

SICK LEAVE HARASSMENT PROTEST

Today's date _____

TO: President of Local 565 and

(print Immediate Supervisor's name)

I, _____, _____ (print
employee's name) (employee number)

protest to the **SICK LEAVE HARASSEMENT PANEL**, the Company's placing me on a
ninety (90) day doctor's slip requirement per the Agreement between the Transport
Workers Union and American Airlines.

Signed _____

Address _____

City/State/Zip _____

Home Phone _____

cc: TWU, Local 565