



# TEAMSTERS 174 SEATTLE

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Page  
Number

## GRIEVANCE REPORT FORM

Name (print) ..... E-mail Address .....

Address ..... Best Contact Phone .....

City ..... Zip Code .....

Employed by (print) ..... Employer's Phone .....

Person to see ..... Phone .....

### GRIEVANCE

**Explain in detail. It is important to give names, times and dates. Do not use reverse side. If two or more forms are utilized, number pages in upper right hand corner. Yellow copy is for grievant.**

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Date ..... Business Agent ..... Job Agent .....

Signed .....

**DO NOT WRITE BELOW THIS LINE**

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