

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

RESUME OF PANEL ARBITRATOR

HOWARD FOSTER

Occupation: PROFESSOR (EMERITUS)

Williamsville, NY 14221

EDUCATION:

PH.D., CORNELL UNIVERSITY, 1969

MILR, CORNELL UNIVERSITY, 1966

B.A., BRANDEIS UNIVERSITY, 1964

PROFESSIONAL AFFILIATIONS:

LERA of Western New York (past president)

National Academy of Arbitrators

ARBITRATION EXPERIENCE & TYPES OF ISSUES OR GRIEVANCES DISPOSED OF:

About 1,000 arbitration decisions (including about 25 interest) on a wide variety of issues. Also service as hearing officer in discipline cases involving tenured teachers and police officers.

MEDIATION & FACT-FINDING EXPERIENCE:

About 100 mediation and fact-finding assignments through PERB

OTHER RELEVANT OR EQUIVALENT EXPERIENCE:

Professor of Industrial Relations (retired). Taught courses in collective bargaining, labor law, and dispute resolution.

PER DIEM FEE: \$1,600

ADJOURNMENT FEE: \$1,600 will be charged unless notice is received within 14 calendar days of scheduled hearing date.

SIGNED AND SUBMITTED BY ARBITRATOR FOSTER ON JUNE 30, 2020

Public Employment Relations Board
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BILLING DISCLOSURE STATEMENT

ARBITRATOR'S NAME: HOWARD FOSTER

The following is a description of my fees and expenses:

A) HEARING TIME.

(1) My per diem is \$1,600 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 X a prorated per diem

_____ no additional charge _____ other (describe)

B) STUDY TIME.

(1) I charge \$1,600 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 8 hours in a calendar day:

_____ Not applicable (no additional charge)

X I charge as follows (describe): PRORATED

(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): ONLY IF OUT OF TOWN

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

X 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 **\$1,600** will be charged unless I receive notice of a postponement or cancellation:

 X within 14 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 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.