INSTRUCTIONS: This petition must be filed on PERB's electronic document management system. Service of this petition is governed by PERB rules 621—2.15 and 16.10.

## STATE OF IOWA BEFORE THE PUBLIC EMPLOYMENT RELATIONS BOARD

IN THE MATTER OF:	)
Public Employer,	) ) ) PETITION FOR AMENDMENT ) OF CERTIFICATION )
Certified Employee Organization/ Petitioner.	) ) )
COMES NOW the Petitioner,	, and in support
of its Petition for Amendment of Certifica	ation states as follows:
1. The case number where the employed by PERB and case number(s) of any s	
2. The name of the employee organization	on as currently certified is:
3. The proposed name of the certified en	nployee organization is:
4. The name, address, telephone number	er and email of the Public Employer is:

	The name, address, telephone number and email of Public Employer's representative is:
6.	If applicable, the new name of the Public Employer is:
	Petitioner is seeking an amendment to its certification for the following reason(s):
8.	Name, address, telephone number and email of Petitioner is:
	This petition is accompanied by an affidavit as required by PERB subrule 1—4.8(2) and it is labeled as attachment
to i	There is/is not a change to the employee organization's name or a change its governing body. (If so, updated and final agency reports that comply with RB subrules $621-4.8(2)(b)$ and $4.8(2)(c)$ are filed as attachments to this ition).

Signature	
Printed Name	
Address	
Phone Number	
Email	

Submitted by: