

CONTRACT INVOLVED \_\_\_\_\_

Art. No.: \_\_\_\_\_

Date of Grievance \_\_\_\_\_

# GRIEVANCES

Sec. No.: \_\_\_\_\_

International Brotherhood of Teamsters, Chauffeurs,  
Warehousemen and Helpers, No. 294

Date Heard Local: \_\_\_\_\_

Union Phone#: Albany 489-5436

Date Heard Area: \_\_\_\_\_

Employee's Home Phone# \_\_\_\_\_

Employee's Remarks  
Explanation & Claim:

Union's Position:

\_\_\_\_\_  
Signature of Complainant

\_\_\_\_\_  
Employer

\_\_\_\_\_  
Steward

