

El Paso County Sheriff's Officers Association, Inc.

747 E. SAN ANTONIO # 103

EL PASO, TEXAS 79901

Office: (915) 544-4251

Fax: (915) 533-5117



List the Article(s) and Section(s) of the CBA(s) or Sheriff's Civil Service which was violated.
(Use separate sheet if necessary)

Remedy or Adjustment Sought: (Use separate sheet if necessary)

Officers Signature

Date

Grievance Committee Chair

Date Grievance filed

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Grievance Committee's Decision is final and not negotiable:

Association will **ACCEPT** the Grievance: _____
Grievance Committee Chair's signature and Date

Association will **DECLINE** the Grievance: _____
Grievance Committee Chair's signature and Date

*** (**IMPORTANT REMINDER:** The Association, in order to comply with time limits, request that Grievances be filed within 10 days of the actual or constructive knowledge of the alleged violation.)***