

**ALASKA LABOR RELATIONS AGENCY  
3301 EAGLE STREET, SUITE 206  
ANCHORAGE, ALASKA 99503  
(907) 269-4895 Fax (907) 269-4898**

**CHARGE AGAINST LABOR  
ORGANIZATION**

Office use only

**Case No.:** -ULP

**Date Filed:**                      **Date Amended:**

**SEE ATTACHED INSTRUCTIONS and FILING REQUIREMENTS**

**1. LABOR ORGANIZATION AGAINST WHOM CHARGE IS BROUGHT (Respondent)**

<p>a. Name of Labor Organization Alaska State Employees Association</p>	<p>b. Organization Representative to contact Jake Metcalfe, Executive Director</p>
<p>c. Address (street, city, state, and ZIP code) 2601 Denali Street Anchorage, AK 99501</p>	<p>d. Telephone Number (907) 277-5200  Facsimile Number (907) 277-5206  E-mail                      jakem@afscmelocal52.org</p>

2. The above-named organization or its agents have engaged in and are engaging in unfair labor practices within the meaning of AS 23.40.110(c) or, if Alaska Railroad is the employer, AS 42.40.760(c). The organization or its agent has committed the practice described in:

<p><i>If</i> PERA (23.40)</p> <p><input type="checkbox"/> 23.40.110(c)(1) - Restrained or coerced              <input type="checkbox"/> an employee in exercise of rights guaranteed in PERA;              OR <input type="checkbox"/> an employer in selection of representative.  <input checked="" type="checkbox"/> 23.40.110(c)(2) - Refused to bargain in good faith.  <input type="checkbox"/> Violated the duty of fair representation.</p>	<p><i>If</i> Railroad (42.40)</p> <p><input type="checkbox"/> 42.40.760(c)(1) - Restrained or coerced              <input type="checkbox"/> an employee in exercise of rights guaranteed in AS 42.40.720;              OR <input type="checkbox"/> the corporation in selection of a representative.  <input type="checkbox"/> 42.40.760(c)(2) - Refused to bargain in good faith.  <input type="checkbox"/> Violated the duty of fair representation.</p>
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3. An employee filing a charge against a labor organization or employee association must first file the complaint under any internal review procedures available in the labor organization or employee association. 8 AAC 97.225(a). Have you filed such a claim?

YES                                       NO

If you answered yes, state the outcome and provide a copy of any written decision(s). If you answered no, state the reason 8 AAC 97.225(a) should not apply to you.

**4. Collective Bargaining Agreement (indicate one)**

- There has never been a collective bargaining agreement covering the employer and labor organization involved.
- A copy of the current (or most recent) applicable collective bargaining agreement is attached.

5a. Name of Employer

5b. Address (street, city, state, and ZIP code if different than above)

**State of Alaska**

5c. Telephone Number (907)465-4430  
 Facsimile Number (907)465-3415  
 E-mail jared.goecker@alaska.gov

5c. Employer representative to contact (include street, city, state, and ZIP code, if different than above)  
**Jared Goecker, PO Box 110201 Juneau, AK 99811**

6. Status of Grievance Proceedings (check all that apply)

- a.  A grievance has been filed and a copy is attached of each grievance step filing and all labor organization responses.
- b.  A copy of the grievance filed at each step and all responses received is furnished for investigative purposes only. (Service on labor organization not required.)
- c.  Arbitration is scheduled for \_\_\_\_\_.
- d.  An arbitration award has been issued and is attached, or  will be provided when received.
- e.  A grievance was not filed because:

7. Statement of Facts

Clear and concise statements of the facts claimed by the party filing this charge to constitute the unfair labor practice(s) (including times, dates, places, occurrences, and participants in occurrences) are set forth in numbered paragraphs on separate sheets of paper attached to each copy of this charge.

