

INSTRUCTIONS

Multiply the annual and relief salaries by the appropriate fringe benefit ratio to determine the total annual fringe benefits.

Example:
43J Route
Regular — Step 12
Sub — Step 7

Regular Salary:

\$29,155.00 Annual Salary
x16.6794% (Line 42 — rural carrier full time fringe benefit ratio to gross pay
from National Payroll Hours Summary.)
\$ 4,862.88 Regular Carrier Fringe Benefits

Relief Salary:

\$ 99.96 Daily Rate
x 26 Days (J Relief)
\$ 2,598.96 Annual Relief Salary
x 7.0739% (Line 42 — rural carrier part time fringe benefit ratio to gross pay
from National Payroll Hours Summary.)
\$ 183.85 Relief Carrier Fringe Benefits

Summary:

\$ 4,862.88 Regular Carrier Fringe
+ 183.85 Relief Carrier Fringe
\$ 5,046.73 Total Fringe Benefits

Enter \$5,047 in Block 20, *Fringe Bene.*

PROPOSED CHANGES

(1) *Check Appropriate Box(es)* — Place a check mark in the box to the left of each action involved.

ROUTE DATA

- (2) *Office* — Enter the name(s) of the post office(s), state, and ZIP + 4 Code(s).
- (3) *Re. No.* — Enter the route number(s).
- (4) *Standard Time* — Enter the present standard hours from Line 1 of the Interim Rural Route Evaluation Worksheet (Exhibit 824.31, Handbook M-38).
- (5) *Actual Time* — Enter the actual time.
- (6) *Proposed Standard Time* — Enter the proposed standard hours from Line 5 of the Interim Rural Route Evaluation Worksheet.
- (7) *Route Evaluation and Classification* — *Hours & H, J, K, A, M and L or Non-L.*
(7a) *Present* — Enter the present route evaluation and classification (Example: 43J.)
(7b) *Proposed* — Enter the proposed route evaluation and classification.

(8) *Length*

- (8a) *Present* — Enter the present length from Line 2 of the Interim Rural Route Evaluation Worksheet.
- (8b) *Proposed* — Enter the proposed length from Line 2 of the Interim Rural Route Evaluation Worksheet.

(9) *Boxes*

- (9a) *Present* — Enter the present number of boxes from Line 3 of the Interim Rural Route Evaluation Worksheet.
- (9b) *Proposed* — Enter the proposed number of boxes from Line 3 of the Interim Rural Route Evaluation Worksheet.

(10) *Stops*

- (10a) *Present* — Enter the present number of stops.
- (10b) *Proposed* — Enter the proposed number of stops.

COST DATA

Present

- (11) *Office* — Enter the name(s) of the post office(s).
- (12) *Re. No.* — Enter the route number.
- (13) *Reg. Step* — Enter the step of the regular carrier if the route is encumbered. **Enter Step 7 if vacant.**
- (14) *Reg. Salary* — Enter the appropriate salary of the regular carrier.
- (15) *Sub. Step* — Enter the step of the substitute carrier.
- (16) *Annual Relief Salary (J/K)* — Refer to the present route classification to determine if the route is J or K. If the route is presently J or K, refer to current schedules of compensation and determine the appropriate daily rate of pay for the substitute. Multiply the daily rate by 26 days for J routes or 52 days for K routes and enter the result in this block.
- (17) *Annual EMA* — Determine the appropriate daily EMA rate. Multiply by 302 delivery days and enter the result in this block.
- (18) *Auxiliary Assistance* — Determine the weekly hours of assistance authorized. Multiply this by 52 weeks. Multiply the result by the current hourly rate paid the person performing the assistance. Enter that result in this block.
- (19) *Locked Pouch Allow.* — Enter the amount of locked pouch allowance paid as shown on the latest Form 4241-A, *Rural Route Evaluation*.
- (20) *Fringe Benefit* — Enter the total dollar amount of fringe benefits paid for both the regular and substitute serving the route. The ratio (percentage) of Fringe Benefits to Gross Pay is found in the latest National Payroll Hours Summary Report which is available at the Regional level. Select the appropriate rate (Line 42) according to the type of employee (full time substitute, or associate rural carrier).

Proposed

- (21) *Total Cost* — Enter the total of regular salary, relief salary, EMA, auxiliary assistance, locked pouch allowance, and fringe benefits.
- (22) *Reg. Step* — Enter the step of the regular carrier if route is encumbered. **Enter Step 7 if vacant.**
- (23) *Reg. Salary* — Enter the appropriate proposed salary of the regular carrier.
- (24) *Sub. Step* — Enter the step of the substitute carrier.
- (25) *Annual Relief Salary (J/K)* — Refer to Block 7a, *Proposed Route Evaluation and Classification*, to determine if the proposed route will be either J or K. If the proposed route will be J or K, refer to the current schedule of compensation to determine the appropriate daily rate of pay for the substitute. Multiply the daily rate by 26 days for J routes or 52 days for K routes and enter the results in this block.
- (26) *Annual EMA* — Determine the appropriate daily EMA rate. Multiply by 302 delivery days and enter the result in this block.
- (27) *Saved Salary* — Enter the amount of saved salary, if any.
- (28) *Locked Pouch Allow.* — Enter the amount of locked pouch allowance, if applicable.
- (29) *Fringe Benefit* — Determine fringe benefits as described above for Block 20.
- (30) *Total Cost* — Enter the total proposed costs.

BOTTOM OF FORM

- (31) *Remarks* — Include any additional information remarks here.
- (32) *Action* — To be completed by the MSC.
- (33) *Net Cost* — Enter the dollar amount of net cost.
- (34) *Net Savings* — Enter the dollar amount of net savings.
- (35) *Proposed Effective Date* — Enter the date these changes should take effect.
- (36) *Signature* — Self-explanatory.
- (37) *Title* — Self-explanatory.
- (38) *Date* — Enter the date that this form is completed.