

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

**RESUME OF PANEL ARBITRATOR**

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THOMAS N RINALDO

Occupation: ATTY/ARBITRATOR

WILLIAMSVILLE, NY 14231-1334

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**EDUCATION:**

STATE UNIVERSITY OF NEW YORK AT BUFFALO (1964)  
BROOKLYN LAW SCHOOL (1967)

**PROFESSIONAL AFFILIATIONS:**

National Academy of Arbitrators  
American Arbitration Association  
Federal Mediation and Conciliation Service  
National Mediation Board \*\*

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

Have arbitrated for the past forty years, the last twenty years on a full-time basis. In my forty years of experience, I have handled most issues and/or grievances.

**MEDIATION & FACT FINDING EXPERIENCE:**

Forty years experience mediating and fact finding various disputes both in public and private employment.

**OTHER RELEVANT OR EQUIVALENT EXPERIENCE:**

New York State Bar Association - Labor and Employment Law Section  
Special Dispute Panel for Human Rights Cases  
American Arbitration Association  
Federal Mediation and Conciliation Services  
National Mediation Board

**PER DIEM FEE:** \$2,000

**ADJOURNMENT FEE:** Full per diem unless 30  
calendar days notice is provided

**SIGNED AND SUBMITTED BY ARBITRATOR RINALDO ON SEPTEMBER 11, 2017**

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BILLING DISCLOSURE STATEMENT

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ARBITRATOR'S NAME: THOMAS N RINALDO

The following is a description of my fees and expenses:

A) HEARING TIME.

(1) My per diem is \$2,000 for each day or any part thereof spent hearing a case.

(2) If a hearing day exceeds 6 hours, I charge:

X a second full per diem                      \_\_\_\_\_ a prorated per diem  
\_\_\_\_\_ no additional charge                      \_\_\_\_\_ other (describe)

(3) Additional comments:

B) STUDY TIME.

(1) I charge \$2,000 for each day spent in preparation of the opinion and award.

(2) This charge \_\_\_\_\_ will X 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:

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:

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

X I charge as follows (describe): HALF PER DIEM RATE IN ADDITION TO LODGING AND  
SUBSISTENCE.

(4) Additional Comments:

D) POSTPONEMENT OR CANCELLATION FEES.

A fee of **\$2,000** will be charged unless I receive notice of a postponement or cancellation:

\_\_\_\_\_ within \_\_\_\_\_ calendar days of the scheduled hearing date

  X   other (describe): UNLESS 30 CALENDAR DAYS NOTICE IS PROVIDED

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.

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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.**