

**BID FORM
FOR TEMPORARY ASSIGNMENT**

POST OFFICE _____
(City) (Installation or Station)

BIDDER _____
NAME (Job Classification - PTF, Reserve Carrier, CCA, Etc.)

SENIORITY (RELATIVE STANDING) DATE _____

Number of Vacant Route Preferred _____

Number of Vacant Route Preferred (*2nd Choice*) _____

Beginning Date _____ Ending Date _____ (Or Indefinite)

Date This Bid Submitted _____

This Bid submitted in compliance with Article 41, Section 2.8.3, 4, 5,
or Article 25 Section 4 of the 2011-2016 National Agreement

Signed _____
(Carrier)

Received: POSTMASTER or SUPERVISOR _____
(Print)

(Signed)

- Be sure to keep a signed Copy

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