See Attached

8. Remedy requested

The remedies requested for the claimed unfair labor practices are set forth on separate sheets of paper attached to each copy of this charge. Attached

<p>9. Full name of party filing charge</p> <p>State of Alaska Dept. of Administration Division of Personnel and Labor Relations</p>	<p>9a. Address of party filing charge (street, city, state, and ZIP code)</p> <p>c/o Jared Goecker PO Box 110201 Juneau, AK 99811</p>	<p>9b. Telephone Number (907) 465-4430</p> <p>Facsimile Number. (907) 465-3415</p> <p>E-mail <span style="float: right;">jared.goecker@alaska.gov</span></p>
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10. DECLARATION

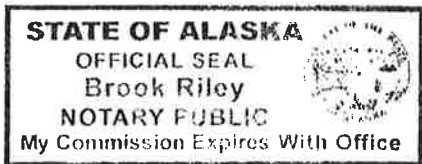
I, Jared Goecker, say on oath or affirm that I have read the foregoing document and believe that all statements made in the document are true.

By: [Signature] **Labor Relations Manager**  
(Signature of representative or person making charge; title or office, if any)

SUBSCRIBED AND SWORN TO before me at Juneau, Alaska, this 4th day of March, 2020.

Notary Public in and for Alaska  
My Commission Expires: with office

I certify that on March 4, 2020 I mailed or hand delivered (circle one) a true and correct copy of the foregoing to (include the Labor Organization). Enter the name and address of person(s) served in the space provided below:



[Signature]  
Signature

**ALASKA LABOR RELATIONS AGENCY  
3301 EAGLE STREET, SUITE 206  
ANCHORAGE, ALASKA 99503  
(907) 269-4895 Fax (907) 269-4898**

**CHARGE AGAINST LABOR  
ORGANIZATION**

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**Case No.:** -ULP

**Date Filed:**                      **Date Amended:**

**SEE ATTACHED INSTRUCTIONS and FILING REQUIREMENTS**

**1. LABOR ORGANIZATION AGAINST WHOM CHARGE IS BROUGHT (Respondent)**

a. Name of Labor Organization  
Alaska Public Employees Association

b. Organization Representative to contact  
Brian Penner

c. Address (street, city, state, and ZIP code)  
3310 Arctic Blvd. Suite 200  
Anchorage, AK 99503

d. Telephone Number (907) 274-1688  
  
Facsimile Number (907) 274-1688

E-mail                      bpenner@apea-aft.org

2. The above-named organization or its agents have engaged in and are engaging in unfair labor practices within the meaning of AS 23.40.110(c) or, if Alaska Railroad is the employer, AS 42.40.760(c). The organization or its agent has committed the practice described in:

*If* PERA (23.40)

- 23.40.110(c)(1) - Restrained or coerced  
 an employee in exercise of rights guaranteed in PERA;  
OR  an employer in selection of representative.  
 23.40.110(c)(2) - Refused to bargain in good faith.  
 Violated the duty of fair representation.

*If* Railroad (42.40)

- 42.40.760(c)(1) - Restrained or coerced  
 an employee in exercise of rights guaranteed in AS 42.40.720;  
OR  the corporation in selection of a representative.  
 42.40.760(c)(2) - Refused to bargain in good faith.  
 Violated the duty of fair representation.

3. An employee filing a charge against a labor organization or employee association must first file the complaint under any internal review procedures available in the labor organization or employee association. 8 AAC 97.225(a). Have you filed such a claim?

YES                       NO

If you answered yes, state the outcome and provide a copy of any written decision(s). If you answered no, state the reason 8 AAC 97.225(a) should not apply to you.

n/a

**4. Collective Bargaining Agreement (indicate one)**

- There has never been a collective bargaining agreement covering the employer and labor organization involved.  
  
 A copy of the current (or most recent) applicable collective bargaining agreement is attached.

5a. Name of Employer

5b. Address (street, city, state, and ZIP code if different than above)

**State of Alaska**

5c. Telephone Number (907)465-4430

Facsimile Number (907)465-3415

E-mail                      jared.goecker@a  
laksa.gov

5c. Employer representative to contact (include street, city, state, and ZIP code, if different than above)

**Jared Goecker, PO Box 110201 Juneau, AK 99811**

6. Status of Grievance Proceedings (check all that apply)

- a.  A grievance has been filed and a copy is attached of each grievance step filing and all labor organization responses.
- b.  A copy of the grievance filed at each step and all responses received is furnished for investigative purposes only. (Service on labor organization not required.)
- c.  Arbitration is scheduled for \_\_\_\_\_.
- d.  An arbitration award has been issued and is attached, or  will be provided when received.
- e.  A grievance was not filed because:

Complaint for ULP is based on refusal to bargain in good faith (APEA says they won't sign an LOA unless ASEA signs an LOA). These circumstances do not involve a "controversy or dispute involving the application or interpretation of the terms of this Agreement arising between APEA/AFT . . . and the Employer"

7. Statement of Facts

Clear and concise statements of the facts claimed by the party filing this charge to constitute the unfair labor practice(s) (including times, dates, places, occurrences, and participants in occurrences) are set forth in numbered paragraphs on separate sheets of paper attached to each copy of this charge.

