



**State of California**  
**PUBLIC EMPLOYMENT RELATIONS BOARD**  
**EERA/HEERA FACTFINDING REQUEST**



**INSTRUCTIONS:** A written copy of a request for factfinding pursuant to Government Code sections 3548.1 (EERA) or 3591 (HEERA) must be filed with the with the Public Employment Relations Board (PERB) (see PERB Regulations 32110 and 32797(b) ). Proof of service must accompany the request. (PERB Regulation 32140 .)

**1. PERB CASE INFORMATION**

To proceed with factfinding, the mediator must first release or certify the matter to factfinding. Please attach a copy of the mediator’s release and provide the following information.

PERB Impasse Case Number:  
(Example: SF-IM-1234-E)

Date of Mediator’s Release to Factfinding:

Name of mediator:

**2. EMPLOYER**

**Employer Name:**

Address:

City, State, Zip:

**Representative Name:**

Title:

Address:

City, State, Zip:

Phone:

E-mail

**3. EXCLUSIVE REPRESENTATIVE**

Exclusive Representative:

Address:

City, State, Zip:

**Representative Name:**

Title:

Address:

City, State Zip:

Phone:

E-mail

**4. PARTY REQUESTING FACTFINDING**

Please select one:

Employer

Exclusive Representative

Joint Request

**5. NOTICE OF FACTFINDING REQUEST**

Please select one:

Pursuant to Government Code section 3548.1 or 3591 and PERB Regulation 32797, this notice is to inform [box] the Employer or [box] Exclusive Representative that [box] the Employer or [box] Exclusive Representative, is requesting that our differences be submitted to a factfinding panel.

OR

The parties jointly request that their differences by submitted to a factfinding panel.

**6. FACTFINDING REQUEST SUBMITTED BY:**

(Date) \_\_\_\_\_

\_\_\_\_\_  
(Type or Print Name)

\_\_\_\_\_  
(Signature)

Title, if any: \_\_\_\_\_

Mailing Address:  
\_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Attach any additional statements or documents, if needed, and a proof of service.