

GRIEVANCE REPORT

	1097		
DATE	LOCAL NUMBER	GRIEVANCE NUMBER	
MEMBER'S NAME		CLOCK NUMB	SER
_Georgia Pacific			
COMPANY			
DEPARTMENT	- SUI	PERVISOR	
WHEN DID GRIEVANCE OCCUR	R? DATE (on or about)	TIME	
GRIEVANCE REPORTED BY			
COMPLAINT			
			and any other provisions
of the Agreement that may be found	и то арріу.		
STATE WHAT HAPPENED:			
REMEDY			
REQUESTED			
		the Collective Bargaining Agreement, that the incide e of pay, be paid for all losses; and further that those	
in every respect, including interest		o or pay, so paid for all focusts, and failure that alloce	, and the made whole
			
SIGNATURE FOR THE UNION		SIGNATURE FOR THE COMPANY	
SIGNATURE FOR THE UNION		SIGNATURE FOR THE COMPANY	



GRIEVANCE PROCEDURE	
DATE SUBMITTED	SHOP STEWARD
ANSWER	
SETTLEMENT SATISFACTORY YES NO	SIGNATURE OF COMPNAY OFFICIAL
SECOND STEP	
DATE SUBMITTED	SHOP STEWARD
SETTLEMENT SATISFACTORY YES NO	SIGNATURE OF COMPNAY OFFICIAL
THIRD STEP DATE SUBMITTED	SHOP STEWARD
SETTLEMENT SATISFACTORY YES NO	
FOURTH STEP	
DATE SUBMITTED	SHOP STEWARD
ANSWER	
SETTLEMENT SATISFACTORY YES NO	SIGNATURE OF COMPNAY OFFICIAL
ARBITRATION	
DATE SUBMITTED TO ARBITRATION	NAME OF ARBITRATOR
DATE DECISION OF ARBITRATOR (attach copy)	