

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

[Ohio Department of Job and Family Services]  
[Address of the Office Handling Appeals]  
[City, State, Zip Code]

Subject: Appeal for Denied Unemployment Benefits - [Your Claim Number]  
To Whom It May Concern,

I am writing to formally appeal the decision regarding my unemployment benefits claim, which was denied on [date of denial]. My claim number is [Your Claim Number].

I respectfully disagree with this decision based on the following reasons:

1. [Reason one - provide details and evidence]
2. [Reason two - provide details and evidence]
3. [Additional reasons if necessary]

I request a reconsideration of my application based on the information provided above. Attached are copies of relevant documents that support my case:

- [Document 1]
- [Document 2]
- [Document 3]

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]