IAEP Local 167 – Steward Pay for Grievance Hearing Request

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Steward \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Hearing \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Union Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Milage \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of Hearing \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Stipend $50.00

Mileage x .505 = $

\_\_\_\_\_\_\_

Total $

E-mail: [iaep167treasurer@gmail.com](mailto:iaep167treasurer@gmail.com)