

## LOS ANGELES COUNTY EMPLOYEE RELATIONS COMMISSION

ERCOMfilings@bos.lacounty.gov

## PETITION FOR DECERTIFICATION OF EMPLOYEE REPRESENTATION UNIT AS MAJORITY REPRESENTATIVE

1. This petition may be filed by an employee organization, a council of employee

organizations, by a single employee, group of employees or their

DO NOT WRITE IN THIS SPACE

**UNIT:** 

PETITIONER:

## **INSTRUCTIONS:**

	representative, pursuant to Section 5.04.1 of the Employee Relations			
(	Commission Rules and Regulations.	FILE NO.		
	Complete this petition and submit an electronic .pdf copy to	DATE FILED		
ERCOMfilings@bos.lacounty.gov.				
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 (email address, physical address and best contact phone number):			
4.	Name and address of certified employee organization or council of employee organizations:			
5.	List below the name, address 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:			
	Department/Board/Commission Management Representative Add	<u>ress</u> <u>Telephone</u>		
6.	List the class or classes involved and give approximate number of employees included:			
7.	Give the expiration date of written agreements, if any, covering employees in the class or classes:			
8.	Give reason for filing this petition:			

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Any other relevant facts:			
10. State briefly the action or remedy which you are seeking from the Commission:			
11. The total <u>number</u> of employees in the unit who do not desire the certified organization to represent them is			
(Minimum showing of interest required: 50% of employees in the unit. Evidence of such showing			
of interest must be submitted to the Commission at the time of filing the petition, pursuant to Rule 5.04.1d).			
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.			
Name of Dougosoutotive	Title		
Name of Representative	ritte		
Signature of Representative	Date		
Signature of Nepresentative	Date		