

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Ohio Department of Job and Family Services]
[Office of Unemployment Compensation]
[Address]
[City, State, Zip Code]
Subject: Dispute of Unemployment Claim Determination - Claim #[Your Claim Number]
Dear [ODJFS Representative's Name or "To Whom It May Concern"],
I am writing to formally dispute the recent determination made regarding my unemployment claim, Claim #[Your Claim Number], dated [Date of Determination]. I believe that the decision was made based on inaccurate information and I would like to provide additional details for your consideration.
[Briefly explain the reason for your dispute. Include any relevant facts, disagreements with the determination, or additional evidence you may have.]
For your reference, I have attached copies of [list any documents you are including, such as pay stubs, termination letters, witness statements, etc.].
I kindly request a review of my claim and a reconsideration of the determination based on the information provided. Thank you for your attention to this matter, and I look forward to your prompt response.
Sincerely,
[Your Signature (if sending a hard copy)]
[Your Printed Name]
[Your Claim Number]