

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Ohio Department of Job and Family Services]
[Address of the Unemployment Office]
[City, State, Zip Code]
Subject: Unemployment Benefit Dispute - Claim Number: [Your Claim Number]
Dear [Recipient's Name or "To Whom It May Concern"],
I am writing to formally dispute the recent determination regarding my unemployment benefits associated with claim number [Your Claim Number].
On [Date of Determination], I received a notice indicating that my eligibility for unemployment benefits has been [denied/separated/etc.]. I believe this decision is incorrect due to the following reasons:
1. **[State your first reason clearly and concisely.]**
2. **[State your second reason clearly and concisely.]**
3. **[State any additional reasons if necessary.]**
I have attached relevant documentation (e.g., pay stubs, termination letter, etc.) that supports my claim and demonstrates my eligibility for benefits.
I kindly request a reconsideration of my situation and a hearing to further discuss this matter. Please let me know if there are any additional forms or information required from my side.
Thank you for your attention to this matter. I look forward to your prompt response.
Sincerely,
[Your Signature (if sending a hard copy)]
[Your Printed Name]