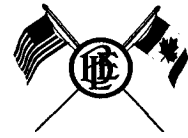




**BROTHERHOOD OF LOCOMOTIVE ENGINEERS  
UNION PACIFIC WESTERN LINES CLAIM FORM**



This form is to be used by the individual employee when filing a declined time claim with the BLE Local Committee. In order to provide the best possible chance of payment of your claim we need to have good information and facts from you for the General Committee to get the claim paid or have the needed information if it goes to arbitration.

The following items need to be attached to this form.

**Copy of claim (working time slip and/or =PE)**

**Copy of declination**

**Copy of pay recap for that pay period - not computer sheet but the pay recap sheet**

**Any other supporting information - for example translogs, call sheets, names of company officer/s that told you to violate agreement, Renzenberger trip tickets, job bulletin if applicable etc. Any information that would provide support for the claim.**

A. WHAT WAS CLAIMED AND WHAT WAS PAID:

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B. LIST BELOW ALL **OTHER PERTINENT FACTS** NOT ON ORIGINAL TIME SLIP (=PE) CONCERNING THIS CLAIM (Use back of sheet or a separate sheet if necessary):

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C. TRAIN ID \_\_\_\_\_ D. ASSIGNMENT/JOB NUMBER \_\_\_\_\_

E. CREW MEMBERS: \_\_\_\_\_

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F. WHAT ARTICLE AND SECTION OF THE AGREEMENT DO YOU BELIEVE HAVE BEEN VIOLATED OR WHICH SUPPORT YOUR CLAIM:

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**Members Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

IMPORTANT: Your BLE Local Chairman needs this documentation to process your claim. A claim that is submitted without the necessary support documentation/info is doomed to fail. THERE IS NO SHORTCUT. If the claim is important to you and you want to get paid, you must do you part of the process.