

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

RESUME OF PANEL ARBITRATOR

MICHAEL S LEWANDOWSKI

Occupation: FULL-TIME ARBITRATOR

Clarence, NY 14031-0389

EDUCATION:

B.S., SUNY AT BUFFALO

M.S., SUNY AT ALBANY

COURSE WORK, ALBANY LAW SCHOOL & WESTERN NEW ENGLAND COLLEGE, SCHOOL OF LAW

PROFESSIONAL AFFILIATIONS:

Member, National Academy of Arbitrators

Member, American Arbitration Association

ARBITRATION EXPERIENCE & TYPES OF ISSUES OR GRIEVANCES DISPOSED OF:

Heard in excess of 1000 cases as member of AAA panel, FMCS panel, Public Employment Relations Board panel, Public Employment Relations Board Interest Arbitration panel, NYS/PEF/CSEA/NYSCOPBA panels including select panels on patient abuse. Heard cases involving all aspects of labor/management relations, discipline, contract and interest disputes. Former Member, East Coast Hockey League arbitration panel. Resolve disputes over claims of breach of contract and disciplinary matters.

MEDIATION & FACT FINDING EXPERIENCE:

Member of NYS Public Employment Relations Board panel of mediators and fact finders. Have handled many assignments involving disputes in school districts and local government.

OTHER RELEVANT OR EQUIVALENT EXPERIENCE:

Adjunct Instructor, Cornell University, School of Industrial Relations

Instructor, Labor Management Institute

Adjunct Instructor, Columbia-Greene Community College and College of Technology at Utica/Rome

PER DIEM FEE: \$2000

ADJOURNMENT FEE: \$2000 if fewer than
30 full workdays notice

SIGNED AND SUBMITTED BY ARBITRATOR LEWANDOWSKI ON MAY 1, 2018

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BILLING DISCLOSURE STATEMENT

ARBITRATOR'S NAME: MICHAEL S LEWANDOWSKI

The following is a description of my fees and expenses:

A) HEARING TIME.

(1) My per diem is \$2000 for each day or any part thereof spent hearing a case.

(2) If a hearing day exceeds 6 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 \$2000 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 _____ 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.

_____ I charge as follows (describe):

(4) Additional Comments:

D) POSTPONEMENT OR CANCELLATION FEES.

A fee of **\$2000** will be charged unless I receive notice of a postponement or cancellation:

 X within 30 work 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 X Yes No

Fax X Yes No

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

Postage X Yes No

Secretarial X Yes No

Telephone X 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.