Locomotive CP 8852

INSTRUCTIONS: This Legementive Inspection and Repair Record (Record or F6180-49A) covers a calendar year, except as noted. The Record for the preceding calendar year shall be retained in the legement of the first periodic inspection of the new year or, until a Record is replaced on April 2nd or July 3rd (if 184 day eligible) as required by 49 CFR 229.23(f) or, until the legement of the periodic inspection of the requested information in each block. Special instructions are given below.

1. OPERATED BY: Enter the name and gode of the primary railroad operating the locomotive at the time this Record is placed in it.

Operator changes, including dates, shall be noted in "Remarks." The "RR Code" is as assigned by FRA to the railroad.

- 2. OWNER: Enter the name and RR code of the owner. Changes in ownership shall be submitted as final reports.
- 3. LOCOMOTIVE NO.: Enter digits only. Include letters if they differ from the "RR code." If renumbered, enter the previous number.
- 4. YEAR BUILT: Enter the year the locomotive was built and check if new. If remainfactured per 49 CFR 229.5, enter "RM" and the year,
- 5. PROPELLED BY: Enter Diesel-Bleckrio (D-E), Electric (E), Electric Multiple Unit (MU), Diesel Multiple Unit (DMU), MU Control Cab (MUC), Non-MU Control Cab (NMUC), Turbina (T), Torque Converter (TC), or Other (O).
- 6. MAXIMUM PISTON TRAVEL; Enter only "nominal" travel. Do not include the manufacturer's telerance.
- 7. OUT-OF-USE CREDIT: Enter the number of creditable calendar days the locomotive was out-of use since the last periodic inspection on the previous F6180-49A.

 Less than 30 consecutive calendar days for any out-of-use period may not be counted per 49 CFR 229.33. For current periods out-of-use, an entry

 "Out-of-use from ____to____" shall be made on a Periodic Inspection line and certified when a locomotive which would otherwise be due for inspection is out-of-use.

 If the locomotive is out of use at the end of the annual reporting period, complete the "To" entry with the last day of the period.

An entry shall then be made on the new Record showing the first day of the new reporting period as the "From" date.

- 8. LAST PERIODIC INSPECTION: When a new Record is placed in the locomotive transfer the last periodic inspection information into block 12 a & b and the last test information into column 24 of the new Record. Tests that are not applicable should be noted "NA".
- 9. AFM CAL: Enter the date of the last Air Flow Method Indicator (AFM) calibration from the previous year. Enter and certify subsequent calibrations as they are done.
- 10. PERIODIC INSPECTIONS: Check 184 days only if the locomotive qualifies per 49 CFR 229.23(b)(1) and the railroad chooses to abide by the requirement for 33 day

 QMI Daily inspections, otherwise check 92 days. Persons making the required inspections shall sign and list the item codes inspected. The employee's supervisor

 shall scriffy that the inspections were completed.
- 11. H&H: Enter the lest pressure for the hydrostatic air reservoir test. If the reservoirs are drilled, enter "NA" here and "Drilled" in the Hammer and Hydro line below.
- 12. WAIVERS: Any waivers applicable to this locomotive shall be entered by waiver number in block 19 if a waiver from part 229, or block 20, if a waiver from any other regulation. Enter explanatory information regarding the second content of each waiver under !Remarks".
- 13. TESTS: The maximum number of days for Event Recorder, Level 2 and Level 3 air brake tests shall be entered per the referenced sections of 49 CFR 229.
 Where the railroad has chosen to fragment air brake clean, repair and test requirments as permitted under 49 CFR 229.29, a separate air record shall be maintained in the cab of the locomotive and the word "Fragmented" shall be entered in the lovel 2 and level 3 lines.

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NOISE: Enter a	ny noise tests or relate	ed information in accord	dance with 49 CFR	210.31.	* 191	10 10 10
REMARKS: Th	e carriers should enter	r under "Remarks" any	other clarifying or e	xplanatory informa	tion.	
				V ARNO		
				F6-13-W		
Event Reco	rder Egyloped - Waht	ec TTX-IDR-01(WRE264	(2P)			

Public reporting burden for this collection of information is estimated to average 15 minutes per response including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. A federal agency may not conduct or approach, and a person is not required to, nor shall a person be subject to a pensity for failure to comply with, a collection of information unless that collection of information displays a current OMB Number. The OMB control number for this information is 2130-0004. Anyone with comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, may send them to: Information Clearance Officer, Federal Railroad Administration, 1200 New Jersey Ave, SE, MS-25, Washington, DC 20590

U.5. GOVERNMENT PRINTING OFFICE 2012:461-828/98002 Form FRA F6180-49A (11/2012)

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Qualified Locomotive Mechanical Inspection

Item# 59070

(30 Days Inspection)

	- Locomotive No.		This form to be used and placed in locomotive cab for units
1			that follow
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	DATE mm / dd / yyyy	TIME	SIGNATURE (Qualified Inspectors)
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Supplemental Air Brake Card

CP 008852	852		WAIVER-FRA-2005-216/3	
PORTION	FREQUENCY	PERSON CONDUCTING	TEST DATE & PLACE CERTIFIED BY	PREWOUS TEST DATE & PLACE
16 CP	3312 (9 yrs)	(b) (6), (b) (7)(C)	65/61/2016 CALGARES	5/8/2007 Erie, PA (b) (6), (b) (7)(C)
ERCP	3680 (10yrs)			11/12/2014 Galesburg, II
<u>DB TV</u>	3680 (10yrs)			5/8/2007 Erie, PA
20 CP	3680 (10yrs)			5/8/2007 Erie, PA
BCCP	3680 (10yrs)			58/2007 Erie, PA
13 CP	3680 (10yrs)			2/1/2015 Kansas City, KS
21 W	3680 (10yrs)			5/8/2007 Erie, PA
BP CP After April 2013	3680 (10yrs)			6/30/2014 Kansas City, KS
BP CP Prior April 2013	2576 (7yrs) 13			



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2016 Cana	ERATED BY adlan Pacific R	lailway		CODE 2. OWNE	an Pacific Rail		RR CODE 0 1 0 5
3, MODEL NO. AC 44	00 GW	4. LOCO NO. CP 9769	If renum	bered, Prev No.	5. Year Bullt 2003	Check if New Locomo	live
of Real and other of the State of the Paris		8. Type of Service	Yard		9, Steam Gen, a. No. N/A	b. Working PressureN/A	10. Max Piston Travel8Inches
Air Brake type	學與第二章 经共和国公司	ver; Check one;		11,0út of use Credit:	1 /	spection ; 1/2015	b. Place St. Paul, MN
AFM CAL 229.29(b)	92 day max Interval	Previous date: 2/2/2016	Date &	3 cert: 4/25/2016	Date & cert: 8/11/16	Date & cert:	Dete & centy
PERIODIC INSPE	100 May 100 Ma	one:	92 days	рег 229.23 (а)	_X_	184 days per 229).23 (b)(1) ofily
	Charles San		P	ERIODIC INSPECT	ons		
13. DATE Month/Day/Year	14.PLACE	15. ITEMS*	16. P	erson Conducting	15. ITEMS*	16.Person Condy	cting 17. Certified By
4/25/2016	St. Paul, MN	1,3		(b) (6), (b) (7)(C)	5	(o) (6), (b) (7)(C)
4/25/2016	St. Paul, MN	2,4,7					
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TYPE	Interval Not more than:	21 Person Cond		22. Test Date & I		3. Certified By	24. Previous Test Date & Place
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Annual Tests 229:27	368 days			N/A			N/A
Hand Brake 232.105 (c)	368 days			10/26/20 51. Powl.			10/21/2015 St. Paul, MN
AIRBRAKE 229.29(c)(1)	368 days			10/26/70 5x Paul 0	6		10/21/2016 St. Paul, MN
AIRBRAKE 229.29(c)(2)	No. of days 2576 Days						08/09/2010 Calgary, AB
AIRBRAKE 229.29(c)(3)	No. of days (Ye was			02/12/2011 Calgary, AB
Hammer and Hydro 229.31	A CALCULATED STREET, S	N/A		N/A		N/A	N/A
In accordance with	n the Locomotive	Inspection Act, 49 U	Sc Chapt	er 207 and the regula	ations issued pursu	uant to that Act. the	parts and appurtenances of

the locomotive unit have been inspected and all defects disclosed by the inspection have been properly repaired.

Certification of true copy,

I certify that this is a true copy of the inspection and repair record of locomotive no.

CP 9769 -

(Officer-in-charge)

DATE

ATTENTION: A false entry on this form is punishable by fine or imprisonment (U.S. Code, Title 18, Sec. 1001).

CF 7/09 -

INSTRUCTIONS: This Locomotive Inspection and Repair Record (Record or F6180.49A) covers a calendar year, except as noted. The Record for the preceding calendar year shall be retained in the locomotive until the first periodic inspection of the new year or, until a Record is replaced on April 2nd or July 3rd (if 184 day eligible) as required by 49 CFR 229.23(f) or, until the locomotive changes ownership (see 2 below.) Enter the requested information in each block. Special instructions are given below.

OPERATED BY: Enter the name and code of the primary railroad operating the locomotive at the time this Record is placed in it.

Operator changes, including dates, shall be noted in "Remarks." The "RR Code" is as assigned by FRA to the railroad.

