

# Chauffeurs, Teamsters and Helpers Union

Local No. 371

101 31<sup>st</sup> Avenue

Rock Island, Illinois 61201

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

## RECORD OF GRIEVANCE

PLEASE PRINT

Name \_\_\_\_\_ Address \_\_\_\_\_ Phone No. \_\_\_\_\_ , 20 \_\_\_\_\_  
Employed by \_\_\_\_\_ Foreman \_\_\_\_\_ Length of Service \_\_\_\_\_

Contract Section violated \_\_\_\_\_

State Nature of Grievance be Specific to the Facts, Dates and Times. I am protesting my suspension  
effective \_\_\_\_\_, 20 \_\_\_\_ . I believe it was unfair and unjust.

Remedy Sought: To have the suspension removed from my record and to be made whole.

Member's Signature \_\_\_\_\_

### Disposition of Case

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Business Representative .....