



**LOS ANGELES COUNTY
EMPLOYEE RELATIONS COMMISSION**
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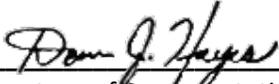
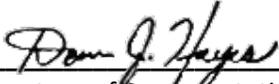
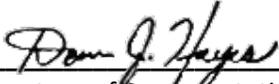
**PETITION FOR DETERMINATION OF AN APPROPRIATE EMPLOYEE
REPRESENTATION UNIT AND/OR CERTIFICATION AS MAJORITY REPRESENTATIVE**

INSTRUCTIONS:

1. This petition may be filed by an employee organization, a council of employee organizations, or by the Director Personnel, pursuant to Section 5.04.200 of the Employee Relations Ordinance and Rule 5.01 of the Employee Relations Commission Rules and Regulations.
2. Complete this petition and submit an electronic .pdf copy to ERCOMfilings@bos.lacounty.gov.

DO NOT WRITE IN THIS SPACE
UNIT:
PETITIONER:
FILE NO.
DATE FILED

1. Name of Petitioner (in full):			
2. Address and telephone number of Petitioner's principal place of business:			
3. Name and title of one representative authorized to receive notices or requests for information (address And telephone number if different from Item 2):			
4. List below the names, addresses, and telephone numbers of the County department(s), board(s), commission(s) or other body(ies) in which or by whom the affected employees are employed:			
<u>Department/Board/ Commission</u>	<u>Management Representative</u>	<u>Address</u>	<u>Telephone</u>
5. Description of claimed unit, by item number and classification title. If all the positions in any classification are not proposed to be included in the unit, list and identify the specific inclusions and exclusions for each classification. Also include your estimate of the number of employees in each classification.			
Included:			
<u>Item Number</u>	<u>Classification</u>	<u>Number of Employees</u>	
		Total: _____	
Excluded:			
<u>Item Number</u>	<u>Classification</u>	<u>Number of Employees</u>	
		Total: _____	

<p>6. Composition of claimed unit. Check the appropriate boxes below. In your opinion, does the unit include:</p> <p style="text-align: right;">YES NO</p> <p>a. Both professional employees and non-professional employees</p> <p>b. Both supervisory employees and non-supervisory employees</p> <p>c. Both supervisory and non-supervisory employees who are in the same classification</p> <p>d. Management and confidential employees together with non-management or non-confidential employees</p>								
<p>7. (EMPLOYEE ORGANIZATIONS ONLY) List below the names, addresses and telephone numbers of employee organizations, other than your own, which to your best knowledge and belief, claim to represent any of the employees in the proposed unit described in Section 5 of this Petition.</p> <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; width: 33%;"><u>Name</u></th> <th style="text-align: left; width: 33%;"><u>Address</u></th> <th style="text-align: left; width: 33%;"><u>Telephone</u></th> </tr> </thead> <tbody> <tr> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>			<u>Name</u>	<u>Address</u>	<u>Telephone</u>			
<u>Name</u>	<u>Address</u>	<u>Telephone</u>						
<p>8. Give a brief description, if known, of the written agreements, if any, covering any employee in the claimed unit.</p>								
<p>9. Any other relevant facts:</p>								
<p>10. State briefly the action or remedy which you are seeking from the Commission:</p>								
<p>11. (EMPLOYEE ORGANIZATIONS ONLY) The total <u>number</u> of employees in the proposed unit who have Requested your organization to represent them is _____. (Minimum showing of interest required: 30% of employees in the proposed unit. Evidence of such showing of interest must be submitted to the Commission at the time of filing the petition, pursuant to Rule 5.03a.)</p>								
<p>12. (EMPLOYEE ORGANIZATIONS ONLY) Does the undersigned petitioning organization have any restriction on membership based on race, color, creed, sex, or national origin? Yes No</p>								
<p>13. I declare that I am a duly authorized representative of the petitioner and I certify under penalty of perjury that the statements set forth in this petition are true and correct to the best of my knowledge and belief.</p> <table style="width: 100%; border-collapse: collapse; margin-top: 20px;"> <tr> <td style="width: 33%; border-top: 1px solid black; text-align: center;">Name of Representative</td> <td style="width: 33%; border-top: 1px solid black; text-align: center;">Title</td> <td style="width: 33%; border-top: 1px solid black; text-align: center;">Date</td> </tr> <tr> <td style="border-top: 1px solid black; text-align: center;">  Signature of Representative </td> <td> </td> <td> </td> </tr> </table>			Name of Representative	Title	Date	 Signature of Representative		
Name of Representative	Title	Date						
 Signature of Representative								

Attachment for #4

Department	Management Representative/Title	Address	Telephone Number
The Office of the County Counsel	Dawyn Harrison, Division Chief	500 W. Temple Street #648 Los Angeles, CA 90012	213-974-0689

Attachment for #5

Included:

Item Number	Classification	Number of Employees
9202	Associate County Counsel	1
9204	Senior Associate County Counsel	0
9206	Deputy County Counsel	189
9207	Senior Deputy County Counsel	175
	Total:	365

Excluded are all Managers, including the following exclusions:

Item Number	Classification	Number of Employees
9213	The County Counsel	1
9218	Chief Deputy County Counsel	2
9217	Senior Assistant County Counsel	5
9208	Assistant County Counsel	22
9219	Litigation Cost Mgr	1
0857	Chief Legislative Rep	1
	Total:	32

1 **PROOF OF SERVICE**

2 Los Angeles County Employee Relations Commission Case No.: (not yet assigned)

3 I am employed in the County of San Diego, State of California. I am over the age of 18 and not
4 a party to the within action. My business address is Hayes, Ortega & Sanchez, LLP, 3665 Ruffin
5 Road, Suite 100, San Diego, California 92123.
6

7 On January 8, 2026, I served the documents named below on the parties in this action as
8 follows:

9 **DOCUMENT SERVED:**

10 **1. PETITION FOR DETERMINATION OF AN APPROPRIATE**
11 **EMPLOYEE REPRESENTATION UNIT**
12

13 **SERVED UPON:**

14 The Office of the County Counsel
15 Dawyn Harrison
16 500 W. Temple Street, #648
17 Los Angeles, CA 90012
18

19 **BY THE FOLLOWING MEANS:**

20 [XX] BY U.S. MAIL. I caused such envelope to be delivered via USPS to the above
21 address(es). I declare under penalty of perjury under the laws of the State of California that the
22 above is true and correct. I declare that I am employed in the office of a member of the bar of this
23 court, at whose direction this service was made. Executed on January 8, 2026 at San Diego,
24 California.

25 
26 _____
27 ARIELLE CLAGETT
28