

PETITION FOR CERTIFICATION

<b>INSTRUCTIONS:</b> 1. <u>Who Should File</u> This petition may be filed by an employee organization qualified under Section 4.820 of the Los Angeles Administrative Code or by a joint council, pursuant to Section 4.822, b. This petition shall be accompanied by a showing of interest of not less than thirty (30) percent of the regular employees in the unit claimed to be appropriate and a typewritten alphabetical list of names constituting such showing.  2. <u>How to File</u> (a) File a typewritten original and eight copies of this completed petition together with written evidence of the required showing of interest with the Board and, (b) serve a copy of this petition on the General Manager Personnel Department. Use additional pages if necessary, and identify each page with item numbers from this form.																					
3. Name (in full) of petitioning organization:	4. Address of petitioner's principal place of business:																				
5. Telephone Number:	6. Representative authorized to receive notices or requests for information:																				
7. List City Departments, Bureaus, or other bodies in which the affected employees are employed: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Department/Bureau</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Address</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Telephone</u></th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"> </td> <td> </td> <td> </td> </tr> </tbody> </table>		<u>Department/Bureau</u>	<u>Address</u>	<u>Telephone</u>																	
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8. Description of proposed unit: List by class code number and Civil Service class title. If not all the positions in any classification are proposed to be in a unit, list and identify the specific inclusions and exclusions for each classification. Also include your estimate of the number of employees in each classification in the proposed unit.																					
<table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2" style="text-align: left; border-bottom: 1px solid black;">a. Included:</th> <th style="text-align: left; border-bottom: 1px solid black;">No. of</th> <th colspan="2" style="border-bottom: 1px solid black;">b. Excluded</th> </tr> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Class Code</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Civil Service Class Title</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Employees</u></th> <th colspan="2"></th> </tr> </thead> <tbody> <tr> <td style="height: 100px;"> </td> <td> </td> <td> </td> <td colspan="2"> </td> </tr> <tr> <td colspan="2" style="text-align: right;">Total _____</td> <td colspan="3"> </td> </tr> </tbody> </table>	a. Included:		No. of	b. Excluded		<u>Class Code</u>	<u>Civil Service Class Title</u>	<u>Employees</u>								Total _____					
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Total _____																					
9. List other organizations which, to your best knowledge and belief, claim to represent any of the employees in the proposed unit described in this petition: <table style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;"><u>Name of Organization</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>No.</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Street</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>City</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Zip</u></th> <th style="text-align: left; border-bottom: 1px solid black;"><u>Telephone</u></th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"> </td> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </tbody> </table>		<u>Name of Organization</u>	<u>No.</u>	<u>Street</u>	<u>City</u>	<u>Zip</u>	<u>Telephone</u>														
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10. Other relevant facts:	DO NOT WRITE IN THIS SPACE																				
11. 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 and that I have served a copy of this petition on the General Manager Personnel Department.	Petitioner:																				
12. Name of Representative:      Title:	Unit:																				
13. Signature of Representative:	Date filed:      File No.:																				
14. Date:	Date posted:																				
ERB-1 (11-71)																					