



**NALC Branch 1227
P.O. Box 4154
Wichita Falls, TX 76308
REQUEST FOR EXTENSION OF TIME LIMITS**

Date of Request: _____

Grievant/Class Action: _____

NALC Grievance #: _____

Date Extension Requested Until: _____

By signing this request management and the Postal Service affirmatively represents that this request to extend the Union's time limits for the above cited grievance number and the grievant will not be used by management or the Postal Service as a procedural argument.

NALC Representative Signature

Management Representative Signature

NALC Representative Print

Management Representative Print

Date

Date