PELRB Form #18 (Revised 04/21/2020)

STATE OF NEW MEXICO PUBLIC EMPLOYEE LABOR RELATIONS BOARD

In re:	
	, Local Labor Board
Address:	
Telephone Number: Fax Number:	_
Email:	PELRB No:
LOCAL BOARD AFFIRMATI	ON OF ELECTION TO CONTINUE TO OPERATE
I,	, the,
,	has affirmatively elected to continue to
operate under the	

2) The following labor organizations represent employees of

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3) Each labor organization representing employees of

_____ has submitted written notice to

_____ that it affirmatively elects to continue to operate

under _____.

I declare under penalty of perjury under the laws of the State of New Mexico that the foregoing is true and correct.

Date

Address:

Telephone Number:_	
Fax Number:	
Email:	

NOTARIZATION

[place notary seal below]

State of _____)

County of _____

Signed and sworn to (or affirmed) before me on ______ (date) by ______ (name of applicant).

)

Notary

My commission expires: _____