RURAL ROUTE EVALUATION DISPUTE FORM

| USE SEPARATE SHEET FOR EACH DISPUTED ITEM | DATE: |
|---|---|
| Carrier Name: | Route #: |
| Management Official: | Title: |
| Carrier Phone: | Office Phone: |
| Installation: | Finance Number: |
| Effective Date of Evaluation: | Zip Code: |
| completed by the carrier and a local managedocuments for District review. | as identified potential errors on PS Form 4241-A, the below information will be gement representative. Upon completion, forward this form with all relevant |
| In Dispute (PS Form 4241-A Field Carrier's Reason For Dispute: | 1): |
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| | |
| 3. Management's Response To Dis | pute: |
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| | |
| 4. Supporting Documentation (List | and Attach Copies): |
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| | |
| Carrier Initials and Date: | Manager Initials and Date: |
| NOTE: THE ABOVE INFORMATION | N IS TO BE COMPLETED BY THE CARRIER AND INSTALLATION |

NOTE: THE ABOVE INFORMATION IS TO BE COMPLETED BY THE CARRIER AND INSTALLATION HEAD OR DESIGNEE. THIS FORM AND APPROPRIATE DOCUMENTATION ARE TO BE FORWARDED TO THE DISTRICT MANAGER LABOR RELATIONS AND THE NRLCA DISTRICT REPRESENTATIVE NO LATER THAN OCTOBER 20, 2023. ELECTRONIC SUBMISSIONS ARE ACCEPTABLE.