Appeal Form—2024-2027 APWU AGREEMENT LMOU IMPASSES

USE SEPARATE SHEET FOR EACH ITEM IMPASSED

LR Service Center United States Postal Service		Union Local: Address:		
ATTN:	LMOU Impasse Appeals	nadiess.		
PO Box 23788 Washington, DC 20026-3788		Installation:		
CERTIF	IED MAIL NUMBER:		DATE:	
1.	IN DISPUTE: ARTICLE 30.B.	_ LMOU ARTICLE NUMBE	ER:	
2.	TITLE:			
3.	3. LANGUAGE IN CURRENT LMOU (Exact language, if any, from old MOU):			
4.	*UNION PROPOSAL(S) (Exact language and date proposed to Management):			
*MANAGEMENT COUNTERPROPOSAL(S) (Exact language and date proposed to Unio		late proposed to Union):		
6.	UNION FINAL PROPOSAL:			
7.	MANAGEMENT FINAL PROPOSAL	:		
Name (of Union Rep:	Name of Mana	gement Rep:	
Union Rep Initials:		Management F	Rep Initials:	

cc: Local Postmaster
APWU National Business Agent

^{*}Note: If there have been more than one proposal and counterproposal, list those proposals and counterproposals and the specific dates of each. Attach the additional proposal/counterproposals to this sheet in date order. Be sure you identify the Union's and Management's Final Proposals.