American Postal Workers Union, AFL-CIO
Red Bank Local

Joseph Shevlin	Jeff Brents	Regina Camp	Ray Glasser	Joe Leddy	John Seery
President	Vice President	Director, Clerk Craft	Director, Maintenance	Secretary/Treasurer	Director, Industrial Relations

Post Office Box 3
Red Bank, New Jersey 07701

Phone: (732) 544-0335
Fax / Voice Mail: (732) 544-3682

Grievant's and/or Witnesses Information & Statement Form

Name:_____ **Employee ID**:_____

Address:_____

Phone#:_____**Pay Level**:_____**Step**:_____**Tour of Duty**:_____

Scheduled R/D:_____/_____**Begin Tour**:_____:_____**End Tour**:_____:_____

Service Seniority Date:_____**Craft Seniority Date**:_____
(***Check One***): [FTR] [PTR] [PTF] **Veteran**: [Y] [N] **Lifetime Security**: [Y] [N]

(Please read carefully before continuing)

Please to the best of you knowledge give all surrounding fact and information relevant to investigating and filing this grievance, this includes, but is not limited to; (1)the day, date, and time the incident occurred, (2)the date you as the grievant became aware of the incident, (3)the name of the immediate supervisor involved, (4)any and all witnesses to the incident you are grieving, and (5)a brief description of the situation(s) and/or problem(s) you are grieving.

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Employee's Signature Date