



TEAMSTERS LOCAL UNION No. 213
 490 East Broadway, Vancouver, B.C. V5T 1X3
 Telephone Number: 604-876-5213
 Fax Number: 604-872-8604

GRIEVANCE REPORT

Date: _____

MEMBER'S NAME: _____ Telephone No. _____

E-MAIL: _____

ADDRESS: _____

CITY: _____ POSTAL CODE: _____

EMPLOYER: _____

LOCATION OF PROJECT: _____

DATE OF HIRE AND/OR DATE OF TERMINATION: _____

NATURE OF GRIEVANCE: (Use reserve side if necessary)

Member's Signature

FOR OFFICE USE ONLY:

Referred to: _____

Progress and Disposition: _____

