

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
NOTICE OF APPEARANCE

CASE NAME

CASE NO.

Regional Director

Executive Secretary

General Counsel

National Labor Relations Board
Washington, DC 20570

National Labor Relations Board
Washington, DC 20570

The Undersigned hereby enters appearance as representative of

in the above-captioned matter.

Check the appropriate box(es) below:

Representative is an attorney

If representative is an attorney, in order to ensure that the party may receive copies of certain documents or correspondence from the agency in addition to those described below, this box must be checked. If this box is not checked, the party will receive only copies of certain documents such as charges, petitions and formal documents as described in sec. 11842.3 Of the casehandling manual.

Representative Information

TITLE: _____ NAME: _____

MAILING ADDRESS: _____

E-MAIL ADDRESS: _____

OFFICE TELEPHONE NUMBER: _____ CELL PHONE NUMBER: _____

FAX NUMBER: _____

SIGNATURE OF WITNESS (*please sign in ink*) _____ DATE _____

PRIVACY ACT STATEMENT

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