- 2. OWNER: Enter the name and RR code of the owner. Changes in ownership shall be submitted as final reports.
- 3. LOCOMOTIVE NO.: Enter digits only. Include letters if they differ from the "RR code." If renumbered, enter the previous number.
- 4. YEAR BUILT: Enter the year the locomotive was built and check if new. If remanufactured per 49 CFR 229.5, enter "RM" and the year.
- 5. PROPELLED BY: Enter Diesel-Electric (D-E), Electric (E), Electric Multiple Unit (MU), Diesel Multiple Unit (DMU), MU Control Cab (MUC), Non-MU Control Cab (NMUC), Turbine (T), Torque Converter (TC), or Other (O).
- 6. MAXIMUM PISTON TRAVEL: Enter only "nominal" travel. Do not include the manufacturer's tolerance.
- 7. OUT-OF-USE CREDIT: Enter the number of creditable calendar days the locomotive was out-of use since the last periodic inspection on the previous P6180-49A.

Less than 30 consecutive calendar days for any out-of-use period may not be counted per 49 CFR 229.33. For current periods out-of-use, an entry

"Out-of-use from ____to___ " shall be made on a Periodic Inspection line and certified when a locomotive which would otherwise be due for inspection is out-of-use.

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- 10. PERIODIC INSPECTIONS: Check 184 days only if the locamotive qualifies per 49 CFR 229.23(b)(1) and the railroad chooses to abide by the requirement for 33 day QMI Daily inspections, otherwise check 92 days. Persons making the required inspections shall sign and list the item codes inspected. The employee's supervisor shall certify that the inspections were completed.
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- 12. WAIVERS: Any waivers applicable to this locomotive shall be entered by waiver number in block 19 if a waiver from part 229, or block 20, if a waiver from any other regulation. Enter explanatory information regarding the scope and content of each waiver under "Remarks".
- 13. TESTS: The maximum number of days for Event Recorder, Level 2 and Level 3 air brake tests shall be entered per the referenced sections of 49 CFR 229.

Where the railroad has chosen to fragment air brake clean, repair and test requirments as permitted under 49 CFR 229.29, a separate air record shall be maintained in the cab of the locomotive and the word "Fragmented" shall be entered in the level 2 and level 3 lines.

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<u>NSE</u> : Enter any noise tests or re	lated information in acc	cordance with 49 C	FR 210.31.			i
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Public reporting burden for this collection of information is estimated to average 15 minutes per response including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. A federal agency may not conduct or sponsor, and a person is not required to, nor shall a person be subject to a penalty for failure to comply with, a collection of information unless that collection of information displays a current OMB Number. The OMB control number for this information is 2130-0004. Anyone with comments regarding this burden estimate or any other aspect of this information collection, including suggestions for reducing this burden, may send them to: Information Clearance Officer, Federal Railroad Administration, 1200 New Jersey Ave. SE, MS-25, Washington, DC 20590

U.S. GOVERNMENT PRINTING OFFICE 2012 461-823/33002 Form FRA F6180-49A (11/2012)

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ection new#.59070	This form to be used and placed in locomotive cab for units	that follow 184 day periodic inspection	SIGNATURE (b) (b) (7)(C)												
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		- 57	Supplemental Air Brake card	(e card	
MECHANICAL LOCOMOTIVE No.					
CP 9769			WAIVER	WAIVER: FRA-2005-21613	
PORTION	FREQUENCY DAYS	PERSON CONDUCTING	TEST DATE 8 PLACE	CERTIFIED BY	PREVIOUS TEST DATE & PLACE
16.CP	3312 (9yrs)				02/12/2011 Calgary, AB
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DB-TV	3680 (10yrs)	**			02/12/2011 Calgary, AB
20 CP	3680 (10yrs)				02/12/2011 Calgary, AB
BCCP	3680 (10yrs)				02/12/2011 Calgary, AB
13 CP	3680 (10yrs)				02/12/2011 Calgary, AB
21.WV	3680 (10yrs)				02/12/2011 Calgary, AB
BP CP After April 2013	3680 (10yrs)				
BP CP prior April 2013	2576 (7yrs)				08/09/2010 Calgary, AB
air brake cab card		j	Do not remove from cab		Revised: 13/08/2015

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Highway & Highway Vehicle Information:

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REPORT OF INTERVIEW

Person Interviewed

NAME: (b) (6), (b) (7)(C)

OCCUPATION: PTI Van Driver

Date of Interview: 2-2-2017

Time: 11:30 am PST

Place of Interview: via phone

Others Present: Ed McCullough, FRA; (b) (6), (b) (7)(C)

Interviewed By: Kevin Pannell, FRA

PTI Van Driver was interviewed concerning the fatality on January 31, 2017 to the conductor on Union Pacific Train M SKHK 30 with leading locomotive CP 9769.

The above person was interviewed relevant to an investigation being conducted by the Federal Railroad Administration (FRA). The following statements, and/or comments, are provided as part of this investigation, and although not verbatim, accurately and fully reflect the statements and/or comments of the participant.

(b) (6), (b) (7)(c) stated that he was called on duty at 10:00 pm PST on 1-30-2017 to cover the Wallula yard. He stated that there are normally two trains he assists at Wallula, a north bound train and a south bound train. At around 00:09 am PST, on 1-31-2017 the north bound train arrived and he assisted the train crew for about one and a half hours with no issues. (b) (6), (b) (7)(C) stated after he finished assisting the north bound train he waited at the Wallula depot for the south bound train to arrive.

(b) (6), (b) (7)(C) stated that the south bound train, (MSKHK 30) arrived at the depot at approximately 4:45 am PST. The train stopped in front of depot and an employee got off the engine and went into the office. About 5 minutes later the employee exited the office and he reboarded the train. As the train departed towards the south end of yard, (b) (6), (b) (7)(C) contacted the crew and asks for instructions. The crew told him to proceed to the usual spot to assist them.

(b) (6), (b) (7)(c) stated he had to wait at the grade crossing until the train had cleared. Once the train cleared the crossing he preceded to the usual location he assists crew from which was at CPE 213; approximately 2 miles south of the depot (CPE 215). Upon arriving at CPE213, stated that the train was already moving north bound (indicating the crew was already in the process of making the pick-up) and did not notice the location of the conductor nor did he hear any radio conversations between the engineer and the conductor. (b) (6), (b) (7)(c) stated that since the roads were snow covered and icy he stopped his vehicle and proceeded on foot to check the road conditions. After determining that he could safely drive on the roads he reentered his vehicle when he received a radio call from the engineer to check on the conductor because he could not get in contact with him. He stated that he would check on the conductor.

(b) (6), (b) (7)(C) stated that he left his vehicle and walked to the train which was about 50 feet away. He then proceeded north next to the train towards where he thought the conductor should be. After he had walked about 3-4 car lengths he stated he could see a light lying on the ground illuminating the ground, which was snow covered and he assumed it was the conductor's lantern. He continued to walk towards the light and when he got to within a few feet of it he saw a bald head under the train and between the rails. (b) (6), (b) (7)(C) called out several times asking if the person was ok with no response. He looked around the area and saw a body part outside the rail. (b) (6), (b) (7)(C) did not have a flashlight.) He immediately returned to his vehicle to call the engineer on the radio. At approximately 5:00, (b) (6), (b) (7)(C) stated he called the engineer on the radio and told him that someone was lying between the tracks and he thought he was dead.

(b) (6), (b) (7)(C) stated he drove his vehicle back up to the highway to await emergency responders. After approximately 45 minutes the emergency responders arrived and (b) (6), (b) (7)(C) stated he escorted them down next to the tracks and pointed out the location of the conductor.

REPORT OF INTERVIEW

Person Interviewed

NAME: (b) (6), (b) (7)(C)

OCCUPATION: Engineer

Date of Interview: 1-31-2017 Time: 10:00 am PST

Place of Interview: On board train M SKHK 30 at Wallula, WA

Others Present: Jeff Deakins, FRA

Interviewed By: Kevin Pannell, FRA

Union Pacific Engineer was interviewed concerning the fatality on January 31, 2017 to the conductor on Union Pacific Train M SKHK 30 with leading locomotive CP 9769.

The above person was interviewed relevant to an investigation being conducted by the Federal Railroad Administration (FRA). The following statements, and/or comments, are provided as part of this investigation, and although not verbatim, accurately and fully reflect the statements and/or comments of the participant.

The engineer stated that they stopped at the depot and the conductor picked up their paperwork. He also stated that the conductor had made the decision to do a rear of train pick-up. Then they proceeded to the south end of Wallula Yard.

The engineer stated that they stopped at the switch/derail for the conductor to get off the locomotive to make their switching move. After the conductor dismounted, he instructed the engineer to pull ahead (south) to clear the Control Point. The engineer stated that the conductor was going to line the switch and remove the derail and then walk to the rear of the train to get in position to see the signal aspect.

The conductor called the engineer and let him know they had a signal and he was riding the rear car and tells him to shove back 18 car lengths to a stop. The engineer stated that the conductor continued giving car counts and that his speed was approximately 4 mph. The last car count the conductor gave was for two cars and that the engineer had slowed his shove speed to about 2 mph. The engineer did not hear anything else so he stopped movement. He then tried to contact the conductor via radio but did not get a response. The engineer then called the PTI van driver that was assisting with the move and asked if they would get out of the van and go check on the conductor. The van driver called back and informed the engineer that the conductor was down and it didn't look good.

The engineer stated that as he was talking to the PTI driver, the UP Dispatcher called the engineer to ask about their move and how long they would be. The engineer informed the UP Dispatcher about the incident and to call emergency services.

