

MADISON WISCONSIN AREA LOCAL AMERICAN POSTAL  
WORKERS UNION LOST TIME VOUCHER

Date Submitted \_\_\_\_\_

I, \_\_\_\_\_ hereby apply for \_\_\_\_\_ hours of pay  
level \_\_\_\_\_ step \_\_\_\_\_ @ \$ \_\_\_\_\_ per hour.

Night Premium hours \_\_\_\_\_ @ \$ \_\_\_\_\_ per hour

Sunday Premium hours \_\_\_\_\_ @ \$ \_\_\_\_\_ per hour

These hours were spent while attending \_\_\_\_\_

\_\_\_\_\_

on \_\_\_\_\_

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
President's Signature

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