See Attached

8. Remedy requested

The remedies requested for the claimed unfair labor practices are set forth on separate sheets of paper attached to each copy of this charge.

See Attached

9. Full name of party filing charge

State of Alaska  
Dept. of Administration  
Division of Personnel and Labor  
Relations

9a. Address of party filing charge (street, city, state, and ZIP code)

c/o Jared Goecker  
PO Box 110201 Juneau, AK 99811

9b. Telephone Number (907) 465-4430

Facsimile Number. (907) 465-3415

E-mail jared.goecker@alaska.gov

10. DECLARATION

I, Jared Goecker, say on oath or affirm that I have read the foregoing document and believe that all statements made in the document are true.

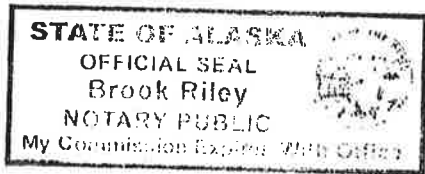
By: [Signature]  
(Signature of representative or person making charge; title or office, if any)

Labor Relations Manager

SUBSCRIBED AND SWORN TO before me at Juneau, Alaska, this 4th day of March, 2020.

Notary Public in and for Alaska With office  
My Commission Expires: \_\_\_\_\_

I certify that on March 4, 2020 I mailed or hand delivered (circle one) a true and correct copy of the foregoing to (include the Labor Organization). Enter the name and address of person(s) served in the space provided below:



[Signature]  
Signature

ALASKA LABOR RELATIONS AGENCY  
 3301 EAGLE STREET , SUITE 206  
 ANCHORAGE, ALASKA 99503  
 (907) 269-4895 Fax (907) 269-4898

PETITION TO ENFORCE  
 CONTRACT

Office use only

Case No.: - -CBA | Date Filed

INSTRUCTIONS: File an original and one (1) copy of this form with the Alaska Labor Relations Agency at the above address. The current collective bargaining agreement must also be filed with this petition. Attach two (2) copies of the supporting documentation to include documents filed and received in the grievance steps in your contract, and any arbitrator's decisions if applicable. Serve a copy of this petition and attachments on the employer or labor organization, as appropriate.

1. Labor Organization: \_\_\_\_\_  
 Alaska State Employees Association (ASEA)  
 Contact Person: Jake Metcalfe  
 Title: Executive Director  
 Address: 2601 Denali Street Anchorage, AK 99501  
 Telephone No.: (907) 277-5200  
 Facsimile No.: (907) 277-5206  
 E-mail: jakem@afscmelocal52.org

2. Public Employer (see section 10.): \_\_\_\_\_  
 State of Alaska, Dept of Administration  
 Contact Person: Jared Goecker  
 Title: Labor Relations Manager  
 Address: PO Box 110201 Juneau, AK 99811  
 Telephone No.: (907) 465-4430  
 Facsimile No.: (907) 465-3415  
 E-mail: jared.goecker@alaska.gov

3. Name of bargaining unit (or description):  
**General Government Unit**

4. Date of certification of unit:  
**Sept. 28, 1988**

5. Date of expiration date of contract: June 30, 2022

6. The terms of the contract petitioner seeks to enforce are: Article 21.07(A)(1) of the 2016-2019 ASEA CBA: "As soon as feasible, payday shall be on a bi-weekly basis with direct deposit on Thursday or Friday. The parties agree that when a bi-weekly pay schedule is implemented, it will be done through a Letter of Agreement. Leave accrual and other conditions or benefits calculated based on a semi-monthly pay cycle will be recalculated to reflect conversion to a bi-weekly cycle. . . . The parties agree that when a bi-weekly pay schedule is implemented through a Letter of Agreement, leave accrual and other conditions or benefits calculated based on a semi-monthly pay cycle will be recalculated to reflect conversion to a bi-weekly pay cycle."

