



INFORMAL GRIEVANCE SETTLEMENT

Local 3204

Ph. # 404 688-1256

FAX 404 688-6236

Grievant (s): _____ Company: _____

_____ Date of Occurrence: _____

_____ Grievance # _____

Explanation of Grievance Issue:

Article (s) of contract involved: _____

Informal Meeting Date: _____

Representatives in attendance:

Company

Union

Settlement: _____

Company

Date

Union

Date

Officer Approved (if needed)

Date

Grievant

Date