

**BMWED / NESF Northern District – Division, 90B, 90C Time Claim Form - (Please Print Clearly)**

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

\_\_\_\_\_  
(Claimant Name – Please Print)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City- State- Zip)

Mr. Michael Travaglino, Division Engineer  
C/O Labor Relations  
1 Massachusetts Avenue NW  
Washington, DC 20001

Dear Sir,

This Claim is hereby filed for all time made by: \_\_\_\_\_  
(Give full Name of Person or Contractor)

Working at: \_\_\_\_\_  
(Name railroad location, milepost, city, state, etc...)

On: \_\_\_\_\_

\_\_\_\_\_  
(Give all dates/overtime hours for which claim is filed, specify if it was an overnight shift)

The Carrier is in violation of Rule(s) No(s): \_\_\_\_\_, the Northern District Overtime Call Order,  
any/all other applicable Rules of the current CBA, by assigning the above named to perform the  
following work: (Give a complete description of work claimed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Very Truly Yours,

\_\_\_\_\_  
(Signature of Claimant)

\_\_\_\_\_  
(Occupation, Gang Number and Headquarter Location)

**Send Copies of Claim to:**

Dale E. Bogart Jr., G.C., NESF - BMWED 3321 B Vestal Parkway East, Vestal, New York 13850 or  
Renato Rufo, V.G.C. NESF-BMWED / renatorufo@verizon.net