

State of Wisconsin
Employment Relations Commission
 4868 High Crossing Blvd., Madison, WI 53704-7403
 Phone: 608-243-2424 Fax: 608-243-2433
 Email: werc@werc.state.wi.us

PETITION FOR FINAL AND BINDING ARBITRATION
 (Pursuant to § 111.70(4)(cg)6, Stats.)

INITIATING PARTY OR PARTIES:	THE FILING FEE FOR INTEREST ARBITRATION PURSUANT TO § 111.70(4)(cg)6, STATS. IS \$800 SPLIT EQUALLY BETWEEN BOTH PARTIES. PROCESSING BEGINS WHEN A PETITION AND \$400 IS RECEIVED, AT WHICH TIME THE OTHER PARTY IS BILLED BY THE COMMISSION FOR THE REMAINING \$400.
<input type="checkbox"/> Labor Organization	
<input type="checkbox"/> Employer	
<input type="checkbox"/> Joint	

Complete and submit this form and, at the same time, serve a copy on the other party, if not filed jointly. Please also submit a copy of the preliminary final offer(s). The other party shall, within fourteen (14) calendar days of the Commission's receipt of the Petitioner's preliminary final offer, submit its responsive preliminary final offer to the Petitioner and the Commission.

All Information is Required

Name of Employee or Labor Organization		Name of Employer	
Street Address, City, State, Zip Code		Street Address, City, State, Zip Code	
Telephone No.	Email Address	Telephone No.	Email Address
Name of Representative		Name of Representative	
Street Address, City, State, Zip Code (if different)		Street Address, City, State, Zip Code (if different)	
Telephone No.	Email Address	Telephone No.	Email Address

The parties allege that they have reached a deadlock after a reasonable period of negotiations and after mediation by the Wisconsin Employment Relations Commission and request the Commission to conduct an investigation pursuant to § 111.70(4)(cg)6, Stats., and determine whether arbitration should be initiated.

The parties allege the following, relevant to compliance with the requirements of §§ 111.70(4)(cg)1, 2, 3, and 6 (first paragraph), Stats.:

Notice to Open Negotiations Was Served By		Date Served	
Date(s) Proposal(s) Were Exchanged in Open Meetings			
Number of Times Parties Met for the Purposes of Negotiations Prior to Mediation			
Mediation(s) Was Conducted By		Date(s) of Mediation	

Select Applicable Statement:

<input type="checkbox"/> <i>There is an existing collective bargaining agreement</i>	Date collective bargaining agreement expires	
<input type="checkbox"/> <i>There is not an existing collective bargaining agreement</i>		

I declare that I have read the contents of this petition and that the statements it contains are true and correct to the best of my knowledge.

Name		Title	
Signature		Date	