



# REPRESENTATION PETITION

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

### PARTIES Include information for all parties involved.

**EMPLOYER** King County Regional Homelessness Authority

Contact Marc Dones

Title Chief Executive Officer

Address 400 Yesler Way, Suite 600

City, State, ZIP Seattle, WA, 98104

Telephone (206) 561-5644 Ext. \_\_\_\_\_

Email marc@kcrha.org

**PETITIONER** Prof. & Tech. Employees, Local 17

Contact Jessica Olivas

Title Organizer

Address 2900 Eastlake Ave E, Suite 300

City, State, ZIP Seattle, WA, 98102

Telephone 800-783-0017 Ext. 122

Email jessica@protec17.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** All

**Number of Employees in Bargaining Unit** 30

**Describe the existing or proposed bargaining unit:**

All employees, excluding supervisory and confidential.

**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>Jessica Olivas</u>	Title	<u>Organizer</u>
Address	<u>2900 Eastlake Ave E, Suite 300</u>	City, State, ZIP	<u>Seattle, WA, 98102</u>
Telephone	<u>800-783-0017</u> Ext. <u>122</u>	Email	<u>jessica@protec17.org</u>
Signature	<u></u>	Date	<u>5-5-22</u>

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

Petitioner/Complainant/Filing Party  
v.  
  
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)* 5-5-22

<p>To:</p> <p>Name</p> <p>Organization</p> <p>Address</p> <p>City, State, ZIP</p> <p>Email</p> <p>Fax</p>	<p>Marc Dones</p> <p>King County Regional Homelessness Authority</p> <p>400 Yesler Way, Suite 600</p> <p>Seattle, WA, 98104</p> <p>marc@kcrha.org</p>	<p><input checked="" type="checkbox"/> E-mail</p> <p><input type="checkbox"/> Fax</p> <p><input type="checkbox"/> Hand Delivery</p>	<p><input type="checkbox"/> First Class U.S. Mail</p> <p><input type="checkbox"/> Certified U.S. Mail</p> <p><input type="checkbox"/> Registered U.S. Mail</p>
<p>To:</p> <p>Name</p> <p>Organization</p> <p>Address</p> <p>City, State, ZIP</p> <p>Email</p> <p>Fax</p>		<p><input checked="" type="checkbox"/> E-mail</p> <p><input type="checkbox"/> Fax</p> <p><input type="checkbox"/> Hand Delivery</p>	<p><input type="checkbox"/> First Class U.S. Mail</p> <p><input type="checkbox"/> Certified U.S. Mail</p> <p><input type="checkbox"/> Registered U.S. Mail</p>
<p>To:</p> <p>Name</p> <p>Organization</p> <p>Address</p> <p>City, State, ZIP</p> <p>Email</p> <p>Fax</p>		<p><input type="checkbox"/> E-mail</p> <p><input type="checkbox"/> Fax</p> <p><input type="checkbox"/> Hand Delivery</p>	<p><input type="checkbox"/> First Class U.S. Mail</p> <p><input type="checkbox"/> Certified U.S. Mail</p> <p><input type="checkbox"/> Registered U.S. Mail</p>

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 5-5-22

Print Name Jessica Olivas

Signature 





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Address \_\_\_\_\_

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**CBA Expiration Date** \_\_\_\_\_

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Name	<u>Jessica Olivas</u>	Title	<u>Organizer</u>
Address	<u>2900 Eastlake Ave E, Suite 300</u>	City, State, ZIP	<u>Seattle, WA, 98102</u>
Telephone	<u>800-783-0017</u> Ext. <u>122</u>	Email	<u>jessica@protec17.org</u>
Signature	<u></u>	Date	<u>5-5-22</u>

**From:** [Jessica Olivas](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Cc:** [Paul Marv](#)  
**Subject:** PROTEC17 Representation Petition for KCRHA Employees  
**Date:** Thursday, May 5, 2022 4:18:33 PM  
**Attachments:** Representation Petition & Certificate of Service.pdf  
KCRHA FORMS.pdf

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External Email

Good afternoon,

Please find attached PROTEC17's Representation Petition for employees at the King County Regional Homelessness Authority, and supporting documents demonstrating a showing of interest.

Please let me know if you have any questions,

Thank you,

**Jessica Olivas**

**PROTEC17** Organizer

Phone: 800.783.0017 ext. 122

Email: [jessica@pte17.org](mailto:jessica@pte17.org)

Fax: 206-328-7402

*PROTEC17 is a member-powered union inspiring action, advancing equity, and building community.*

**From:** [Jessica Olivas](#)  
**To:** [PERC, Filing \(PERC\)](#)  
**Cc:** [marc@kcrha.org](mailto:marc@kcrha.org)  
**Subject:** Representation Petition for KCRHA Employees  
**Date:** Thursday, May 5, 2022 4:16:38 PM  
**Attachments:** Representation Petition- KCRHA.pdf

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External Email

Good afternoon,

Please find attached PROTEC17's Representation Petition for employees at the King County Regional Homelessness Authority.

Please let me know if you have any questions.

Thank you,

**Jessica Olivas**

**PROTEC17** Organizer

Phone: 800.783.0017 ext. 122

[Email: jessica@pte17.org](mailto:jessica@pte17.org)

Fax: 206-328-7402

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