

CORRECTED ARBITRATOR'S BILL

This bill is submitted on behalf of the arbitrator.
Please make your check payable to, and mail directly to the arbitrator.

Arbitrator Gary D. Altman Case Number 01-20-0000-0976
Address 91 Coolidge Street Number of Grievances: _____
Brookline, MA 02446-5805 Grievance No. _____

UNION



EMPLOYER

City of Somerville

ARBITRATOR'S COMPENSATION

Number of hearing days: 2 @ \$2,200.00 = \$ 4,400.00

Hearing dates: March 9, and April 29 2022

Study/Preparation Days 2.5 @ \$2,200.00 = \$ 5,500.00

Fee \$ 9,900.00

ARBITRATOR'S EXPENSES

Mileage and Parking \$

Hotel \$

Meals \$

Other (specify) \$

Expenses \$

TOTAL \$ 9,900.00

PAYABLE BY THE EMPLOYER \$ 4,950.00

PAYABLE BY THE UNION \$ 4,950.00

Arbitrator's Signature  Date 7/30/2022
