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| |  | | --- | |  | |  |  | **Preferred Assignment Card** | | | | | |
|  |  |  |
| **Personal Information** | | | | | | | | |
| Name *(Print or type name Last, First, and MI)* | | | |  | Employee Identification Number *(Located on Pay stub)* | | | |
|  | | | | |  | | | |
| **Present Assignment** | | | | | | | | |
| Craft |  |  |  |  | | OFFICE |  |  |
| Circle One: PSE CLERK PTF Clerk | | | | | |  | | |
| **Choice** | **Office Name** |  |  | | **Choice** | **Office Name** |  |  |
| 1 |  |  |  | | 16 |  |  |  |
| 2 |  |  |  | | 17 |  |  |  |
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| 15 |  |  |  | | 30 |  |  |  |
| Signature | |  |  | | Date |  |  |  |
|  |  |  |  | |  |  |  |  |

**FAX this completed sheet to:﻿**

**ATTN: PSE Canvass/Complement 616-336-5398**

**Or scan via email to: diane.m.haddix@usps.gov**

Please provide a copy of this letter to the State APWU president Mike Mize

Via email to: [fmalprez@comcast.net](mailto:fmalprez@comcast.net)

COMPLETE ALL HIGHLIGHTED SECTIONS – SIGN AND DATE