMS Director

**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** \_\_\_\_\_

### 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>Paul Parmley</u>	Title	<u>Business Representative</u>
Address	<u>1211 W Lincoln Ave</u>	City, State, ZIP	<u>Yakima WA 98902</u>
Telephone	<u>509.452.7194</u> Ext. _____	Email	<u>paul@teamsters760.org</u>
Signature	<u><i>Paul Parmley</i></u>	Date	<u>2.16.2022</u>

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

Teamsters Local Union 760

Petitioner/Complainant/Filing Party

v.

Douglas Okanogan County Fire District  
15

Respondent/Responding Party

Case Number

**CERTIFICATE OF SERVICE**


I certify that I served a copy of this *(title of document)* Representation Petition  
on all parties or their counsel of record on *(date)* 2.16.2022

To:	Name	Tonya Vallance		
	Organization	Douglas Okanogan Co FD 15	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	412 W Indian Ave	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	Brewster WA 98812	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email	tonya@docfd15.com		
	Fax			
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			
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 2.16.2022

Print Name Paul Parmley

Signature 



**From:** [Andrea Perez](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Cc:** [Paul Parmley](#); [Kane Koerner](#)  
**Subject:** DOCFD15 Representation Petition  
**Date:** Wednesday, February 16, 2022 8:43:56 AM  
**Attachments:** SKM\_C75922021608331.pdf  
**Importance:** High

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External Email