



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 Toppenish
 Contact Debbie Zabell
 Title City Manager
 Address 21 W. 1st Ave.
 City, State, ZIP Toppenish, Wa 98948
 Telephone 509-865-2080 Ext. _____
 Email debbie.zabell.@cityoftoppenish.us

PETITIONER Teamsters Local 760
 Contact Kane Koerner
 Title Organizer
 Address 1211 W. Lincoln Ave
 City, State, ZIP Yakima, Wa 98902
 Telephone 509-452-7194 Ext. _____
 Email kane@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 _____
Number of Employees in Bargaining Unit 2
Describe the existing or proposed bargaining unit:

All full-time or part-time Department Supervisors, Excluding City Clerk, Deputy City Clerk/Human Resources, Assistant Public Works Director, Superintendent, Police Dispatch, Police and Fire Chiefs, Captains, Sergeants, Police Officers, Firefighters, Accounting Manager, streets, sewer, water, wastewater treatment plant, parks, and cemetery employees and all other non-supervisory 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 _____

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>Kane Koerner</u>	Title	<u>Organizer</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>kane@teamsters760.org</u>
Signature	<u></u>	Date	<u>9/30/22</u>

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

Teamsters Local #760

Petitioner/Complainant/Filing Party

v.

City of Toppenish

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*) 9/30/22

To:	Name	Debbie Zabell		
	Organization	City of Toppenish	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	21 W. 1st Ave	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	Toppenish, Wa 98948	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email	debbie.zabell@cityoftoppenish.u		
	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 9/30/22

Print Name Kane Koerner

Signature 



From: [Kane Koerner](#)
To: [PERC, Filing \(PERC\)](#)
Cc: [Richard Salinas](#); [Leonard Crouch](#)
Subject: City of Toppenish Department Supervisors
Date: Friday, September 30, 2022 7:57:48 AM
Attachments: image001.png
COTOPP PERC.pdf

External Email

Attached is a Representation Petition along with a Certificate of Service and interest cards for the City of Toppenish.

Kane Koerner
Communications/Organizer
Teamsters Local No. 760
C. 509.654.4853
O. 509.452.7194

