

OVERTIME:

- _____ Overtime desired list
- _____ EARs or clock rings. Clearly marked for employees involved.
- _____ LMOU sections
- _____ Copy of job description of the employee performing the OT work.
- _____ Copy of the grievant's job description.
- _____ Stewards statement on how the contract was violated.
- _____ Cite applicable Arbs.
- _____ List of operation numbers and where they are.
- _____ List of names of employees to be paid. Include number of hours/type of hours.
- _____ Are all employees eligible for payment? On leave, Maxed out? Excused?
- _____ Apply the Filby Decision as applicable.
- _____ Interview the supervisor that caused the violation. Why did they do it?
- _____ Lamps decision.
- _____ LMOU Definitions of a section.
- _____ Pay Location identifications.
- _____ Was it time critical?
- _____ Cite Art 8. 3. 19.
- _____ Use Exhibit forms. Number Documents.
- _____ Overtime Authorization Form.
- _____ Witness statements/interview if necessary.

more

_____Dispatch Schedules (Time Critical issues)

_____2608

_____Training records if necessary to argue qualifications.