Chauffeurs, Teamsters and Helpers Union

Local No. 371

**101 31st Avenue Rock Island, Illinois 61201**

# Telephones: Rock Island 787-4456 – FAX: 787-4888

## RECORD OF GRIEVANCE

PLEASE PRINT

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Name |  | | | | | | Address |  | | | | | Phone No. |  | | | |
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| Employed by | |  | | | | | Foreman |  | | | | Length of Service | |  | | | |
|  | | | | | |  | | | | | | | | | | | |
| Contract Section violated | | | | |  | | | | | | | | | | | | |
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| Date of alleged violation | | | | |  | | | | | | | | | | | | |
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| State Nature of Grievance be Specific to the Facts, Dates and Times. | | | | | | | | | | |  | | | | | | |
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| Remedy Sought: | | | | | | | | | | | | | | | | | |
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|  |  |  | Member’s Signature | |  | | | |
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Disposition of Case

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Business Representative ………………………………………..