REPORT OF INTERVIEW

Person Interviewed

NAME: (b) (6), (b) (7)(C)

OCCUPATION: Manager Train Operations

Date of Interview: 2-21-2017

Time: 09:30 am PST

Place of Interview: UP Hinkle Yard Office

Others Present:

(b) (6), (b) (7)(C)

Interviewed By: Kevin Pannell, FRA

UP (b) (6), (b) (7)(C) was interviewed concerning the fatality that occurred on January 31, 2017 to the conductor on the train M SKHK 30 with leading locomotive CP 9769.

The above person was interviewed relevant to an investigation being conducted by the Federal Railroad Administration (FRA). The following statements, and/or comments, are provided as part of this investigation, and although not verbatim, accurately and fully reflect the statements and/or comments of the participant.

I interviewed the MTO in regards to the fatality that occurred at Wallula, WA on 1-31-2017. The MTO was on his normal days off on the day of the incident. He stated that the conductor was working his regularly assigned job. The MTO also stated that the normal method of making a pick up out of Wallula yard was a headend pick up and he doesn't know why the crew decided to make a rear end pickup. The MTO stated that the conductor normally does not like to ride cars. Again he stated that he did not know why the conductor chose to ride the shove that day. I ask the MTO what the call time for that job and he stated it is a one-and-a-half-hour call.



RAILROAD ACCIDENT/INCIDENT NOTIFICATION AND INITIAL INVESTIGATION REPORT

1. Submitted By Kevin Pannell	2. Inspector No. (if a 67150	pplicable)
3. Submission Date	4. Submission Time	4a. Time Zone
01/31/2017	11:50 AM	PST

			and the second	Railroad/C	ompany/Shipper	nformation		
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115				Accident/Incid	ent Type, Locatio	n, Date & Time		
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	Accident/ ality (FE)	Incident Type		11. Accident/Incid 01/31/2017	lent Date	12. Acciden 5:00 AM	t/Incident Time	12a. Time Zone PST
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Tra	ffic contr	lo	1					
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ID	22, Train	n Kind	23. Train No.	24. Direction	25. No. of Loco(s)	26. No. of Cars	27. Speed (MPH)	28. Equip Derailed
1	Freight	Train	M SKHK 30	South	2	61	UKN	No

			Casualties	
29. No. of Killed	ì	30. No. of Serie	ously Injured	31. No. of Slightly Injured
j		None	The second secon	None
H	lazardous Mate	rials Cars Dera	iled Or Significantly Dama	ged & Evacuation Info
32. No. of Cars Derailed or Da None	maged	33. Populated No	Area	34. No. of People Evacuated None
	Hi	ghway-Rail Inte	rface Accident/Incident In	formation
35. Rail-Highway Crossing No	36. DOT Grad N/A	te Crossing No.	37. Grade Crossing Addres. N/A	s or Name
38. Warning Device N/A		39. Quiet Zone N/A	0	40. Maximum Authorized Train Speed (MPH N/A
41. Probable Cause of Accider Unknown at this time/ Under)	,	
		Synop	sis Of Accident/Incident	
12. Synopsis				· · · · · · · · · · · · · · · · · · ·
INITIAL REPORT:				

This is an initial report of an employee fatality on the Union Pacific Railroad, Portland Division, Ayer Subdivision which occurred near Wallula, Washington at milepost 213 at approximately 0500 on 01/31/2017. A southbound train, MSKHK-30, with lead locomotive CP 9769 consisting of: 29 loads; 32 empties; 4896 tons; and 4713 feet was making a rear of train pick-up. The Conductor got off the train at the derail and switch and had the Engineer pull ahead to clear the Control Point (CP). After lining up the move the Conductor walked to the rear of the train to be able to view the signal. Upon signal indication Conductor boarded the rear car and gave the Engineer instructions to make a reverse move of 18 car lengths to a stop. Conductor continued giving Engineer car count movements. The last transmission from the Conductor was instructions for two car lengths to a stop. Engineer did not hear a reply, so he stopped the movement and attempted to contact the Conductor via radio. After getting no response, the Engineer contacted the contract crew hauler who was on location and requested them to check on the Conductor. Van driver notified the Engineer that the Conductor was down and had been struck by his train. Engineer then notified the dispatcher.

At this point in the investigation, it has not been determined if the employee slipped and fell or if he has dislodged because of slack action from the train.



RAILROAD ACCIDENT/INCIDENT NOTIFICATION AND INITIAL INVESTIGATION REPORT

		IKW E OTOO'S AT
1. Submitted By Kevin Pannell	2. Inspector No. (if a 67150	pplicable)
3. Submission Date 01/31/2017	4. Submission Time 11:50 AM	4a. Time Zone PST

42.	Syno	nsis

This is a crude oil route.

This is not an Amtrak route.

This was not PTC preventable.

Probable cause not identified at this time. Will update when more information is available.

RAILROAD INJURY AND ILLNESS SUMMARY

AMENDED

DEPARTMENT OF TRANSPORTATION

FEDERAL RAILROAD ADMINISTRATION (FRA)

(Continuation Sheet)

SHEET _1 OF _1 OMB Approval No.: 2130-0500

. Name of Rep	orting Railroa	d	D-martnet				2. Alphab	etic Code	3. Report Mon	ith	4. Rep	port Year	r
UNION PA	ACIFIC RA	ILROAD					UP		JANUARY		20	17	
							777 01.1			-			
ia. Accident/Injury	Number	5b. Day	5c. Time of Day	5d. County						5e. State	5f. Type Person/ Job Cod		5g. Age
0117PD04	43	31	05:00 AM	IAW	LLA WALLA					WA	A6	08	54
Sh. Drug/ Alcohol Test	5i. Injury Illness Code	5j. Physical Act	5k. Locatio	on	51. Event	5m. Tools	5n. Causo	50. Number of Days Away From Work	5p. Number of Days Restricted	5q. Exposur Hazmat		5r. Specia Codes	
	908	58	В	03 A4	59	36	99	0	0		N		
s. Latitude (o)	ptional)		46.067	248		5t.	. Longitude (option	nal)	-118	.908999	The state of		
u. Narrative (Up to 250 Ch	aracters)						77			1	e transfer	
a. .ccident/Injury	/ Number	5b. Day	5c. Time of Day	5d. County		t rev		,9		5e. State	5f. Type Person/ Job Coo		5g. Age
5h. Drug/	5i. Injury	5j. Physical	5k. Location	00	5l. Event	5m.	5n. Cause	50. Number of	5p. Number of	5q. Exposur	reto	5r. Specia	al Case
Alcohol Test A D	Illness Code	Act	4	10/-	35 9		68	Days Away From Work	Days Restricted	Hazmat		Codes	
- Latitude (o	-tional)					St	Longitude (optio	nal)					
5s. Latitude (o			-			50	. Longitudo (optio	maij			- Court	-	
u. Namanve (Up to 230 Cm	aracters)	1									7	
		-											
				-					Test and				
				20.12		The same the same						-	
5a. Accident/Injury	y Number	5b. Day	5c. Time of Day	5d. County	,					5e. State	5f. Type Person/ Job Co		5g. Age
				TROTTER		STAGES SONT IN	ATTENDED TO SERVICE	Tall Bright					
	5i.	5j. Physical	5k. Locati	ion	51. Event	5m.	5n. Cause	50. Number of Days Away From Work		5q. Exposu Hazmat		5r. Specia Codes	
Drug/	Injury Illness Code	Act		N 10 -									-
Drug/ Alcohol Test	Illness	Act											
Drug/ Alcohol Test A D	Illness Code	Act				5t	t. Longitude (optio	onal)					
Drug/ Alcohol Test A D 5s. Latitude (c	Code optional)	Act				51	i. Longitude (optic	onal)					
Drug/ Alcohol Test A D 5s. Latitude (c	Code optional)	Act				51	t. Longitude (optio	onal)					
5h. Drug/ Alcohol Test A D 5s. Latitude (c 5u. Narrative	Code optional)	Act				51		onal)					
Drug/ Alcohol Test A D 5s. Latitude (c) 5u. Narrative	Ode Code pptional) (Up to 250 Ch	Act maracters)											

RAILROAD EMPLOYEE INJURY AND/OR ILLNESS RECORD

DEPARTMENT OF TRANSPORTATION

1. Railroad								Total Control of the	ncident Num	ber	OMB Approval No.: 2130-050
UNION PAG	CIFIC RAI	LROA	AD .					0117	/PD043		
				EMPL	OYEE IN	FORMA	TION				
3. Last Name			iddle Initial		4. Date (4b)	of Birth	5. Sex (I		mployee ID		7. Date Hired 07/26/2004
HOME			ess (Include Apt. No.)		9. City			10. State			Telephone No.
ADDRESS:	(4b)	YK.			(4b)			(4b)	(4b)	(include (b)	de area code) 6), (b) (7)(C)
ESTABLISH			13. Name of Facility SPOKANE DEPOT								
FACILITY EMPLOYED						115.6	7'.			Tre con	La PID
NORMALL		TS:	14. Street Address 4315 E. SPRAGUE A	VE		15. 0	OKANE			16. State	17. ZIP
18. Job Title			4313 E. SPRAGUE A	.VE			tment Ass	ioned To		WA	99212
CONDUCTO	R THRU				=	_	- THRU-	_			9
			ACTI	VITY/INCII	DENT/EX						
LOCATION	WHERE	T.	20. Specific Site								
ACCIDENT INCIDENTA	7		YARD - DEPARTURE TO	RACK 111							
EXPOSURE			21, City			22. Cour	ity			23. State	24. ZIP
OCCURRE	D:		WALLULA	60		WALTA	WALLA			WA	99360
25. Is this on	your prem	ises?	26. Date of Occurrence	27. Time Sh	ift Began	1		e of Occur	rence AM		as person on duty?
Yes X	No	Г	01/31/2017	01/30/17	_	PM X	_	:00	PM	Yes	
COMPANY	3	0. Da	te that Employee Notified	31. Tin	ne that Er	nployee N		AM	x 32. Pers	on Notified	, [] ,,,
NOTIFICA	·		mpany Personnel of Condi				Condition	AW			
		03	1/31/2017	0.5	:10			PM	(b) (6)	, (b) (7)(C)	
33, Describe	the genera	lacti	vity this person was engage	d in prior to	injury/illi	ness.					
CONDUCTO	R RIDING	EQUIF	MENT ON SHOVING MOVEMEN	T WAS FATAI	LLY INJUE	RED.					

