

NOTICE OF MMBA REPRESENTATION PETITION

PERB CASE NUMBER: LA-RR-1370-M DATE NOTICE WAS POSTED: 11/5/2025

ON October 8, 2025, THE PETITION INDICATED BELOW WAS FILED WITH THE
(DATE)
PUBLIC EMPLOYMENT RELATIONS BOARD BY THE PETITIONER SHOWN ON THE MMBA
REPRESENTATION PETITION.

- PETITION FOR CERTIFICATION
- REQUEST FOR RECOGNITION
- SEVERANCE REQUEST

THE PETITION IS BASED ON THE CLAIM THAT (CHECK ONE) A MAJORITY
 AT LEAST 30% OF THE EMPLOYEES IN THE PROPOSED UNIT WISH TO BE
REPRESENTED BY THE PETITIONER.

SEE THE MMBA REPRESENTATION PETITION FOR THE NAMES, ADDRESSES AND
TELEPHONE NUMBERS OF THE EMPLOYER, THE INCUMBENT EXCLUSIVE
REPRESENTATIVE (IF ANY), AND THE PETITIONER.

THIS NOTICE MUST REMAIN POSTED UNTIL: December 2, 2025

BY 
(SIGNATURE OF EMPLOYER'S AUTHORIZED AGENT)

PERB Regulation 61220 requires that this Notice be conspicuously posted on all employee bulletin boards in each facility of the employer in which members of the proposed unit are employed. The Notice should be posted as soon as possible but in no event later than 10 days following receipt of the petition. The Notice must remain posted for at least 15 workdays. PERB may require electronic posting pursuant to PERB Regulation 32111.



MMBA REPRESENTATION PETITION

DO NOT WRITE IN THIS SPACE: Case No:

Date Filed: 10/08/2025

INSTRUCTIONS: A request for recognition or petition for certification may be filed with the appropriate PERB regional office, unless the employer has adopted local rules providing for an equivalent procedure. Proper filing includes concurrent service and proof of service of the MMBA Representation Petition as required by PERB Regulations 61210 et seq. Attach additional sheets if more space is required.

1. EMPLOYER (Name, address and telephone number)		Employer's agent to be contacted: Dr. Mark Breidenbaugh
Name:	Northwest Mosquito and Vector Control District	Title: District Manager
Address:	1966 Compton Ave. Corona, CA 92881	Address and telephone, if different: 1966 Compton Ave. Corona, CA 92881 Telephone: (951) 340-9792
Telephone:	(951) 340-9792	E-Mail mbreidenbaugh@northwestmvecd.org

2. TYPE OF PETITION (Check all that apply)	3. PROOF OF SUPPORT
<input checked="" type="checkbox"/> REQUEST FOR RECOGNITION (RR) <input type="checkbox"/> PETITION FOR CERTIFICATION (PC) <input type="checkbox"/> SEVERANCE (Filed as PC) <input type="checkbox"/> SEVERANCE (Filed as RR)	<input checked="" type="checkbox"/> Majority support <input type="checkbox"/> 30% support

4. DESCRIPTION OF PROPOSED UNIT	5. NUMBER OF EMPLOYEES IN PROPOSED UNIT:
General Unit	13

Shall INCLUDE: Technicians, Maintenance Technician, Laboratory Assistants, Secretaries Shall EXCLUDE: Directors, Managers, Supervisors, and Public Information and Technology Officers	6. IF A CURRENT MEMORANDUM OF UNDERSTANDING (MOU) EXISTS COVERING ANY EMPLOYEES PETITIONED FOR, INDICATE: MOU EFFECTIVE DATE: MOU EXPIRATION DATE: NO AGREEMENT IS IN EFFECT <input checked="" type="checkbox"/>
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7. ORGANIZATION(S) RECOGNIZED OR CERTIFIED AS THE EXCLUSIVE REPRESENTATIVE OF OR KNOWN TO HAVE AN INTEREST IN REPRESENTING ANY OF THE EMPLOYEES COVERED BY THIS PETITION:

Name of Organization	Address	Date of Recognition/Certification (if any)

8. PETITIONER (Name, address and telephone number)		Petitioner's agent to be contacted: Dennis J. Hayes
Name:	Teamsters Local 986	Title: Attorney
Address:	9900 Flower St. Bellflower, CA 90706	Address and telephone, if different: 3665 Ruffin Rd., Ste. 100 San Diego, CA 92123 Telephone: (619) 602-8700
Telephone:	(652) 595-4518	E-Mail: djh@sdlaborlaw.com

DECLARATION

I declare that the statements herein are true to the best of my knowledge and belief.

NAME OF AUTHORIZED REPRESENTATIVE: Dennis J. Hayes

SIGNATURE OF AUTHORIZED REPRESENTATIVE: /s/ Dennis J. Hayes

Title: Attorney Date: 10/08/2025

Los Angeles Regional Office 425 W. Broadway, Suite 400 Glendale, CA 91204-1269 (818) 551-2822	Sacramento Regional Office 1031 18th Street Sacramento, CA 95811-4124 (916) 322-3198	San Francisco Regional Office 1515 Clay St., Suite 2206 Oakland, CA 94612-1403 (510) 622-1016
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