

[Your Name]  
[Your Address]  
[City, State, Zip Code]  
[Email Address]  
[Phone Number]  
[Date]

[Ohio Department of Job and Family Services]  
[Address of the specific office handling your appeal, if known]  
[City, State, Zip Code]

Subject: Appeal for Unemployment Benefits Decision

Dear [Recipient's Name or "To Whom It May Concern"],

I am writing to formally appeal the decision regarding my unemployment benefits application, dated [insert date of the decision letter]. My case number is [insert case number].

I respectfully disagree with the determination made on my claim, as I believe I am eligible for benefits due to [briefly explain your reason, e.g., "the involuntary termination of my employment," or "my meeting the required qualifications."]

[Insert a paragraph summarizing your work history, circumstances of your separation from employment, and any supporting facts that strengthen your case.]

I have attached the following documents to support my appeal:

1. [List of documents, e.g., termination letter, pay stubs, etc.]
2. [Any other relevant evidence.]

I kindly request that you review my appeal and reconsider my eligibility for unemployment benefits. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your time.

Sincerely,

[Your Signature (if sending a hard copy)]  
[Your Printed Name]