EXCESS LAY REPORTING FORM

(completed form to be forwarded to your respective BLE/UTU Rep)

| POOL | |
|---|--|
| DATE | |
| ARRIVAL / OFF DUTY TIME | |
| TIME RETURN TRAIN VOICED ON LINE UP (please complete line up discrepancy form) | |
| TRAIN AND TIME ACTUALLY ORDERED ON (please complete line up discrepancy form) | |
| TOTAL EXCESS LAY ACCRUED | |
| Completed forms may be forward to at your monthly meeting. | your respective representatives via OCS mail, fax or |
| UTU FORMS may be faxed to 705 74 | 45 7818 (J.D.Campbell) |
| BLE FORMS may be faxed to 905 66 | 55 9301 (R.F.Hewitt) |
| In order for your voice to be heard it | is imperative that all use this form and process. |