

Sector Steward Contact Information

Please fill out the requested information for all Stewards at your facility.

Facility:_____ **CSS Signature**_____

Name: _____ ☐ Chief ☐ Treasurer ☐ Secretary ☐ Grievance Home Phone: _____ Cell Phone: _____ ☐ Text updates Other Phone: _____ Fax: _____ Email: _____	Name: _____ ☐ Chief ☐ Treasurer ☐ Secretary ☐ Grievance Home Phone: _____ Cell Phone: _____ ☐ Text updates Other Phone: _____ Fax: _____ Email: _____
Name: _____ ☐ Chief ☐ Treasurer ☐ Secretary ☐ Grievance Home Phone: _____ Cell Phone: _____ ☐ Text updates Other Phone: _____ Fax: _____ Email: _____	Name: _____ ☐ Chief ☐ Treasurer ☐ Secretary ☐ Grievance Home Phone: _____ Cell Phone: _____ ☐ Text updates Other Phone: _____ Fax: _____ Email: _____
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