## ILLINOIS LABOR RELATIONS BOARD

		DO NOT WRITE IN THIS SPACE
LOCAL PANEL:	e.g., County of Cook, City of Chicago, Chicago	CASE NUMBER
	Transit Authority, Forest Preserve District of Cook County	
	·	DATE FILED
STATE PANEL:	e.g., State of Illinois, county governments, municipal governments, Regional	
	, ,	
Transportation Authority		

## PETITION FOR A DECLARATORY RULING (PROTECTIVE SERVICES UNIT)

**INSTRUCTIONS:** In accordance with the Illinois Public Labor Relations Act, 5 ILCS 315, as amended, and the Rules and Regulations of the Illinois Labor Relations Board, 80 <u>Ill. Adm. Code</u> §1200.143, this petition may be filed with the Board if the parties have a good faith disagreement over whether the Act requires bargaining over a particular subject or subjects concerning a bargaining unit containing Protective Services employees. This petition should be filed jointly, but if a request for interest arbitration has been served and either party has requested the other to join it in filing this petition and the other party has refused, the requesting party may file the petition on its own, provided the petition is filed no later than the first day of the interest arbitration hearing. If only one party is filing this petition a copy of the request for interest arbitration must be attached. A copy of the most recently-negotiated contract, if there is one, must be attached to this petition. If more space is required for any item, attach additional sheet(s), numbering items accordingly. This petition may be filed in either of the Board's offices or electronically filed at **ILRB.Filing@illinois.gov**.

Illinois Labor Relations Board 801 South 7<sup>th</sup> Street, Suite 1200A Springfield, Illinois 62703 (217) 785-3155 Illinois Labor Relations Board 160 North LaSalle Street, Suite S-400 Chicago, Illinois 60603-3103 (312) 793-6400

This agency is requesting disclosure of information that is necessary to accomplish the statutory purpose as outlined under 5 ILCS 315 as amended. Disclosure of this information is REQUIRED. Failure to provide any information will result in this form not being processed.

1.	NAME OF EMPLOYER/DEPARTMENT	TELEPHONE NUMBER
	ADDRESS	E-MAIL
2.	EMPLOYER REPRESENTATIVE	TELEPHONE NUMBER
	ADDRESS	E-MAIL
3.	NAME OF LABOR ORGANIZATION and Affiliation (if any)	TELEPHONE NUMBER
	ADDRESS	E-MAIL
4.	ADDRESS  LABOR ORGANIZATION REPRESENTATIVE	E-MAIL  TELEPHONE NUMBER

5.	. DATE NEGOTIATIONS BEGAN			
6.	BRIEF DESCRIPTION of the legal issue	e upon which a declaratory ruling is sought:		
	PLEASE SUBMIT A COPY OF TH	HE MOST RECENTLY NEGOTIATED CONTRACT		
		FOR EMPLOYER  The statements contained therein are true to the best of my		
		NAME:		
BY: Signature of person filing petition		TITLE:		
		DATE:		
		ABOR ORGANIZATION  The statements contained therein are true to the best of my		
		NAME:		
BY:				
- 7	Signature of person filing petition	<del></del>		