

Shop Steward/Member Exoneration

I, _____, request exoneration from attendance at the meeting(s) indicated:

Shop Steward Meeting Date: _____

Membership Meeting Date: _____

Reason:

Vacation _____

Illness _____

Other _____

Steward/Member signature

President/Treasurer signature

Note: This exoneration is subject to review by Local 567 Executive Board.