34. Describe	all factors	assoc	ciated with this case that ar	e pertinent to	an under	standing o	f how it o	ccurred.			
58 RT	DING										
В УА											
	EIGHT TRA		- MOVING	,							
	FWEEN TRA		RACK EQUIPMENT								
			EQUIPMENT								
	DETERMIN										
			he reporting railroad's acciden se in any suit or action for dans								vidence
	49 C.F.R. 2			agos Browing	out of any	matter men	tioneg in sa	ia topoit.,	, , 49 0,3,0.	20905.	

	INJURY/CONDITION IN	IFORMATION		
35. Describe the injury/condition that this p	person sustained.			
MULTIPLE BODY PARTS FATALLY INJURE	D .			
36. Identify persons and organizations use	l to evaluate and/or treat condition.			
NOT APPLICABLE.				
37. Describe all procedures, medications,	herapy, etc.:			
NOT APPLICABLE.				
Occupational illness. Date of ini Instructions to obtain prescriptio Missed a day of work or next shi Significant injury/illness, one me Medical treatment. This include who provided the treatment. "Fi cuts, abrasions, etc. Transfer to another job or termin	Suicidays of restricted activity:astial diagnosis: In medication, or receipt of prescription reft. Reportable days absent from work:eting specific case criteria, or a covered sany medical care or treatment beyond start Aid" treatment is limited to very simpation of employment.	dc/Attempted suicide s of: medication as of: data case. "first aid" that is given, of the procedures, e.g., app.	inpatient. Multiple treatm Loss of conscio	ven, regardless of n minor scratches,
39. If any of the above consequences occudoes not meet the reporting criteria, you n				
40. Has this employee been provided an		Yes X No		
41. Preparer's Name (b) (6), (b) (7)(C)	42. Preparer's Title MGR ADMINISTRATION		elephone Number) (6), (b) (7)(C)	44. Date initially signed/completed 02/01/2017

INSPECTION REPORT

																	,			
Inspe	ctor's Name			In	spector'	s Signatu	re					Ins	pector's ID	No	Report	No	уу	$-\frac{D}{1}$	ate mm	dd
Rain	ville, Rikki												71420		15		201	7	01	31
Railro	ad/Company Na	ame & Addi	ress					R/C		Divi	sion		RR/C	o Rej	presentativ	ve (Rec	eipt Ack	nowle	iged)	
Unio	on Pacific Ra	ilroad			i]	R	POI	RTL		Name	.	(b) (6), (b	o) (7)(C	2)			
PO	Box 69							RR/C		Subd	ivision		Title		Forema	n Gen	eral II			
								Code												
Herr	niston		OR	9'	7838			UP		AY	ER		Email	l	(b) (6),	(b) (7)(C)			
													Signa	ture						
From City	: WALLUL	A		Codes 2393	3	Destina	tion City	& Cou	nty				Code	s	From Lat	itude				
State	WA			53		City									From Lor	ngitude	8	-		
Count	y WALLA V	WALLA		C07	1	County						To Latitud				de				
Mile	Post: From						LLULA YARD						To Longi	tude						
Activi Code:		215	224	229D	O 231 MREC														CA	RS
Units:		3	5	2	5 1														4	
Sub U	Inits:	0	0	0	0 4														0	
Item	Initials/Milepo	ost Ea	uipment/Track #	Type/Kind	49 CFR	/ Defe	ct Sub	nıle			Speed	Class	Train #/Si	te		SNFR	* RCL	** #	of	Activity
item	minus vinepo	ost Eq.	urpineno Truek ii		USC	,	or jour				Speed	Crass	Tradit iii Oi							Code
1																N	N	()	
Descr	iption - [** C	omment to	o Railroad/Con	npany **]																
	part in the FI buting causes		gative team the	at traveled to	Wallu	la, WA.	to inve	stigate	a Uni	on Pa	cific Ra	ilroad	employe	e fata	lity to es	stablis	h root o	ause	and an	у
Asal	MP&E safety	inspector,	I inspected all																	hich
			ated to the inci-	dent. My me	chanica	al invest	igation	disclos	sed no	exce	otions w	ere tal	ken to the	freig	ght cars	or locc	omotive	s and	their	
100000000000000000000000000000000000000	anical compor	nents.																		
Seal A	pplied		Se	al Removed				ŀ	Hazard	Class				UN	N/NA ID					
Violation Recommended Yes VNo						Latitude	e:					Long	gitude:							
	n Notification to	l Option	nal	Railroad	Action C	ode [Date(m	m/dd/y	ууу):			Comments on back?			:k?			

INSPECTION REPORT

Inspector's Name				I	nspector's	Signature					Inspe	ector's ID No	Report N			Date	
4.					l.								,	1	уу	mm	dd
PANNELL, KEV	IN										67	7150	14		2017	01	31
Railroad/Company Na			de est			5 10 1	nit, 1	R/C	Divis	ion		RR/Co Re	epresentative	(Recei	pt Acknow	vledged)	1.
UNION PACIFIC		CO.						R	SYS	TEM		Name	(b) (6), (b) (7)(C)		
301 NE 2ND AV	Е							RR/Co Code	Subdi	ivision		Title	GENERA	L SU	— JPERINT	TENDE	ΙΤ
								UP	AYE	ER		Email	(b) (6)	, (b)	(7)(C)		
PORTLAND			OR	ç	7214								ALC: N	/65s		7 7	
												Signature	-		i e		
From: City WALLUL	A		(6)	Codes 239	93	Destinati	on City &	દે County	1-17			Codes	From Latitu	de			60 T
State WA			and j	53		City							From Longi	tude		141	
County WALLA V	WALL	A	you (1977)	C0′	71	County	<u> </u>			1000			To Latitude		11-7	Plan	7
Mile Post: From			То		Inspec	tion Poin	t WAL	LULA	F1 '.				To Longitud	le		1	
Activity Code:	2170)											,		7 11 1		11 W. C.
Units:	1						10										Title
Sub Units:	1					1											in the fact
Item Initials/Milepo	ost	Equip	ment/Track #	Type/Kind		Defec	t Subru	ıle		Speed	Class T	rain #/Site	S	NFR*	RCL**	# of	Activity
1					USC									N	N	0	Code
Description - [** C	omme	nt to R	ailroad/Com	nanv **1									a vi				
On 1-31-2017, I alc					Jeff Deak	ins con	ducted a	an accident	invest	igation	at Wallı	ula, WA inv	olving the	M SK	HK 30 c	onducto	fatality.
Seal Applied			Sea	al Removed				Hazard	Class			U	IN/NA ID		111		a program
			- 1									4 12					
20																	
Violation Recommend	led		Yes	✓ No		- 1	L	atitude:				Lor	ngitude:				
		is:	Required	Optio	onal	ailroad A	ction Co	de		Date(m	m/dd/yyy	уу):			Comm	ents on ba	ck?
Code: Units: Sub Units: Item Initials/Milepo 1 Description - [** C On 1-31-2017, I alc Seal Applied	1 1 cost	Equipr nt to R th FRA	ailroad/Com A Rail Safety Sea	pany **] Inspector al Removed	Jeff Deak	kins con	ducted a	an accident Hazard	invest	igation	at Wallı	ula, WA inv	volving the	N	N CHK 30 c	Occ *** 0	Code

DEPARTMENT OF TRANSPORTATION

INSPECTION REPORT

OMB Approval No.: 2130-0509 FEDERAL RAILROAD ADMINISTRATION (FRA) Date Inspector's Name Inspector's Signature Inspector's ID No Report No dd mm PANNELL, KEVIN 67150 15 2017 02 01 Railroad/Company Name & Address R/C Division RR/Co Representative (Receipt Acknowledged) UNION PACIFIC RR CO. R (b) (6), (b) (7)(C) **SYSTEM** Name 301 NE 2ND AVE RR/Co Title GENERAL SUPERINTENDENT Subdivision Code UP AYER Email (b) (6), (b) (7)(C) PORTLAND OR 97214 Signature Codes 2393 From: Destination City & County From Latitude WALLULA Codes City From Longitude 53 State WA County WALLA WALLA County To Latitude C071 Inspection Point FRA OFFICE Mile Post: From To Longitude То Activity 2170 Code: Units: 1 Sub Units: Initials/Milepost Equipment/Track # Type/Kind 49 CFR/ Subrule Class Train #/Site SNFR* RCL** # of Activity Item Occ *** Code N N Description - [** Comment to Railroad/Company **] On 2-1-2017, I along with FRA Rail Safety Inspector Jeff Deakins and FRA Rail Safety Specialist (OP) Ed McCullough conducted an accident investigation at Wallula, WA involving the M SKHK 30 conductor fatality. Seal Removed Hazard Class UN/NA ID Seal Applied Latitude: Longitude: Violation Recommended

Comments on back?