7. Petitioner seeks enforcement because (provide a plain and concise statement of the reasons):

The State has attempted since August 22, 2019 to negotiate with ASEA about the conversion to bi-weekly. The State has repeatedly attempted to meet the concerns raised by ASEA. The State initially hoped to implement bi-weekly on December 16, 2019 (the first time the conversion was feasible) even submitting to mediation with ASEA that was ultimately not successful. The next feasible date is June 1, 2020, which ASEA requested and the State agreed to in the interest of getting their agreement. The State has requested that ASEA simply agree to the June 1, 2020 conversion date while preserving the ability of ASEA members to bring any potential complaints/grievances (including expedited arbitration) about the State's calculations for the conversion. The State has to spend significant resources to maintain the semi-monthly system and has to make preparations to do that. If the State cannot plan for a June 1, 2020 conversion, it must immediately begin preparing to maintain the status quo, which again will cost the State significant resources. ASEA has not timely responded to our efforts to enforce Article 21.07(A)(1). Affidavits and exhibits attached.

8. If grievance procedures in the contract apply, Petitioner has exhausted all rights under them:

Yes  No  Not Applicable

\*\* Attach a copy of the grievance at all steps and all employer responses.

9. If the petition is to enforce an arbitrator's decision, is the decision attached?

Yes  No  Not Applicable

\*\* Attach a copy of the arbitrator's decision if applicable.

10. Notice to Public Employer Named in Section 2.

**8 AAC 97.520. Answer to contract enforcement petition.** (a) Fifteen days from the receipt of a petition to enforce a collective bargaining agreement, the respondent may file an answer to the petition. The respondent's answer must admit or deny each of the allegations contained in the petition, unless the respondent does not have the information necessary to form a belief regarding the truth of the allegation. The answer may contain a plain statement of any explanation or defense.

(b) If the respondent fails to file an answer within the time allowed, the labor relations agency will, in its discretion

(1) hold a hearing and issue a decision and order; or

(2) consider the lack of an answer to the petition as an admission and issue an appropriate

order. (Eff. 7/22/93, Register 127)

Authority: AS 23.05.380 AS 42.40.820 AS 23.40.210

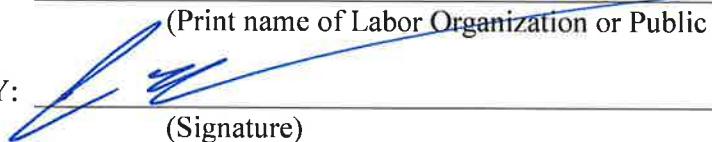
AS 23.40.170 AS 42.40.860

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

BY: **State of Alaska, Division of Personnel & Labor Relations**

(Print name of Labor Organization or Public Employer)

BY:



(Signature)

Print Name: **Jared Goecker**

Title: **Labor Relations Manager** Date: **March 4, 2020**

I certify on March 4, 2020 (date) that I mailed or hand delivered (circle one) a true and correct copy of this petition to respondent Jake Metcalfe (name of respondent; include Attorney General and Commissioner of Administration, if respondent is State of Alaska)



Step 3  
State Case # 20-S-131  
Union Case # \_\_\_\_\_

**STATE OF ALASKA  
GRIEVANCE FORM**  
(Attach copies of previous step forms)  
**BARGAINING UNIT** Supervisory Unit  
**CONTRACT YEAR (S)** 2018-2021

1. Name of Grievant State of Alaska 2. Employee ID # na

3. Mailing Address PO Box 110201 Juneau, AK 99811

4. Job Class na 5. Location All locations

6. Department/Division/Vessel/Crew All departments

7. Discussed with supervisor on na

8. Does grievance stem from contract violation? Yes

If so, what provision(s) 24.9(A)

9. Nature of Grievance  
Attached.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

When did this occur? Ongoing

10. Relief Sought  
Sign the biweekly LOA caring for the conversion to a biweekly pay schedule demanded by the APEA CBA.  
\_\_\_\_\_

3/4/2020  
Date Authorized Submitter Signature (refer to contract)

11. Name and Title of Respondent \_\_\_\_\_

12. Date Received \_\_\_\_\_ 13. Remarks \_\_\_\_\_

14. Decision \_\_\_\_\_

\_\_\_\_\_  
Date Respondent Signature