

# LOCAL UNION NO. 77

## International Brotherhood of Electrical Workers GRIEVANCE FORM

### Spokane Office

7903 East Broadway  
Spokane Valley, WA. 99212  
Phone: (509) 328-8670  
Fax: (509) 325-9104

### Seatac Office

19415 International Blvd.  
Seatac, WA. 98188  
Phone: (206) 323-4505  
Fax: (206) 323-0186  
Construction Dispatch  
Phone: (206) 323-0585

### Kennewick Office

7025 W. Grandridge Blvd.,  
Suite A  
Kennewick, WA. 99336  
Phone: (509) 783-4136  
Fax: (509) 783-9453

Date:

Sent To:

Business Representative:

Employee's Name:

Address:

Company Name:

Headquarters:

Phone #:

Date Grievance Occurred:

Time:

Foreman or Supervisor:

Shop Steward:

Has this been taken up with the Shop Steward:

When:

Nature of Grievance:

Section(s) Violated:

Remedy Requested:

Signature of Employee:

Date:

Results of discussion between Shop Steward and Supervisor:

Signature of Shop Steward:

Date:

Other Remarks: