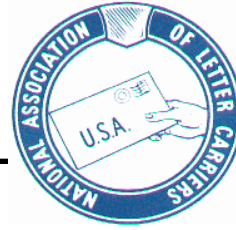


National Association of Letter Carriers
Capital City Branch 380
Trenton, New Jersey



BRANCH GRIEVANCE #: _____

CASE DESCRIPTION: _____

WITNESS STATEMENT FORM - CONTINUED

Multiple horizontal lines for writing the witness statement.

Initialed by Witness _____

PAGE _____ OF _____