

SETTLEMENT IMPLEMENTATION FORM

DATE _____

TO: POSTMASTER
U.S. POSTAL SERVICE
AMERICA, U.S.A.

The attached is a favorable decision in behalf of the Union concerning the following appeal:

GRIEVANT: _____

NATURE OF APPEAL: _____

APPEAL CASE NUMBER: _____

The decision was rendered at the _____ level of the grievance procedure provided for in accordance with Article 15.

Will you kindly advise me of the date the decision is implemented within your office and kindly advise if the following supervisors—who have denied the appeal before this favorable decision—have been notified about the results:

1. _____

2. _____

3. _____

Your written reply will be appreciated. Thank you.

SIGNED _____

TITLE _____