Yes

Written Notification to

FRA of Remedial Action is:

✓ No

Required / Optional

Railroad Action Code

Date(mm/dd/yyyy):

INSPECTION REPORT

Inspector's Name	Inspecto	or's Signature			Inspector's ID No	Report No		Date	
						2000	уу	mm	dd
PANNELL, KEVIN	100				67150	16	2017	02	02
Railroad/Company Name & Address			R/C	Division	RR/Co R	epresentative (Re	ceipt Acknow	vledged)	1-7
UNION PACIFIC RR CO.			R	SYSTEM	Name	(b) (6), (b) (7	7)(C)		
301 NE 2ND AVE			RR/Co Code	Subdivision	Title	GENERAL S	 Superint	ENDEN	T
PORTLAND	OR 97214		UP	AYER	Email	(b) (6), (b) (7)(C)		
TORTEAND	JK 9/214		1		Signature				
From: City WALLULA	Codes 2393	Destination City	& County	and the state	Codes	From Latitude		erriv.	n yai j
State WA	53	City				From Longitude	e		
County WALLA WALLA	C071	County		15		To Latitude	7 1		7
Mile Post: From To	Ins	pection Point WA	LLULA	N Tot good	nit ii	To Longitude		0.1.1.	F 9 1.
Activity Code: 2170		8					1 A		11
Units: 1									1 46 /
Sub Units: 1			13 133	N					Barrer I
Item Initials/Milepost Equipment/Track	c# Type/Kind 49 CF	R/ Defect Subr	rule	Speed Ci	lass Train #/Site	SNF	R* RCL**	# of Occ ***	Activity Code
1						N	N	0	
Description - [** Comment to Railroad/C	ompany **]			1	p' anon	on other lie it	al remove		ago racifi
On 2-2-2017, I along with FRA Rail Safe fatality.	ty Specialist (OP) E	d McCullough co	nducted an a	ccident investig	ation at Wallula,	WA involving	g the M SK	HK 30 co	nductor
Seal Applied	Seal Removed		Hazard	Class	t	JN/NA ID			
*			-						
Violation Recommended Yes	✓No	I	_atitude:		Lor	ngitude:			1207
Written Notification to FRA of Remedial Action is:	ired Optional	Railroad Action Co	ode	Date(mm/	dd/yyyy):	te de la constitución de la cons	Commo	ents on bac	:k?

INSPECTION REPORT

				2000	25500					(4)					Date	
Inspector's Name			In	spector's	Signatur	e				Insp	ector's ID No	Report 1	No -	уу	mm	dd
PANNELL, KEVIN	N									6'	7150	18		2017	02	03
Railroad/Company Nam	e & Address						R/C	Divis	ion		RR/Co R	epresentativ	e (Rece	ipt Acknov	vledged)	
UNION PACIFIC F	RR CO.						R	eve	TEM		Name	(b) (6), (h) (7)	(C)		
301 NE 2ND AVE							RR/Co	313	I LIVI		Ivallie	(5) (5), (,5,(1)	(0)		
							Code	Subdi	vision		Title	GENER	AL SU	JPERIN7	renden	1T
PORTLAND		OR	97	214			UP	AYE	ER		Email	(b) (6), ((b) (7)	(C)		
- E							7				Signature					
From: City WALLULA			Codes 2393		Destinat	ion City &	& County				Codes	From Latit	tude			
State WA			53		City							From Long	gitude			
County WALLA WA	ounty WALLA WALLA					C071 County						To Latitud	le			
Mile Post: From	Mile Post: From To					Inspection Point FRA OFFICE						To Longito	ude			
Activity Code: 2	2170											i.e.				
Units: 1	1							0								
Sub Units: 1	1										e					
Item Initials/Milepost	Equip	ment/Track #	Type/Kind	19 CFR/ USC	Defec	t Subru	ıle		Speed	Class 7	Train #/Site		SNFR'	* RCL**	# of Occ ***	Activity Code
1				030							9		N	N	0	Code
Description - [** Con	nment to R	ailroad/Com	npany **]													
On 2-3-2017, I contin			<i>3</i> 7	ving the	e M SK	HK 30 o	conductor fa	atality	FE-2017	7-04.						
Seal Applied Seal Removed							Hazard	Class			U	JN/NA ID				_
Violation Recommended	L	Yes	✓ No			L	atitude:				Lor	ngitude:				
Written Notification to FRA of Remedial Action is: Required 🔽 C				al	ailroad A	ction Co	de		Date(mn	n/dd/yy	уу):			Comm	ents on ba	ck?

INSPECTION REPORT

Inspector's	Name			In	spector's S	Signature				In	spector's ID No	Report N	10		Date	
					•	U					•	100000000000000000000000000000000000000		уу	mm	dd
PANNEI	LL, KEV	IN									67150	19		2017	02	13
Railroad/Co						46		R/C	Division		RR/Co R	epresentative	(Recei	ipt Acknov	vledged)	
	PACIFIC).					R	SYSTE	M	Name	(b) (6), (b) (7)	(C)		
301 NE 2	2ND AVI	B						RR/Co Code	Subdivisio	on	Title	GENER A	AL SU	JPERIN'I	renden	IT
PORTLA	AND		OR	9	7214			UP	AYER		Email	(b) (6), (l	o) (7)	(C)		
į.								Ĭ.			Signature					
From: City W	/ALLUL	4	10 _ 0 a l	Codes 2393	3 I	Destination	n City &	દે County		5 T 15	Codes	From Latitu	ıde		1) /
State W	'A		2 11 12 12 12 12 12 12 12 12 12 12 12 12	53		City						From Long	itude			
County W	inty WALLA WALLA C071					14 140					a 1 3	To Latitude	;		.75	,
Mile Post:	ile Post: From To					Inspection Point FRA OFFICES						To Longitu	de		Ji I	_17
Activity Code:		2170						1						arl .		
Units:		1														-
Sub Units:	1 4	1				,ti			pž.							16
Item Initi	ials/Milepo	st E	quipment/Track #	Type/Kind	49 CFR/ USC	Defect	Subru	ıle	Spe	ed Class	Train #/Site	S	NFR*	RCL**	# of Occ ***	Activity Code
1					osc								N	N	0	Code
Description	n - [** Co	omment	to Railroad/Com	npany **]			-									la a
	200		he accident inve		olving th	ne M SK	HK 30	conductor	fatality FI	E-2017-0	4.					
Seal Applied	d		Se	al Removed				Hazard	Class	95	Į.	JN/NA ID			E 1	: a T
Violation Re	ecommende	ed	Yes	No		i.	L	atitude:			Loi	ngitude:			o 1 - 7	a gr
	Viritten Notification to RRA of Remedial Action is: Required Optional				nal Ra	Railroad Action Code Date(n			Dat	e(mm/dd/	/yyyy): Comments on back			ck?		

INSPECTION REPORT

Inspector's Name	Inspect	tor's Signature			Inspect	tor's ID No	Report No		Date	
DIADERY VENUE								уу	mm	dd
PANNELL, KEVIN					671		20	2017	02	14
Railroad/Company Name & Address			R/C	Division		RR/Co Rej	presentative (R	eceipt Acknor	wledged)	
UNION PACIFIC RR CO.			R	SYSTEM		Name	(b) (6), (b) (7)(C)		
301 NE 2ND AVE			RR/Co	Subdivision		Title	GENERAL	CI IDED IVI	FENIDEN	IT
			Code		1				LENDER	(1
PORTLAND OR	97214	1	UP	AYER		Email	(b) (6), (b)	(7)(C)		
						Signature				
From: City WALLULA	Codes 2393	Destination Cit	y & County			Codes	From Latitude			
0	53	City					From Longitue	le.		
State WA	33	0.1.5								
County WALLA WALLA	C071	County					To Latitude			
Mile Post: From To	In	Inspection Point FRA OFFICES					To Longitude			
Activity Code: 2170										
Units: 1										
Sub Units: 1										
Item Initials/Milepost Equipment/Track #	Type/Kind 49 C	FR/ Defect Su	brule	Speed C	lass Tra	nin #/Site	SNI	R* RCL**	# of	Activity
1	USC			1 1			N	N	Occ ***	Code
1							IN	IN	0	
Description - [** Comment to Railroad/Com	pany **]							•		
On 2-14-2017, I continued the accident inves	stigation involvi	ng the M SKHK	30 conductor	fatality FE-201	7-04.					
Seal Applied Sea		Hazard	Class		Uì	N/NA ID				
Violation Recommended Yes	✓ No		Latitude:			Long	gitude:			
Written Notification to		Railroad Action	Code		mm/dd/yyyy): Comments on back?			1,0		
FRA of Remedial Action is: Required	✓ Optional			Date(min/	dd/yyyy	, L			ents on ba	UN I

INSPECTION REPORT

Inspector's Name	100 T	Inspect	or's Signature			Inspector's ID No	Report No	Date		
								уу	mm	dd
PANNELL, KEVIN	1	1			40	67150	21	2017	02	15
Railroad/Company Name & Addre	SS			R/C	Division	RR/Co	Representative (R	eceipt Acknow	ledged)	
UNION PACIFIC RR CO.				R	SYSTEM	Name	(b) (6), (b) (7)(C)		
301 NE 2ND AVE				RR/Co Code	Subdivision	Title	GENERAL	- 41	ENDEN	IT
PORTLAND	OR	97214		UP	AYER	Email	(b) (6), (b)	(7)(C)		
					3	Signatur		*		
From: City WALLULA Codes 2393 Destination City						Codes	From Latitude		- P	
State WA		53	City		i.		From Longitud	le		
County WALLA WALLA	21 gross	C071	County			1/1=	To Latitude		il.	1
Mile Post: From	То	In	spection Point FRA	OFFICES	11 11 11		To Longitude			- 74
Activity Code: 2170										
Units: 1										
Sub Units: 1		TE		1						
Item Initials/Milepost Equ	pment/Track #	Type/Kind 49 C		ule	Speed Cl	ass Train #/Site	SNF	R* RCL**	# of Occ ***	Activity Code
1					- N	i i	N	N	0	Codo
Description - [** Comment to	Railroad/Com	pany **]						7.		D 25
On 2-15-2017, I continued the	accident inves	stigation involvi	ng the M SKHK 30	onductor	fatality FE-2017	7-04.				
Seal Applied	a 11	Hazard (Class		UN/NA ID			0.2.2.2		
Violation Recommended	Yes	✓ No	I	atitude:		Lo	ongitude:			T N. ES.
Written Notification to FRA of Remedial Action is: Railroad Action Code Date(mm/dd/yyyy): Comments of Remedial Action is:						ents on ba	ck?			

