



State of Ohio
 State Employment Relations Board
 65 East State Street, 12th Floor
 Columbus, Ohio 43215-4213
 (614) 644-8573

<http://www.serb.state.oh.us/2000%20forms/REP/ORR.PDF>

Enter Request for Recognition Case Number Here

OBJECTION TO REQUEST FOR RECOGNITION

INSTRUCTIONS: This document is to be sent to SERB. A party lacking the capability for electronic service may file a motion for relief from electronic filing requirements pursuant to OAC 4117-1-02(F). Objections must be filed no later than the twenty-first day following the date on which the employer received the Request for Recognition from the employee organization.

1. Name of Person, Organization, or Party filing this objection:

Address:	Telephone: ()
City, County, State, Zip:	Email:

2. Name of Employer (if different from Item 1):

Address:	Telephone: ()
City, County, State, Zip:	Email:

3. Name of Employee Organization Requesting Recognition:

4. Objection is based on the following allegation(s):

- A majority of the employees in the proposed bargaining unit do not wish to be represented by the employee organization that has filed the Request for Recognition.
- At least ten percent (10%) of the employees in the proposed bargaining unit wish to be represented for purposes of collective bargaining by an employee organization OTHER THAN the one requesting recognition.
- The proposed bargaining unit is not an appropriate unit pursuant to Ohio Revised Code Section 4117.06.
- Other _____

5. Date Employer received Request for Recognition from Employee Organization:

6. Provide a clear and concise statement of the facts underlying the objection:

DECLARATION

I declare that I have read the contents of the Objection to the Request for Recognition and that the statements it contains are true and correct to the best of my knowledge and belief.

Signature of Person Attesting to Content of Form

Date

Print or Type Name

THIS OBJECTION TO REQUEST FOR RECOGNITION WILL NOT BE ACCEPTED FOR FILING IF THE PROOF OF SERVICE IS NOT FULLY COMPLETED AND SIGNED BY A REPRESENTATIVE OF THE FILING PARTY.

PROOF OF ELECTRONIC SERVICE

I certify that an exact copy of the foregoing Objection to Request for Recognition has been sent electronically to:

(Name, complete address and email address of other party(ies) to action)

this _____ (day) of _____ (month), _____ (year).

Signature of Person Attesting to Service of Form

Print or Type Name