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REPRESENTATION PETITION

Is this an amended petition? 🗌 Yes 🔀 No 🛛 If yes, enter the case number:					
PARTIES I	nclude information for all parties involved.	TYPE OF REQUEST Select ONE of the following.			
EMPLOYER Contact Title Address	Norhshore School District Mark Kees Supervisor of Operations 3330 Monte Villa Parkway Bothell, Wa. 98021 (425) 408 7823 Ext mkees@nsd.org	 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 			
PETITIONER Contact	Individual member of the Group Diana Clapper	current organization. EMPLOYER PETITION a determination by the commission according to WAC 391-25-090. BARGAINING UNIT Department or Division PNW Regional Union of Carpente Number of Employees in Bargaining Unit aprox. 91			
Title Address City, State, ZIP	Facility Manager 21615 9th Ave S.E. Bothell, Wa. 98021				
Telephone Email	(206)396 7681 Ext rdclapper@msn.com	Describe the existing or proposed bargaining unit: The custodians would like to self represent for the time			
CURRENT BAR If one exists Contact Title	Carpenters Union David Quinn Contract Administrator	being. We no longer wish to be represented by the Carpenters Union. Documentation will be mailed with a copy of this form.			
Address City, State, ZIP Telephone Email	25120 Pac Hwy S. Ste. 200 Kent, Wa 98032 (253) 945 8800 Ext dquinn@nwcarpenters.org	Collective Bargaining Agreement (CBA):If one exists, the bargaining unit's most recent collectivebargaining agreement must be filed with this petition.CBA Expiration Date31 August 2022			
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.

AUTHODIZED CONTACT FOD DETITU

AUTHORIZED CONTACT FOR PETITIONER						
Name	Diana Clapper		Title	Facility Manager		
Address	21615 9th Ave S. E.		City, State, ZIPBothell, Wa 98021			
Telephone	(206) 396 7681	Ext	Email	rdclapper@nsd.org		
Signature	Cen		Date	2, July 2022		
				$Form F_{-1}(1/2010)$		

Form E-1 (1/2019)

From:	Diana Clapper
To:	PERC, Filing (PERC)
Date:	Saturday, July 2, 2022 11:08:32 AM
Attachments:	Northshore Decertification.pdf

External Email

Please open a petition request for Northshore custodians. 30 signatures were sent usps today with expected arrival on Tuesday July 5. Tomorrow ends the open window for a petition request. So I'm expecting this email will begin the process. A copy of attached file will accompany signatures.

Diana Clapper