

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

Ohio Department of Job and Family Services  
Unemployment Compensation Division  
P.O. Box 182404  
Columbus, OH 43218-2404

Subject: Unemployment Appeal for [Your Name] - Claim #[Your Claim Number]

Dear Appeals Tribunal,

I am writing to formally appeal the decision regarding my unemployment benefits claim, dated [Date of the Decision]. I respectfully request a hearing to review this case.

The basis for my appeal is as follows:

1. [Clearly state your reasons for the appeal, including any evidence or documentation supporting your case.]
2. [Mention any relevant facts that were not considered or incorrect information that may have led to the decision.]
3. [Attach any supporting documents, if applicable.]

I appreciate your prompt attention to this matter and look forward to the opportunity to present my case. Please inform me of the next steps in the appeals process.

Thank you for your time and consideration.

Sincerely,

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