

Public Employment Relations Board
PO BOX 2074, ESP Agency Bldg. 2, Floor 18 & 20
Albany, NY 12220-0074

RESUME OF PANEL ARBITRATOR

PAUL C. DOYLE

Occupation: ARBITRATOR/MEDIATOR/FACT FINDER

DELMAR, NY 12054

EDUCATION:

Cardinal McCloskey High School, Albany, New York 1960
St. Mary of the Plains College, Dodge City, Kansas, B.A. 1966

PROFESSIONAL AFFILIATIONS:

Industrial Relations Research Association (IRRA)
American Arbitration Association
American Society of Home Inspectors (ASHI) (Past President, Capital District Chapter)
New York State Association of Home Inspectors (Past Director)
Environmental Assessment Association (EAA)

ARBITRATION EXPERIENCE & TYPES OF ISSUES OR GRIEVANCES DISPOSED OF:

City of Albany, Paneled Arbitrator, Firefighter Panel since 1984
Governor's Office of Employee Relations/Civil Service Employees Association, Disciplinary Panel
Governor's Office of Employee Relations/Public Employees Federation, Disciplinary Panel
Albany County Sheriff's Department, Sheriff's Advisory Panel
Grievance Appeals Board, Executive Order 42

MEDIATION & FACT FINDING EXPERIENCE:

Public Employment Relations Board, Mediator and Fact Finder Panel Member, since 1984

OTHER RELEVANT OR EQUIVALENT EXPERIENCE:

College of Saint Rose, Director of Admissions
New York State United Teachers, Field Representative
NYSSILR, Cornell University
Building Consultant
NYS Licensed Home Inspector

PER DIEM FEE: \$1500

ADJOURNMENT FEE: \$1500 within 2 calendar weeks of
hearing

SIGNED AND SUBMITTED BY ARBITRATOR DOYLE ON SEPTEMBER 19, 2022

Public Employment Relations Board
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BILLING DISCLOSURE STATEMENT

ARBITRATOR'S NAME: PAUL C. DOYLE

The following is a description of my fees and expenses:

A) HEARING TIME.

(1) My per diem is \$1500 for each day or any part thereof spent hearing a case.

(2) If a hearing day exceeds 7 hours, I charge:

_____ a second full per diem X a prorated per diem

_____ no additional charge _____ other (describe)

(3) Additional comments:

B) STUDY TIME.

(1) I charge \$1500 for each day spent in preparation of the opinion and award.

(2) This charge X 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 9 hours in a calendar day:

X Not applicable (no additional charge)

_____ I charge as follows (describe):

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

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

X Prevailing IRS rate _____ Other (describe):

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

X There is no charge, other than for lodging and subsistence. (PHONE – TOLL)

_____ I charge as follows (describe):

(4) Additional Comments:

D) POSTPONEMENT OR CANCELLATION FEES.

A fee of \$1500 will be charged unless I receive notice of a postponement or cancellation:

X Before 2 calendar weeks of the scheduled hearing date

_____ Other (describe):

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

Docketing (describe): _____ Yes X No

Duplication Yes X No

Fax Yes X No

Finance or late payment charge (describe): _____ Yes X No

Postage Yes X No

Secretarial Yes X No

Telephone Yes X 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.

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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.