

**State of Wisconsin
Employment Relations Commission
2418 Crossroads Drive, Suite 1000, Madison, WI 53718-7896
Phone: 608-243-2424 Fax: 608-243-2433
Email: werc@werc.state.wi.us**

PETITION FOR FINAL AND BINDING ARBITRATION (PUBLIC SAFETY)
(Pursuant to § 111.77, Stats.)

INITIATING PARTY OR PARTIES:	THE FILING FEE FOR INTEREST ARBITRATION PURSUANT TO § 111.77, 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. Attach a statement setting forth relevant facts pertaining to the parties' compliance with the provisions set forth in §§ 111.77(1) and (2), Stats.

All Information is Required

Name of 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 Initiating Party alleges that it and the other party have reached an impasse in their bargaining on wages, hours, and conditions of employment to be incorporated in a collective bargaining agreement and requests the Wisconsin Employment Relations Commission to conduct an investigation and determine whether final and binding arbitration should be initiated.

List the Issue(s) at Impasse Between the Parties

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Mediation Was Conducted By	
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Select Applicable Statement:
<input type="checkbox"/> (1) <i>The Initiating Party desires that the arbitration be limited to the selection of one party's final offer.</i>
<input type="checkbox"/> (2) <i>The parties have agreed not to proceed under (1) above and agree to give the arbitrator authority to determine all issues in dispute.</i>

The parties jointly request the following Commissioner or WERC Staff Member be assigned to this matter	
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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	