

[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]