

IAM Air Transport District 142

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IAM/AIR WISCONSIN - MRP CONTRACT PROPOSAL FORM

I propose the following:	
ARTICLE	PARAGRAPH
PROPOSED LANGUAGE:	
REASON FOR PROPOSED CHANGE:	
SUBMITTED BY:	
EMPLOYEE NO.	
IAM BOOK NO. (OPTIONAL)	
LOCAL LODGE:	
DATE:	
*NOTE: Please use a separate form for each contrac	t proposal

Mail completed form to the address at the top of this form, or scan and email to: jbidoglio@iamdl142.org