

State of New Hampshire

Public Employee Labor Relations Board

Appearance Form

Please enter my appearance as co	ounsel/representative for
in Case No.	
in Case No,(case name)	
Name:	
	Telephone:
(Date)	(Signature)
<u>Cer</u>	rtificate of Service
I hereby certify that a copy of	my appearance was provided by electronic mail or by
regular mail thisday of	
to:	
(Represent	rative(s) of other party or parties to this case)
Date:	
	Signature

New Hampshire Public Employee Labor Relations Board 2 ½ Beacon St., Suite 200, Concord, New Hampshire 03301 603 271-2587 • www.nh.gov/pelrb • pelrb@nh.gov

1

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