

1377 Motor Parkway, Suite 200  
Islandia, New York 11749  
Phone: 631-761-6907  
Facsimile: 631-761-6908  
[www.twulocal252.org](http://www.twulocal252.org)

**LOCAL 252**  
**TRANSPORT WORKERS UNION OF AMERICA, AFL-CIO**

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DANIEL V. BUSA, PRESIDENT

**GRIEVANCE FORM**

NAME: \_\_\_\_\_ COMPANY NAME: \_\_\_\_\_ GRIEVANCE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ DATE: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_

NATURE OF GRIEVANCE: (EXPLAIN AND GIVE DETAILS) STEP #: \_\_\_\_\_

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REMEDY SOUGHT: \_\_\_\_\_

MEMBER'S SIGNATURE: \_\_\_\_\_

UNION BUSINESS REPRESENTATIVE SIGNATURE: \_\_\_\_\_