

**WESTERN MICHIGAN AREA LOCAL #281 (APWU)**  
**Grievance Complaint Sheet/Information (Management doing Bargaining Unit Work)**

Complete and submit to your steward (contact the union office directly if no steward is available at the below numbers)

Employee Name \_\_\_\_\_ Emp. ID# \_\_\_\_\_

Full Address (Include City and Zip) \_\_\_\_\_

Phone Number \_\_\_\_\_ Seniority/Hire Date \_\_\_\_\_

Work Hours \_\_\_\_\_ SDOs \_\_\_\_\_

Step/Level \_\_\_\_\_ Place of Work/Pay Loc. \_\_\_\_\_

Supervisor's Name \_\_\_\_\_ Veteran? \_\_\_\_\_ Today's Date \_\_\_\_\_

FTR  PTF  NTFT  PSE

**Complete and Accurate Details of Event(s) :**

On, \_\_\_\_\_ Date of Infraction/ Violation, the following member(s) of management: \_\_\_\_\_

\_\_\_\_\_ State each supervisor or manager who was working was/were witnessed performing

bargaining unit work: \_\_\_\_\_ State what management was doing (e.g. sorting mail, operating machine) for a period of:

\_\_\_\_\_ State the time frame or # of hours in the \_\_\_\_\_ State Location of management doing the work area/section in

violation of the National Agreement. The following bargaining unit employees were in the

section/area at this time and also witnessed this/these violation(s): \_\_\_\_\_

List all other employees who may have witnessed this violation

Additional Comments: \_\_\_\_\_ List any additional information regarding this violation you think may be pertinent.

Signature/Date \_\_\_\_\_

(Use reverse for more space)