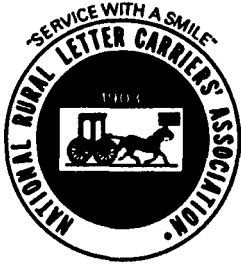


NATIONAL RURAL LETTER CARRIERS' ASSOCIATION



Local Steward Election Call

A local Steward Election is called for the _____ Post Office

This election will be held on _____
at _____
location _____

THIS NOTICE MUST BE POSTED AT LEAST 15 DAYS
PRIOR TO THE ELECTION DATE

Date of Posting _____

In accordance with the Constitution and Bylaws of the National Rural letter Carriers' Association Article XIV, Section 7., this notice hereby constitutes written notification to all NRLCA members that an election shall be held for the position of a local Steward in their office. Failure of members to exercise this right will result in the local office being assigned representation in accordance with the Constitution and Bylaws of the National Rural letter Carriers' Association.

Article XIV Section 7.

The selection of the local Steward shall be in accordance with democratic procedures. To become a steward a rural carrier must be a member of the National Rural letter Carriers' Association. A local steward election will be held. This election will be mandatory every four years during the month of January. A Local Steward can be re-lected to the position. Written notification to all NRLCA members shall be given at least 15 days before the date of the election. A majority vote of those NRLCA members voting is required for an election. When there is more than one (1) local Steward at an installation, one (1) shall be selected by the National Rural letter Carriers' Association members of said office as Chief Steward.

Nominations will be accepted at the time of election and any dues paying member of the National Rural letter Carriers' Association can announce his/her intention to be a candidate by signing below:

- | | |
|----------|----------|
| 1. _____ | 2. _____ |
| 3. _____ | 4. _____ |
| 5. _____ | 6. _____ |

Application for Steward Certification NATIONAL RURAL LETTER CARRIERS' ASSOCIATION



Date _____

Post Office (MAIN) _____

Station or Branch _____

Postmaster/Station Manager's Name _____

Mailing Address of Post Office _____ S t a t e Zip Code _____ - _____

Number of Rural Routes at this Office _____ Telephone No. of Post Office () _____

Name of Rural Carrier Steward _____

Social Security Number _____ Home Phone Number () _____

Mailing Address _____

City _____ State _____ Zip Code _____ - _____

This is to certify that the above-named rural carrier has been elected as the RURAL CARRIER STEWARD to represent the rural letter carrier craft employees in labor-management relations at the above-named Post Office. It is understood that this representative upon successful completion of the NRLCA Training Course will be certified in accordance with Article XIV, Section 7. This representative will serve until the next mandatory election, the position becomes vacant, the incumbent local Steward retires, or a petition requesting replacement of the Steward is signed by a majority of NRLCA members of said office to the State Steward, and upon approval of the State Steward.

Signatures of those appearing below confirm the selection of the above-named rural carrier as Local Steward for the rural carrier craft. ONLY DUES PAYING MEMBERS IN GOOD STANDING ARE ELIGIBLE TO SIGN BELOW OR BE SELECTED AS STEWARD.

SIGNATURES OF RURAL CARRIERS'

Route2 No.	REGULAR	LEAVE REPLACEMENT
1	_____	_____
2	_____	_____
3	_____	_____
4	_____	_____
5	_____	_____
6	_____	_____
7	_____	_____
8	_____	_____
9	_____	_____
10	_____	_____

1 if additional space for signatures is needed, attach a separate sheet.
2 indicate Vacant Routes.

I accept the responsibilities of the position of steward for the rural carrier craft for the above Post Office.

Signature of Steward

State Steward Use Only – Do Not Write In This Space

Date Trained/Certified _____

Date PM/Steward Notified _____

Signature of State Steward

The affixing of the signature of the State Steward
will to validate this document