

**STATE OF RHODE ISLAND
BEFORE THE STATE LABOR RELATIONS BOARD**

| |
|---|
| In the Matter of -and- Respondent Petitioner |
|---|

CASE NO. _____

WITHDRAWAL OF APPEARANCE

The undersigned withdraws his/her appearance as a representative of the
Petitioner Respondent Intervener .

Signature

(PLEASE PRINT)

NAME: _____ TITLE: _____

MAILING ADDRESS: _____

PHONE NO.: _____ FAX NO.: _____

CELLULAR NO.: _____ EMAIL: _____

DATE: _____