INSPECTION REPORT

Inspector's Name	Inspector	's Signature			Inspe	ctor's ID No	Report No			
							, troport tro	уу	mm	dd
PANNELL, KEVIN					67	150	22	2017	02	16
Railroad/Company Name & Address	-		R/C	Division		RR/Co Rej	presentative (Re	ceipt Acknow	vledged)	
UNION PACIFIC RR CO.			R	SYSTEM		Name	(b) (6), (b) (7)(C)		
301 NE 2ND AVE			RR/Co Code	Subdivision						ΙΤ
PORTLAND OR	97214		UP	AYER		Email	(b) (6), (b) (7)(C)		
						Signature				
From: City WALLULA	Codes 2393	Destination City	& County			Codes	From Latitude			
State WA	53	City					From Longitud	e		
County WALLA WALLA	C071	County	1	9			To Latitude			
Mile Post: From To	Mile Post: From To Inspection Point FRA					OFFICES To Longitude				
Activity 217O										
Units: 1								- 1		
Sub Units: 1										
Item Initials/Milepost Equipment/Track #	Type/Kind 49 CFI	R/ Defect Subr	ule	Speed	Class T	rain #/Site	SNF	R* RCL**	# of Occ ***	Activity Code
1				13			N	N	0	
Description - [** Comment to Railroad/Con	npany **]									
On 2-16-2017, I continued the accident inve		g the M SKHK 30	0 conductor	fatality FE-20	17-04.					
Seal Applied Sea	al Removed		Hazard	Class		UI	N/NA ID			
Violation Recommended Yes	✓ No	I	_atitude:			Long	gitude:			
Written Notification to FRA of Remedial Action is:	Railroad Action Co	ode	Date(mr	n/dd/yyy	yy):		Comm	ents on ba	ck?	

INSPECTION REPORT

Inspector's Name	Inspector'	's Signature			Inspect	tor's ID No	Report No		Date	
								уу	mm	dd
PANNELL, KEVIN					671	50	23	2017	02	21
Railroad/Company Name & Address			R/C	Division		RR/Co Re	presentative (Re	ceipt Acknow	ledged)	. 1
UNION PACIFIC RR CO.			R	SYSTEM		Name	(b) (6), (b) ([*]	7)(C)		
301 NE 2ND AVE			RR/Co							
a for sales for the effective of the B			Code	Subdivision	.	Title	GENERAL:	SUPERINT	ENDEN	C)
PORTLAND OR	97214		UP	AYER		Email	(b) (6), (b) (7)(C)		
			v v			Signature				
- S N N N	1	- 1	1/)•			
From: City HERMISTON	Codes 0990	Destination City &	& County			Codes	From Latitude			
State OR	City					From Longitud	•	10	1 11 11	
County UMATILLA	County	*	2007/10-40			To Latitude			E 1	
Mile Post: From To	Inspe	ection Point UP F	IINKLE OF	FICE	erit _		To Longitude		7.	9
Activity Code: 2170					f				2	
Units: 1										1,00
Sub Units: 1								18		
Item Initials/Milepost Equipment/Track #	Type/Kind 49 CFR	V Defect Subr	ule	Speed C	Class Tra	nin #/Site	SNF	R* RCL**		Activity Code
1	USC						N	N	0	oue
Description - [** Comment to Railroad/Comp	 									
On 2-21-2017, I continued the accident invest		the M SKHK 30) conductor	fatality FE-201	7-04. I	interviewe	d (b) (6), (b) (7)(C)	Risk Manag	er: (b) (6). (b) (7)(C)
, Director of Terminal Operations and	o) (6), (b) (7)(C	, Manager of R	oad Operation	ons.			/		,	
Seal Applied Seal	l Removed		Hazard (Class		U	N/NA ID		1	
Violation Recommended Yes	✓No	L	atitude:			Lon	gitude:			
Written Notification to FRA of Remedial Action is: Required	✓ Optional	Railroad Action Co	ode	Date(mm	/dd/yyyy	·):	19	Comm	ents on back	?

DEPARTMENT OF TRANSPORTATION

INSPECTION REPORT

OMB Approval No.: 2130-0509 FEDERAL RAILROAD ADMINISTRATION (FRA) Inspector's Name Inspector's Signature Inspector's ID No Report No dd mm PANNELL, KEVIN 67150 31 2017 03 01 Railroad/Company Name & Address RR/Co Representative (Receipt Acknowledged) R/C Division UNION PACIFIC RR CO. R SYSTEM (b) (6), (b) (7)(C) Name 301 NE 2ND AVE RR/Co Title GENERAL SUPERINTENDENT Subdivision Code UP **AYER** Email (b) (6), (b) (7)(C) PORTLAND OR 97214 Signature From: Codes 2393 Destination City & County From Latitude WALLULA Codes City City From Longitude 53 State WA County WALLA WALLA County To Latitude C071 Inspection Point FRA OFFICES To Longitude Mile Post: From To Activity 2170 Code: Units: Sub Units: Initials/Milepost Equipment/Track # Type/Kind 49 CFR/ Defect Subrule Speed Class Train #/Site RCL** # of Activity Item Occ *** N Description - [** Comment to Railroad/Company **] On 3-012017, I continued the accident investigation involving the M SKHK 30 conductor fatality FE-2017-04. UN/NA ID Seal Applied Seal Removed Hazard Class Violation Recommended Latitude: Longitude: Yes **✓** No

Comments on back?

Railroad Action Code

Required Optional

Date(mm/dd/yyyy):

Written Notification to

FRA of Remedial Action is:

DEPARTMENT OF TRANSPORTATION

INSPECTION REPORT

OMB Approval No.: 2130-0509 FEDERAL RAILROAD ADMINISTRATION (FRA) Date Inspector's Name Inspector's Signature Inspector's ID No Report No mm dd PANNELL, KEVIN 67150 33 2017 03 Railroad/Company Name & Address R/C Division RR/Co Representative (Receipt Acknowledged) UNION PACIFIC RR CO. (b) (6), (b) (7)(C) R **SYSTEM** Name UPRR RR/Co Title Subdivision 77870 Hermiston-Hinkle RD Code AYER UP Email Hermiston OR 97838 Signature From: Codes 2393 Destination City & County From Latitude WALLULA Codes City From Longitude State WA 53 County WALLA WALLA County To Latitude C071 Inspection Point FRA OFFICE To Longitude Mile Post: From To Activity 2170 Code: Units: 1 Sub Units: Initials/Milepost Type/Kind 49 CFR/ Equipment/Track # Defect Subrule Class Train #/Site SNFR* RCL** Item # of Activity Occ ** Code 0 N N Description - [** Comment to Railroad/Company **] On 3-03-2017, I continued the accident investigation involving the M SKHK 30 conductor fatality FE-2017-04. Seal Applied UN/NA ID Seal Removed Hazard Class

Latitude:

Railroad Action Code

	Page	1	of	1
RCL-Remote Control Locomotive	*# of Occ -N	lumber	of Occu	rrences

Comments on back?

