

BID FORM FOR TEMPORARY ASSIGNMENT

POST OFFICE: _____
(City) (Installation or Station)

BIDDER: _____
Name (Job Classification – Unassigned Regular Carrier, CCA, etc.)

SENIORITY DATE: _____

Route Number(s) of Vacant Assignment Preferred: _____

Route Number(s) of Vacant Assignment Preferred (2nd Choice): _____

Route Number(s) of Vacant Assignment Preferred (3rd Choice): _____

Beginning Date: _____ Ending Date: _____ (Or Indefinite)

Date Submitted: _____

This Bid submitted in compliance with Article 41, Section 2 of the current National Agreement.

Signed: _____
(Carrier)

Received by: _____
(Management)