



# OFFICIAL GRIEVANCE FORM

NAME OF EMPLOYEE TONI TAGINSKI DEPARTMENT LIBRARY  
CLASSIFICATION CIRCULATION MANAGER - 16  
WORK LOCATION LIBRARY IMMEDIATE SUPERVISOR RUBI SIMON  
TITLE CIRCULATION MANAGER

**STATEMENT OF GRIEVANCE:**

List applicable violation: [9.6, ARTICLE IX] TONI HAS BEEN SCHEDULED WITH SUPERVISORY DUTIES OUTSIDE HER DEPARTMENT OVER THE LAST SIX YEARS SINCE STARTING THE CIRCULATION MANAGER POSITION, WITHOUT APPROPRIATE COMPENSATION. JUNE 2010 AS GROUP LEADER.

Adjustment required: TONI WILL BE COMPENSATED FOR THESE GROUP LEADER PAY DATING BACK 2 YEARS SINCE THE ONSET OF KRONOS TIME CLOCK, TO BE MADE WHOLE.

I authorize the A.F.S.C.M.E. Local 1343 as my representative to act for me in the disposition of this grievance

Date 8-2-16 Signature of Employee Toni A. Taginski

Signature of Union Representative Emu Feeney Title 8/2/16 CLERK

Date Presented to Management Representative 8/20/16

Signature Rubi Simon Title Library Director

Disposition of Grievance: Request an extension to further review option for resolution. Would agree to pay Group leader pay without ~~pre~~ prejudice. Prospectively not retroactive.

**THIS STATEMENT OF GRIEVANCE IS TO BE MADE OUT IN TRIPLICATE. ALL THREE ARE TO BE SIGNED BY THE EMPLOYEE AND/OR THE AFSCME REPRESENTATIVE HANDLING THE CASE.**

ORIGINAL TO RUBI SIMON

COPY TONI TAGINSKI

COPY: LOCAL UNION GRIEVANCE FILE

**NOTE: ONE COPY OF THIS GRIEVANCE AND ITS DISPOSITION TO BE KEPT IN GRIEVANCE FILE OF LOCAL UNION.**