



June 26, 2008

Myra Warren
Director, Life Insurance
National Association of Letter
Carriers, AFL-CIO
100 Indiana Avenue NW
Washington, DC 20001-2144

Dear Myra:

This is in further reference to our June 20 meeting concerning your May 9 correspondence regarding the eRMS/IVR Fulfillment Center package related to requests for FMLA protection.

The cover letter has been amended to comport with current ELM provisions concerning submission of documentation in support of requests for FMLA protection. An employee may send or present these materials to the appropriate FMLA Coordinator, or give the materials to the employee's supervisor who will forward the materials to the appropriate FMLA Coordinator.

Sincerely,


John Cavallo
Labor Relations Specialist
Labor Relations Policy and Programs

Enclosure

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U.S. Letter Carriers' MBA



[DATE]

[FIRST NAME] [MIDDLE INITIAL] [LAST NAME]
 [EMPLOYEE ADDRESS]
 [EMPLOYEE ADDRESS 2]
 [EMPLOYEE ADDRESS 3]
 [CITY STATE ZIP]

RE: Request for Leave
 NEW FMLA Case # [FMLA CASE ID]

Enclosed is a copy of Publication 71, "Notice for Employees Requesting Leave for Conditions Covered by the Family and Medical Leave Act" and a copy of Department of Labor Form WH-380, Certification of Health Care Provider, which may be used by a health care provider to document a serious health condition.

You are being sent this packet because you requested leave, and:

- you indicated your absence was for an FMLA covered condition, or
- information you provided indicates your absence may be for an FMLA covered condition, or for a condition requiring specific documentation and return to work procedures; or
- an FMLA coordinator has determined that you need to recertify your condition.

You must meet the eligibility criteria (see attached PUB 71) and not exceed 480 hours in the leave year for the leave to qualify for FMLA protection.

Note: If this absence is for an FMLA condition for which you are already approved, please contact your local FMLA office within 5 days of receipt of this letter.

Documentation Required

In order for your absence to receive FMLA protection (assuming you are eligible), your local FMLA Coordinator must receive the documentation required on page 2 of Publication 71 within 15 calendar days from receipt of this notice, unless this is not practicable under the circumstances. If you fail to provide the required documentation in a timely manner, your absence may not be FMLA-protected. This documentation may be sent or given to your local FMLA Coordinator or may be provided to your supervisor who will forward the documentation to the local FMLA Coordinator. (See FMLA Coordinator's addresses listed on the back of this letter to locate the appropriate FMLA Coordinator for your office.)

If you have any questions, please contact your local FMLA Coordinator's office.

RETURN TO WORK

Return to work clearance, pursuant to Section 865 of the Employee & Labor Relations Manual, may be required for absences due to an illness, injury, outpatient medical procedure (surgical) or hospitalization when there is a reasonable belief that you may not be able to perform the essential functions of your position, or that you may pose a direct threat to your own or others health or safety due to your medical condition. **This documentation must be provided in accordance with your local return to work procedures.**

We wish you or your family member a quick recovery.

Postal Service Management

[Barcode with MDIMS Order and Line Number]

FMLA COORDINATOR ADDRESSES

If you are not going to hand carry your documentation to your supervisor, please mail the documentation to the appropriate FMLA Coordinator address cited below: