

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

Ohio Department of Job and Family Services
[Address of the appropriate ODJFS office]
[City, State, Zip Code]

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

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

I am writing to formally appeal the decision regarding my unemployment compensation claim, reference number [Your Claim Number], dated [Date of the initial decision]. I respectfully request a review of my case due to [briefly state the reason for your appeal, e.g., "misunderstandings regarding my eligibility" or "new evidence supporting my claim"].

[In this paragraph, provide a detailed explanation of your situation. Include relevant information such as your employment history, reasons for unemployment, and any supporting documentation that you are enclosing with your letter.]

I believe that my circumstances warrant a reconsideration of my eligibility for benefits, as [explain why you believe the decision should be reversed].

Please find attached [list any documents you are including, such as pay stubs, termination letters, or any other relevant evidence].

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]