

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

Ohio Department of Job and Family Services
Unemployment Insurance Program
P.O. Box 1618
Columbus, OH 43216

Subject: Unemployment Claim Submission

Dear Unemployment Claims Department,

I am writing to formally submit my unemployment claim. My details are as follows:

Full Name: [Your Full Name]
Social Security Number: [Your SSN]
Date of Birth: [Your DOB]
Former Employer: [Your Employer's Name]
Employment Dates: [Start Date] - [End Date]
Reason for Unemployment: [Brief Explanation]

Attached to this letter are the required documents for my claim, including:

1. [List of Attachments, e.g., Pay stubs, Separation notice, etc.]

Please let me know if you require any further information. I appreciate your assistance in processing my claim promptly.

Thank you for your attention to this matter.

Sincerely,

[Your Signature (if mailing)]
[Your Printed Name]