



Pacific Gas and Electric Company

Maggie Brown
Sr. Labor Specialist
Labor Relations

111 Stony Circle
Santa Rosa, CA 95401

Sonoma 2014-19

December 15, 2014

Sonny Hollesen
IBEW Local 1245
P.O. Box 2547
Vacaville, CA 95696

Dear Sonny:

In accordance with Title 8.16 of the Clerical Agreement and Title 111.15 of the Physical Agreement, the Company proposes to authorize employees to voluntarily sell vacation and transfer proceeds to Hank McClain, who is experiencing a medical emergency. Hank McClain is a Troublemaker in Fort Bragg.

If you are in accord with the foregoing and agree thereto, please so indicate in the space provided below and return one executed copy of this letter to the Company.

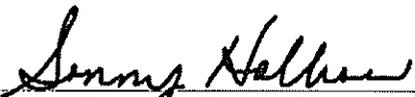
Sincerely,

PACIFIC GAS AND ELECTRIC COMPANY

By 
Maggie Brown, Sr. Labor Specialist

The Union is in accord with the foregoing and agrees thereto.

Local Union 1245
International Brotherhood of
Electrical Workers, AFL-CIO

By 
Sonny Hollesen, Union Business Rep

12/15/14
Date

CC Jim McCoy
Labor Relations

INSTRUCTIONS: This form should be typewritten or printed legibly in ink.

Represented employees must have an approved letter agreement to sell vacation (personal use or donation).

Management employees may not sell vacation for their personal use; however, they may sell vacation and donate it to an employee experiencing a medical emergency. **Note: VP approval no longer necessary as of September 2012.**

An employee may not sell service anniversary or bonus vacation unless he/she has worked during the current year per union contract.

See the Vacation Sale for Medical Emergency documentation, policy and instructions for additional information. [Vacation Sales Policy](#)

PERSONAL INFORMATION (DONOR)			
PAYROLL <input type="checkbox"/> Monthly <input type="checkbox"/> Biweekly	EMPLOYEE (Last, First)	LANID	PHONE NUMBER
PERSONNEL NUMBER	ADDRESS <input type="checkbox"/> Work <input type="checkbox"/> Home	NUMBER OF DONATED HOURS	

I hereby authorize and request Pacific Gas and Electric Company to sell the vacation hours specified above and transfer the proceeds to the recipient listed below.

_____ Donor Signature

_____ Date Authorized

PERSONAL INFORMATION (RECIPIENT)			
PAYROLL <input type="checkbox"/> Monthly <input checked="" type="checkbox"/> Biweekly	EMPLOYEE (Last, First) McLain, Henry	LANID HLM5	PHONE NUMBER 707-489-0183
PERSONNEL NUMBER 8 1 2 2 0	ADDRESS 30960 Sherwood Rd., Fort Bragg, CA95437	DELIVERY INSTRUCTIONS*	

*only used if selling vacation for self

VACATION SALE COORDINATOR			
NAME Robert Brower	ADDRESS 3965 Occidental Rd., Santa Rosa, CA 95401	LANID RABC	PHONE NUMBER 707-579-6357

Attention: Employees

Prior to submitting this form to the Vacation Sales Coordinator, ensure you have the selected number of hours available to donate.

Provide completed form to the Vacation Sale Coordinator.

Attention: Vacation Sale Coordinator
Send completed package to Payroll

I have reviewed the Vacation Sales Policy [Vacation Sales Policy](#)

Payroll Department
77 Beale Street, San Francisco, CA 94105
Mail Code B6B
email to: transactions@pge.com