Longitude:

Date(mm/dd/yyyy):

Yes

✓ No

Required / Optional

Violation Recommended

Written Notification to

FRA of Remedial Action is:

INSPECTION REPORT OMB Approval No.: 2130-0509

Inspector's Name			Ins	enector's	Signature					Insn	ector's ID No	Repor	+ No		Date	
Inspector's Ivanie			111.	speciol 3	oignature					linsp	ector 3 ID 140	Repor	THO I	уу	mm	dd
PANNELL, KEV	VIN									6	7150	38		2017	03	10
Railroad/Company N	lame & Addres	s					R/C	Divis	ion		RR/Co F	Representat	ive (Rec	eipt Acknov	vledged)	
UNION PACIFI	C RR CO.						R	SYS	TEM		Name		(b) (6), (b) (7)(C)	
301 NE 2ND AV	Æ					}	RR/Co	1010	LLIVI	-						
							Code	Subdi	vision		Title					
PORTLAND		OR	97	214			UP	AYE	ER		Email					
											Signature		2000		E CONTRACTOR DE	
											0	_				
From: City WALLUI	λA		Codes 2393		Destination	on City &	County				Codes	From La	titude			
State WA			53		City							From Lo	ngitude			
County WALLA	WALLA		C071	l.	County							To Latitu	ude			
Mile Post: From To Inspection Point FRA					FRA	OFFICES					To Long	itude			2	
Activity Code:	2170															
Units:	1															
Sub Units:	1				:											
Item Initials/Milep	ost Equir	pment/Track #	Type/Kind 4	49 CFR/	Defect	Subru	ıle		Speed	Class	Train #/Site		SNFR	* RCL**	# of	Activity
indias imep	Equip	pinono Traok ii		USC	D 01000	Juora			opera						Occ ***	Code
1													N	N	0	
Description - [** C	Comment to I	Railroad/Com	npany **]		,									100		
On 3-10-2017, I co fatality FE-2017-0		accident inve	stigation inve	olving t	he M Sk	KHK 30	which occ	curred o	on Janua	ıry 31,	2017 result	ting in a r	ailroad	employee	(conduc	tor)
Seal Applied		Se	al Removed				Hazard	l Class			1	UN/NA ID	j.			
		000000														
Violation Recommen	ded	Yes	✓ No			La	atitude:				Lo	ngitude;				
Written Notification (Required	l V Option	nal R	ailroad A	ction Co	de 📗	\Box	Date(mi	n/dd/yy	/yy):			Comm	ents on ba	ck?
1 101 of remedial	TOTION 15.										0					

INSPECTION REPORT

Inspector's Name	Inspector's	s Signature		¥	Inspector's ID No	Report No		Date				
	(157)	-					уу.	mm	dd			
PANNELL, KEVIN	1.0			¥	67150	39	2017	03	13			
Railroad/Company Name & Address			R/C	Division	RR/Co	Representative (Re	eceipt Acknow	vledged)				
UNION PACIFIC RR CO.			R	SYSTEM	Name	(b) (6), (b) (7)(C)						
301 NE 2ND AVE			RR/Co Code	Subdivision	Title	GENERAL	SUPERIN	TENDE	VΤ			
PORTLAND OR	97214		UP	AYER	Email	(b) (6), (b) (7)(C)					
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				96	Signatur							
From: City WALLULA Codes	2393	Destination City	& County	0 0001	Codes	From Latitude		3				
State WA	53	City				From Longitud	е	7.4	7			
County WALLA WALLA	C071	County			7	To Latitude			ual, s			
Mile Post: From To	Inspe	ection Point FRA	OFFICES	1		To Longitude	7					
Activity Code: 217O												
Units: 1				a								
Sub Units: 1		1	b						Taylor (C			
Item Initials/Milepost Equipment/Track # Type/	Kind 49 CFR	/ Defect Subr	ule	Speed Cl	ass Train #/Site	SNF	R* RCL**	# of	Activity			
1	USC				-	N	N	Occ ***	Code			
Description - [** Comment to Railroad/Company *	*1								-			
On 3-13-2017, I continued the accident investigation	-	the M SKHK 30) which occi	irred on Januars	, 31 2017 resul	ting in a railroa	d employee	(conduc	tor)			
fatality FE-2017-04.	ii iii voi viilg	the W bitting 50	, winen occ	area on vanaarj	51, 2017 10501	ing in a ramou	a omprojec	(conduc				
Seal Applied Seal Remo	ved		Hazard (Class	4.	UN/NA ID						
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					1 1 as 1			.741	100			
Violation Recommended Yes	No	L	atitude:		L	ongitude:						
Written Notification to FRA of Remedial Action is: Required	Optional	Railroad Action Co	ode	Date(mm/	dd/yyyy):	Q.	Comm	ents on ba	ck?			

INSPECTION REPORT

Inene	ctor's Name			1,	snector's	s Signati	re					Insne	ector's ID No	Report No	T		Date	
Inspe	etor s rvanic			"	ispector.	з отдиии						Шэрс	cotor 3 ID 110	Report No		уу	mm	dd
PAN	NELL, KEV	'IN										67	150	40		2017	03	14
Railro	oad/Company N	ame & Add	ress					R/C		Division		•	RR/Co Re	presentative (F	lecei	pt Acknow	ledged)	
UNI	ON PACIFIO	C RR CO.						R		SYSTE	M		Name	(b) (6), (b)	(7)(C)		
301	NE 2ND AV	E						RR/Co	,	0.11:			Title	GENERAL SUPERINTENDENT				IT
								Code		Subdivisi			Title	GENERAL	. 50	PERINI	ENDER	N I
POR	TLAND		OR	. 9	7214			UP		SYSTE	M		Email	(b) (6), (b)	(7)(C)		
													Signature					
From																		
City	WALLUL	A		Codes 239	3	Destina	tion City	& County	У				Codes	From Latitude				
State WA 53 City												From Longitu	de					
County WALLA WALLA C071 County						,							To Latitude					
Mile	Post: From		То		Inspe	ction Po	int FRA	OFFIC	CES					To Longitude				
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Code:		22310	18									_			_			
Units:		1																
Sub U	Jnits:	2																
Item	Initials/Milepo	ost Eq	uipment/Track #	Type/Kind	49 CFR	/ Defe	ct Subr	ule		Spe	ed C	lass T	rain #/Site	SN	FR*	RCL**	# of	Activity
١					USC					1.							Occ ***	Code
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Descr	iption																	
			G OF ACCIDE															
			ELY FILE A CO PART 225.21									, NAF	RRATIVES	WHERE RE	QU	IRED) F	RA FOR	M
			ng the FRA for									ncies	found. On the	he FRA form	1 F6	180.98 b	lock 18,	Job Title
states	"Brakeman T	hru", it sh	ould read "Cor	ductor Thru	Freigh													
		is not in co	ompliance with		t 225.								1					
Seal A	pplied		Se	al Removed				Ha	zard C	Class			U	N/NA ID				
Violati	on Recommend	led	Yes	✓ No			I	atitude:					Long	gitude:				
	n Notification to		Required	I V Option	F F	Railroad	Action Co	ode	Т	Dat Dat	te(mm/	/dd/vvv	/v):		7	Comme	ents on ba	ck?
FRA	of Remedial A	Action is:	Kequired	i V Optio	nat				1		(,,,,,					011 011	

DEPARTMENT OF TRANSPORTATION

INSPECTION REPORT

OMB Approval No.: 2130-0509 FEDERAL RAILROAD ADMINISTRATION (FRA) Date Inspector's Name Inspector's Signature Inspector's ID No Report No dd mm PANNELL, KEVIN 67150 41 2017 03 15 Railroad/Company Name & Address Division UNION PACIFIC RR CO. (b) (6), (b) (7)(C) R **SYSTEM** UPRR RR/Co Subdivision Title Code 77870 Hermiston-Hinkle RD UP LA GRANDE Email Hermiston 97838 OR Signature From: Codes 0990 From Latitude Destination City & County HERMISTON Codes City State OR 41 From Longitude County UMATILLA C059 County To Latitude Inspection Point HINKLE OFFICES To Longitude Mile Post: From To Activity 225R 225P Units: 1 1 Sub Units: 0 Defect Class Train #/Site Initials/Milepost Type/Kind 49 CFR/ Equipment/Track # Subrule SNFR* RCL** Item Speed # of Activity USC Occ *** Code 0 N N Description - [** Comment to Railroad/Company **] On 3-15-2017, I continued the investigation FE-2017-04 of the fatality which occurred on January 31, 2017 at Wallula, WA. I observed the FRA Injury and Occupational Illnesses posted in the Hinkle office was last updated on 3-1-2017. Hazard Class Seal Applied Seal Removed UN/NA ID

Latitude:

Railroad Action Code

Comments on back?

Yes

✓ No

Required Optional

Violation Recommended

Written Notification to

FRA of Remedial Action is:

Longitude:

Date(mm/dd/yyyy):

INSPECTION REPORT

Inspector's Name			Ins	Inspector's Signature				In			ctor's ID No	Report No			Date	
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PANNELL, KEV	IN									67	150	42		017	03	15
Railroad/Company Na							R/C	Di	vision		RR/Co R	epresentative (Receipt .	Acknowl	edged)	
UNION PACIFIC	C RR CO.						R	S	YSTEM		Name	(b) (6),	(b) (7)	(C)		
UPRR							RR/Co	ę.,	bdivision		Title					
77870 Hermiston	-Hinkle RD						Code	500			Title					
Hermiston OR 97838						UP	A	YER		Email						
											Signature					
From: City WALLUL	Codes 2393		Destina	tion City a	& County				Codes	From Latitud	e					
State WA	53		City							From Longit	ıde			1		
County WALLA V	WALLA	70	C071	l _o	County				i i			To Latitude				
Mile Post: From		То		Inspec	ction Poi	_{nt} WAI	LLULA	ARD	OFFICE			To Longitude				
Activity Code:	2170					2.5										
Units:	1											F				
Sub Units:	3		¥-	1								-				
Item Initials/Milepo	ost Equip	ment/Track #	Type/Kind	19 CFR/	Defe	ct Subr	ule		Speed C	lass T	rain #/Site	SN	FR* F		# of	Activity
				USC								,	, ,	- 1		Code
1												1	1	N	0	
Description - [** C	omment to R	ailroad/Com	pany **]			•							10			
On 03-15-2017, I c				to FR	A Acci	dent Inve	estigation	FE-20	017-04 at U	P Yard	d Office in	Wallula, Wa	shingto	n . Rep	orts of I	nterview
will be written and	submitted wi															
Seal Applied		Se	al Removed				Haza	rd Clas	S		Ι'	JN/NA ID				
11																
Violation Recommended Yes VNo						L	atitude:				Loi	ngitude:				
Written Notification to			بنا	Pailroad Action Code				7				_				
FRA of Remedial Action is: Required				al			Ш		Date(mm	/dd/yyy	/y):			Comme	its on ba	ck?

