



Petition for Trade Adjustment Assistance (TAA) **82063**

Section 1. Petitioner Information

Provide petitioner information below. Three workers from the same job location completing this Petition Form must fill in all three columns. Other petitioners need only fill in the Petitioner 1 column A. A union official completing this petition form should provide the name of the Union.

Petitioner 1

a) Name	John Harry	_____	_____
b) Title	Human Resources Manager	_____	_____
c) Street Address	1327 Northbrook Parkway, Suite 410	_____	_____
City	Suwanee	_____	_____
State, Zip	GA, 30024	_____	_____
d) Phone - Main	(770) 995-2222	_____	_____
e) Phone - Alternate	(770) 995-2232	_____	_____
f) E-mail	john.harry@turnils.us	_____	_____
g) Worker Separation Date	11/2012	_____	_____
h) Petitioner Type:	Company Official	_____	_____
i) Describe the worker group on whose behalf this petition is being filed:	manufacturing, office clerical		

Section 2. Workers' Firm Information

Provide information on the firm employing the worker group. Complete items (a)-(g) regarding the employing firm. If the workers are doing work at a location that is different than the worker's employer (e.g., the petitioning workers are employed by a staffing agency but work at a manufacturing firm), also complete items (h) - (m) regarding the firm at which the workers perform their jobs

NOTE: Workers completing this Petition Form must provide information for the locations where they work. All other petitioner types may apply on behalf of more than one location. State offices and One-Stop Operators/Partners may file for workers at multiple locations of a firm within their State. If you choose to file on behalf of workers at more than one location, please attach additional sheets as necessary.



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Employer (Firm)

a) Name of Firm	Fashion Tech Inc.
b) Street Address	2010 Southeast 8th Ave
City	Portland
State, Zip	OR, 97214
c) Phone	(503) 238-0666
d) Website (if known)	
e) Describe the article produced or service supplied by this firm	Manufacturing of interior window treatments
f) How many workers have been or may be separated (if known)?	100
g) Is the firm or any part of the firm closing (if known)? If yes, when?	Yes 12/2012

If the workers work at a location that is different from that listed in item a) and b), then fill out items h) through m) for that location:

h) Name of Firm	_____
i) Street Address	_____
City	_____
State, Zip	_____
j) Phone	_____
k) Describe the article produced or service supplied by this firm	_____
l) How many workers have been or may be separated (if known)?	_____
m) Is the firm or any part of the firm closing (if known)? If yes, when?	_____

Section 3. Trade Effects on Separations

1. To the best of your knowledge, provide reasons why you believe that separations that have occurred or may be threatened at the workers' firm are due to foreign trade. (Example: Production has been / is being shifted to a foreign country, services are being outsourced to a foreign country, increased imports of articles or services, loss of business with a TAA-certified firm.)

The manufacturing is being moved to Rosarito, Mexico.

2. If you possess any additional information or documents that you believe may assist in the determination of whether the worker group is eligible for TAA benefits, submit it as an attachment to the Petition Form. Check the box below if you have attached any additional information or supporting documents.

- I have not attached additional information or supporting documents.

3. Provide contact information for two company officials. Either separately or together, these officials should be familiar with all of the following: employment, job functions, and sales or production at each job locations.

	Official 1	Official 2
a) Name	Tim Metcalfe	Chuck Lauberth
b) Title	<h1>Redacted</h1>	_____
c) Phone - Work		_____
d) Phone - Alternate		_____
e) Fax		_____
f) E-mail		_____

