

Public Employment Relations Board  
80 Wolf Road, Suite 500  
Albany, NY 12205-2656

RESUME OF PANEL ARBITRATOR

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FULL NAME: Marilyn M. Levine  
CITY, STATE, ZIP: Valley Stream, NY 11580  
OCCUPATION: Arbitrator, Mediator, Attorney

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**EDUCATION:**

Hofstra School of Law - JD - 1977;  
Adelphi University -M.A.;  
Columbia University - B.S.

**PROFESSIONAL AFFILIATIONS:**

ABA, NYS Bar Association of Nassau County; AAA, NAA, DC Bar Association

**ARBITRATION EXPERIENCE & TYPES OF ISSUES OR GRIEVANCES DISPOSED OF:**

Public and Private Sectors; discharge & discipline, contract interpretation, wages & hours; etc.

**MEDIATION & FACT-FINDING EXPERIENCE:**

Employment disputes; grievances, monies due, etc.

**OTHER RELEVANT OR EQUIVALENT EXPERIENCE:**

Contract arbitrator; panel arbitrator, direct appointments.

**PER DIEM FEE:** \$ 1600

**ADJOURNMENT FEE:** \$ 1600

**SUBMITTED BY ARBITRATOR Marilyn M. Levine ON DECEMBER 12, 2011**

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BILLING DISCLOSURE STATEMENT

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ARBITRATOR'S NAME: **Marilyn M. Levine**

The following is a description of my fees and expenses:

A) HEARING TIME.

(1) My per diem is \$1600 for each day or any part thereof spent hearing a case.

(2) If a hearing day exceeds 8 hours, I charge:

a second full per diem

a prorated per diem

no additional charge

other (describe) :

(3) Additional comments:

B) STUDY TIME.

(1) I charge \$ 1600 for each day spent in preparation of the opinion and award.

(2) This charge  will  will not be prorated for partial days devoted to such preparation.

(3) Additional comments:

C) TRAVEL TIME AND EXPENSES.

(1) When travel time plus hearing time exceeds \_\_\_\_\_ hours in a calendar day:

Not applicable (no additional charge)

I charge as follows (describe):

(2) I charge for actual, travel-related expenses incurred in connection with the case  YES  NO.

Where appropriate, a mileage charge for auto travel will be billed at:

Prevailing IRS rate

Other (describe):

(3) When the scheduled hearing day(s) requires an overnight stay:

There is no charge, other than for lodging and subsistence.

I charge as follows (describe):

(4) Additional Comments:

D) POSTPONEMENT OR CANCELLATION FEES.

A fee of \$ 1600 will be charged unless I receive notice of a postponement or cancellation:

Within 21 calendar days of the scheduled hearing date

Other (describe):

E) ADDITIONAL CHARGES. I charge separately for expenses incurred in connection with the following:

Docketing (describe): .....  Yes  No

Duplication .....  Yes  No

Fax .....  Yes  No

Finance or late payment charge (describe): .....  Yes  No

Postage .....  Yes  No

Secretarial .....  Yes  No

Telephone .....  Yes  No

Other (describe):

F) GENERAL TERMS.

(1) Billing for fees and expenses will be divided equally between the parties unless otherwise required by the collective bargaining agreement or the conditions of the appointment.

(2) Other conditions (describe):

G) OTHER INFORMATION/COMMENTS:

**SUBMITTED BY ARBITRATOR Marilyn M. Levine ON December 12, 2011**

**IMPORTANT**

**THIS FORM IS NOT INTENDED TO SUGGEST THE SERVICES FOR WHICH AN ARBITRATOR SHOULD OR SHOULD NOT CHARGE. IT PRESENTS THE MOST RECENT INFORMATION PROVIDED BY THE NAMED ARBITRATOR TO THE NEW YORK STATE PUBLIC EMPLOYMENT RELATIONS BOARD, WHICH BEARS NO RESPONSIBILITY FOR ERRORS OR OMISSIONS CONTAINED ON THE FORM, OR FOR VARIANCES IN ACTUAL PRACTICE BY THE ARBITRATOR.**