

INFORMAL HEARING

Wednesday, January 13, 2016

10:30 a.m.

LRB Hearing Room - 3rd Floor



STATE OF RHODE ISLAND
RI STATE LABOR RELATIONS BOARD

Table with 2 columns: Case No. (2068), Date Filed. Includes 'DO NOT WRITE IN THIS SPACE' and 'EE-'.

2015 JAN 13 10 30 AM

AMENDED

IN THE MATTER OF
West Warwick Housing Authority
-AND-
RI Council 94, Local 2045

EMPLOYER

EMPLOYEE REPRESENTATIVE

PETITION FOR DECERTIFICATION OF A
CERTIFIED BARGAINING
REPRESENTATIVE
PURSUANT TO R.I.G.L. 28-7-16
RI STATE LABOR RELATIONS ACT

FILE AN ORIGINAL, SIGNED IN BLUE INK, WITH THE BOARD. THIS FORM MUST BE TYPED

- 1. Type of Petition (Check one)
Petition by or on behalf of Employees seeking decertification from an Employee Organization.
Petition by Employer seeking decertification of an existing Employee Organizations.

2. Name of Employer: West Warwick Housing Authority
Address: 62 Roberts St West Warwick RI 02893
Representative (if known): Marc Starling, Exec. Dir. Telephone Number: 401-944-9430 822-9430

3. Name of Employee Organization: RI Council 94, Local 2045
Address: 1179 Charles St. No. Providence RI 02904
Representative (if known): Alexis Lyman Telephone Number: 401-724-5900

4. Composition of Current Certified Unit for Decertification - (Attach additional sheets if necessary).
Maintenance employees and working foremen

5. Number of total employees in current unit: 3
Certification Number: 2068 Date Certified: 3/14/73
Current Certification of Representatives: Attached: [checked] Unit Clarification Disposition Form: Attached: []
Expiration Date of most recent Collective Bargaining Agreement: 12/31/14
Month/Day/Year

6. List other Employee Organization(s) known to have an interest in the employees previously described, if applicable.
Name(s):
Address(es):

Note: Upon submission of the Petition for Decertification of a Certified Bargaining Representative, Decertification Cards of Interest with a showing of at least thirty percent (30%), must accompany this Petition for Decertification. Only Decertification Cards of Interest with original signatures shall be accepted.

The undersigned hereby certifies that this Petition for Decertification is being filed in compliance with the requirements of R.I.G.L. 28-7-16 and in accordance with the Board's Rules and Regulations, Section 8.03 et seq.

PETITIONER: [Signature] DATE: 11/6/2015
SIGNATURE

Name: Marc Starling Title: Executive Director

Address: 62 Roberts St., West Warwick, RI 02893

Telephone: 401-822-9430 Cellular No.:

Facsimile: 401-822-9438 Email: MStarling@WestWarwickHA.org