



REPRESENTATION PETITION

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

PARTIES Include information for all parties involved.

EMPLOYER Adams County
Contact Todd O'Brien
Title Director
Address 210 W. Alder
City, State, ZIP Ritzville, WA 99169
Phone 509-659-3276 Ext. _____
Email Toddo@co.adams.wa.us

PETITIONER AFSCME Council 2
Contact Scott Davies
Title Staff Representative
Address 1105 W. Francis Ave, Suite C
City, State, ZIP Spokane, WA 99205
Phone 509-842-8620 Ext. _____
Email Scottd@council2.com

CURRENT BARGAINING REPRESENTATIVE

(If One Exists) _____
Contact _____
Title _____
Address _____
City, State, Zip _____
Phone _____ Ext. _____
Email _____

TYPE OF REQUEST Select ONE of the following.

- ☐ **NEW ORGANIZING** to be certified as the representative of employees currently unrepresented.
- ☒ **ADD UNREPRESENTED EMPLOYEES** to an existing bargaining unit as described in WAC 391-25-080.
- ☐ **CHANGE REPRESENTATIVE** of existing bargaining unit.
- ☐ **REMOVE REPRESENTATIVE** of existing bargaining unit.

BARGAINING UNIT

For a new organizing petition, fill out section 2. For a petition to add unrepresented employees, fill out **both** sections 1 and 2. For a petition to change or remove the representative, fill out section 1.

SECTION 1—Describe the Existing Bargaining Unit:

The existing Bargaining Unit is a Public Works group that is OK with adding these 4 Positions to their group.

Number of Employees in Existing Unit 45

SECTION 2—Describe the Proposed Bargaining Unit:

These four positions are positions that we represent all over the State. Three are Accountant positions and one is a Department Assistant.


Number of Employees in Proposed Unit 4

If a CBA exists, what is the expiration date? 12/31/2025

SHOWING OF INTEREST

A showing of interest indicating the support of at least 30 percent of the employees in the bargaining unit must be filed with the petition. **See instructions for more information.**

PETITIONER REPRESENTATIVE

Name James Trefry
Address PO Box 750
Phone 425-303-8818 Ext. _____
Signature 

Title General Counsel
City, State, ZIP Everett, WA 98206-0750
Email Jamest@council2.com
Date 12/19/2023

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

Washington State Council of County &
City Employees, AFSCME, Council 2

Petitioner/Complainant/Filing Party

v.

Adams County

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*) 12/19/2023

To:	Name	Todd O'Brien			
	Organization	Adams County	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail	
	Address	210 W Alder	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail	
	City, State, ZIP	Ritzville, WA 99169	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail	
	Email	toddo@co.adams.wa.us			
	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 12/19/2023

Print Name Corina VanderWeken

Signature 



Certificate of Service (2019)

From: [Corina Vanderweken](#)
To: [PERC, Filing \(PERC\)](#)
Cc: [James Trefry; toddo@co.adams.wa.us](#)
Subject: Representation Petition
Date: Tuesday, December 19, 2023 12:02:45 PM
Attachments: Representation Petition.pdf
Showing of Interest Cards.pdf
1374 CBA 2023-2025.pdf
COS 12-19-2023.pdf

External Email

Please find attached a copy of the WSCCCE Representation Petition.

All parties as listed on the Certificate of Service are being included on this email.

Corina VanderWeken
Staff Assistant II
WSCCCE