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## Maine Labor Relations Board PETITION FOR BARGAINING AGENT CERTIFICATION BY MAJORITY SIGN-UP

Petitioner	Petitioner's Representative for correspondence (if differen	
Name James Leathers	Name Joel T. Wilkinson FOP Labor Rep.	
Address 14 Lessard Street	Address 259 Stetson Road	
Winslow, Maine 04901	Newport, Maine	
Phone (207) 660-2850	Phone 207-446-4079	
E-Mail (if available) jleathers@clinton-me.gov	E-Mail (if available) jtwilkinson14@gmail.com	
Public Employer		
Name Town of Clinton Maine		
Address 27 Baker Street	_	
Clinton, Maine 04927	_	
Phone (207) 426-8511	-	
E-Mail (if available)	-	
Describe the bargaining unit; estimate the total number of employees in the unit; set forth the classifications of employees comprising the unit; and estimate the number of employees in each classification. If a position in an included classification is to be excluded from the unit, list each such specific position and set forth the basis for its exclusion. Continue on separate sheet if needed.  The Town of Clinton, Maine has a full time Police Department. Within the Police Department there are three full time police officers in addition to a part time Chief of Police, part time Sergeant and several part		
time police officers.		
This petitioner seeks a majority sign up for the		
3- full time Patrol Officers to be recognized as	the Clinton Police Association	
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Does the petitioner certify that no other employee organizemployees in the appropriate bargaining unit?	ation is lawfully recognized as the exclusive representative of the	
<b>✓</b> Yes		
No		

This petition is accompanied by authorization forms from more than 50	% of the employees in the appropriate bargaining unit.	
Yes		
No		
The employee authorization forms must consist of original separate documents, individually signed and dated, containing the typed or printed name of the person signing, and a statement that the person designates the bargaining agent as the person's bargaining representative for the purposes of collective bargaining. A petition of an intervenor need only be accompanied by a 10% showing of interest or employee authorization.		
The employee authorization or showing of interest should be submitted <u>only</u> to the Maine Labor Relations Board.		
CERTIFICATION: I certify that all of the above information is true and correct to the best of my knowledge and belief. I understand that the law imposes penalties for false statements provided on this form.		
Signature	Date /-25-23	
Name James Leathers		
Title Police Officer		

3.

Pursuant to Maine Labor Relations Board Rules, Chapter 10, §7, this form must be filed electronically by sending it as an attachment in an email sent to <a href="mailto:mlrb@maine.gov">mlrb@maine.gov</a>. If you are unable to file electronically, you must include a signed Request For Exception To Electronic Filing Requirement (MLRB Form 8).

This petition will not be considered filed until the Board has received signed original employee authorization forms, if required.