STATE OF RHODE ISLAND BEFORE THE STATE LABOR RELATIONS BOARD

In the Matter of

-and-

CASE NO.: ULP-_____ EE-____

Petitioner

Respondent

ENTRY OF APPEARANCE

The undersigned enters his/her appearance as a representative of the

Petitioner Respondent Intervener

Signature

Other.

(PLEASE PRINT)

NAME:	TITLE:	
MAILING ADDRESS:		
PHONE NO.:	FAX NO.:	
CELLULAR NO.:	EMAIL:	
DATE:		

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