INSPECTION REPORT

Inspector's Name	Inspector	r's Signature		24 h	Inspector's ID No	Report No		Date		
	100				T and advantage to		уу	mm	dd	
PANNELL, KEYIN					67150	50	2017	03	.31	
Railroad/Company Name & Address	6 T a 10	y a sa fa sa	R/C	Division	RR/Co Re	epresentative (Receipt Ackno	wledged)		
UNION PACIFIC RR CO.			R	SYSTEM	Name	ne (b) (6), (b) (7)(C)				
301 NE 2ND AVE			RR/Co Code	Subdivision	Title	GENERAI	L SUPERIN	TENDE	NT	
PORTLAND OF	97214		UP	SYSTEM	Email	(b) (6), (b)	(7)(C)			
				- South	Signature		-			
From: City KENNEWICK	& County), u.s. (16)	Codes	From Latitud	e					
State WA	53	City		Agenta La Clas		From Longitu	ude		1.3	
County BENTON	C005	County	E05 (14)	Resparcance	ALC: MAG	To Latitude				
Mile Post: From To Inspection Point FRA OFFICES										
Activity Code: 217O			it or be	91,000		1124				
Units: 1										
Sub Units: 1	-									
Item Initials/Milepost Equipment/Track #	Type/Kind 49 CFI	R/ Defect Subr	ule	Speed Cl	ass Train #/Site	SN	IFR* RCL**	# of Occ ***	Activity Code	
1						1	N N	0	Code	
Description - [** Comment to Railroad/Con	npany **]									
On 03-31-2017, I continued the accident in		ng the M SKHK 3	30 conducto	r fatality FE-201	7-04.					
Seal Applied S	eal Removed		Hazard	Class	U	N/NA ID				
Violation Recommended Yes	✓No	L	atitude:	6.5	Lon	igitude:				
Written Notification to FRA of Remedial Action is: Require	d 🗸 Optional	Railroad Action Co	ode	Date(mm/e	dd/yyyy):		Comn	nents on ba	ick?	



RMCC Incident Management System

Incident Report

Incident Number

: 2017-01-31-062DMC

Date Time Occurred

: 01/31/17 07:03 A

Incident Name

: Company Personal Injury, WALLU LA, WA **Date Time Reported**

: 01/31/17 07:03 A

Created By : (b) (6), (b) (7)(C)

Date Time Resolved

: 01/31/17 05:54 P

Incident Summary

Incident displayed / included on the RMCC Morning Report YES

Incident is Police Sensitive and should have limited visibility NO

Are local public safety agencies (police, fire, ambulance) needed to respond? YES

Is an ambulance needed? YES

Incident meets Federal Regulatory Agency notification criteria. YES

Does the incident involve a UP employee who sustained catastrophic or fatal injury? (amputation, spinal cord injuries, very serious burns, serious head injuries/brain damage or other life threatening injury) YES

Incident meets State Regulatory Agency notification criteria. YES



RMCC Incident Management System

Incident Report

Incident Number

: 2017-01-31-062DMC

Date Time Occurred

: 01/31/17 07:03 A

Incident Name

: Company Personal Injury, WALLU

Date Time Reported

: 01/31/17 07:03 A

LA, WA

41.3

(b) (6), (b) (7)(C)

Date Time Resolved

: 01/31/17 05:54 P

Incident Narrative :

Created By

(b) (6), (b) (7)(C), Train Dispatcher, stated the crew of train MSKHK 30, lead locomotive CP 9769, reported an injured party lying between the rails on an outbound track of the yard in Wallula, WA. is stated the injured party was believed to be the conductor, as the engineer had lost radio contact with the conductor, and a crew van driver located the injured party. (D) (B) (D) (C) (C) stated the injured party had a possible leg amputation. Dispatcher 49, Walla Walla 911, was notified and dispatched emergency responders to a location located approximately 1/2 mile north of Highway 12 and Northshore Road, in Wallula, WA. (D) (6) (D) (7)(C) Special Agent, was notified and was en route.

UPDATE: At 07:25 AM, (b) (6), (b) (7)(C), Train Dispatcher, advised the conductor might be J.P. Schneider, however could not confirm. (b) (6), (b) (7)(C), Risk Management Specialist, was notified and was en route.

UPDATE: At 07:30 AM, (b) (6), (b) (7)(C) Train Dispatcher, stated employees determined the incident was located underneath an Amber Alert highway billboard sign along US Highway 12. Dispatcher Adam, Walla Walla County 911, was updated.

UPDATE: At 07:43 AM, (b) (6), (b) (7)(C) Train Dispatcher, advised emergency responders arrived on the scene.

UPDATE: At 07:47 AM, Dispatcher 49, Walla Walla County 911, advised the subject sustained fatal injuries and advised no identification information was available. (b) (6), (b) (7)(C) Special Agent, was updated and advised he was en route with a two hour estimated t me of arrival, due to icy conditions. State and federal notifications were issued within time targets.

UPDATE: At 07:50 AM, (b) (6), (b) (7)(C) Train Dispatcher, stated (b) (6), (b) (7)(C) General Superintendent of Transportation Services, and (b) (6), (b) (7)(C) Manager of Road Operations, were en route. Manager of Toxicological Testing, was notified.

UPDATE: At 07:53 AM, Amy, Walla Walla Sheriff's Department, requested an estimated time of arrival of UPRR Police. (b) (6) (b) (7)(c), Special Agent, was contacted and advised his estimated time of arrival was at least two hours, due to distance and icy weather conditions. Amy was updated and advised officers arrived at 07:47 AM and confirmed fatal injuries. (b) (6) (b) (7)(c) was updated and requested identification when available.

UPDATE: At 08:05 AM, (b) (6), (b) (7)(C) Director of Claims, advised (b) (6), (b) (7)(C) Director of Claims, was en route.

UPDATE: At 09:18 AM, (b) (6.6) (b) (7) (c) Risk Management Specialist, reported he was still en route due to icy road conditions, however advised the conductor was believed to be John P. Schneider, and advised the description of his injuries was consistent to having been dragged under rolling equipment.

UPDATE: At 09:56 AM, (b) (6), (b) (7)(C) Special Agent, advised he had arrived on scene.

UPDATE: At 10:35 AM, (b) (6), (c) (7) (c) Special Agent, requested and received updated incident information and advised the coroner had removed the body. (b) (6), (b) (7) (c) further advised Wallula County Sheriff's Department Public Information Officer was in contact with (b) (6), (b) (7) (c) Director Public Affairs.

UPDATE: At 01:39 PM, (b) (6), (b) (7)(C) Special Agent, advised (b) (6), (b) (7)(C) Director Risk Management, and himself requested bio hazard remediation for the incident. (b) (6), (b) (7)(C) Hazardous Materials Manager, was notified.

UPDATE: At 03:19 PM, (b) (6), (b) (7)(C) Manager of Hazardous Materials, advised NRC Environmental, Contractor, was on site for bio-remediation.

UPDATE: At 05:55 PM, of the control of the control

UPDATE: At 08:44 PM, (b) (6), (b) (7)(C) Manager of Hazardous Materials, advised bio-remediation was completed at 06:00 PM. U6:00 PM.



RMCC Incident Management System

Incident Report

Incident Number

: 2017-01-31-062DMC

Date Time Occurred

: 01/31/17 07:03 A

Incident Name

Company Personal Injury, WALLU

Date Time Reported

: 01/31/17 07:03 A

Created By

LA, WA (b) (6), (b) (7)(C)

Date Time Resolved

: 01/31/17 05:54 P

(b) (6), (b) (7)(C) 02/01/17 07:52 AM (Central Time)

Involved People Details

First Name

John

Last Name

Schneider

Title

Involvement

Employee w/

Street Address

City

Conductor

Type State Injury

Employee ID

: 0412138

Zip

Phone #

Alt. Phone #

Email

Department

TRNSP WESTERN RGN

MOU

Supt-Trn Eng &

Supervisor

(b) (6), (b) (7)(C)

Supervisor Title :

Mgr Road Ops

Supervisor Employee ID

Email

Supervisor

(b) (6), (b) (7)(C)

First Name

Involvement Type

Knowledgeable

Last Name Street Address

Title

Email

: Mgr Road Ops

City

State

Person WASHINGTON

Employee ID

) (6), (b) (7)(C

Zip

99212 (b) (6), (b) (7)(C)

Spokane

Phone #

(b) (6), (b) (7)(C)

Alt. Phone #

MOU

Department

(b) (6), (b) (7)(C)

TRNSP WESTERN RGN

Supervisor Title :

Supt-Oper Practices

Supervisor Name Supervisor Employee ID

Supervisor Email

Dir Term Ops (b) (6), (b) (7)(C)

First Name

Last Name

(b) (6), (b) (7)

Title

Gen Supt Trans

Involvement

Type

State

Knowledgeable

Street Address **Employee ID**

City

Phone #

Alt. Phone # (b) (6), (b) (7)(C)

Zip **Email**

Department

TRNSP WESTERN RGN

MOU

(b) (6), (b) (7)(C) Supt-Supt & Staff

RVP

Svcs

Supervisor Supervisor

Employee ID

(b) (6), (b) (7)(C)

Supervisor Title

Supervisor Email

(b) (6), (b) (7)(C)