

UI HEARING OFFICE  
P.O. Box 7975  
Madison, WI 53707  
Telephone: (608) 266-8010  
Fax: (608) 327-6498

## HEARING NOTICE

State of Wisconsin  
Department of Workforce Development  
Unemployment Insurance

### FORM F

Date Mailed: 06/06/19

HEARING NO. 87654321MW

Mailed to:

In the matter of:

MARY CLAIMANT  
1 DIVISION ST  
HOMETOWN WI 54444-4444

Employee: MARY CLAIMANT , RESPONDENT  
B.C. & S.S. No. 14/\*\*\*-\*\*-9876  
vs.  
Employer: EMPLOYER LLC, APPELLANT  
UI Account No. 123456

This is your **HEARING NOTICE**. You, your representative and/or witnesses are to appear in person.

on: WEDNESDAY, JUNE 5, 2019, 12:00 NOON (Central Time)

at: STATE OFFICE BUILDING, ROOM 712(7TH FL)  
819 N. 6TH STREET, MILWAUKEE, WI 53203

The following issue(s) may be covered: (BEGINNING WEEK OF ISSUE: 02/19)

DID THE CIRCUMSTANCES SURROUNDING THE EMPLOYEE'S SEPARATION FROM EMPLOYMENT, SUSPENSION OF EMPLOYMENT OR LEAVE OF ABSENCE DISQUALIFY THE EMPLOYEE FROM RECEIVING UNEMPLOYMENT BENEFITS. WIS. STATS. 108.04(1)(B), (5), (5G), (7) & (7M) AND WIS. ADMIN. CODE DWD 132 & 133

DO BENEFITS REMAIN PAID AND CHARGED BECAUSE THE EMPLOYER FAILED, WITHOUT GOOD CAUSE, TO TIMELY FILE A REQUIRED REPORT, TO OBJECT TO THE CLAIMANT'S ELIGIBILITY FOR BENEFITS ON A REPORT, OR TO PROVIDE CORRECT AND COMPLETE INFORMATION ON A REPORT OR DURING THE DEPARTMENT'S FACT-FINDING INVESTIGATION WIS. STATS. 108.04(13) & 108.09(40)

\*\*\*\*\* IMPORTANT MESSAGES \*\*\*\*\*

TO AVOID ARRIVING LATE TO THE HEARING ROOM, ALLOW SUFFICIENT TIME FOR TRAVEL & CONSTRUCTION, PARKING, & BUILDING ENTRANCE CHECK-IN (REQUIRED BY THE CAPITOL STATE POLICE).

#### HAVE THIS NOTICE WITH YOU AT THE TIME OF HEARING

Participants are expected to arrive on time. The **Appellant** must arrive within 10 minutes of the start time or the hearing may be dismissed. If other participants are delayed more than 10 minutes, the hearing will proceed without them.

**The hearing is the only opportunity to present documents and testimony as evidence in this case. Any future review of this case is based upon the record made at this hearing.**

READ OTHER SIDE OF THIS NOTICE FOR IMPORTANT INFORMATION

Notice also mailed to:

EMPLOYER LLC, 1 CAPITOL ST, ANYWHERE WI 55555-5555

# HEARING NOTICE TO APPEAR IN PERSON

## IMPORTANT - READ CAREFULLY

**PARTICIPATION:** Participants are expected to arrive on time. Allow sufficient time for travel. The **Appellant** must arrive within 10 minutes of the start time or the hearing may be dismissed. If other participants are delayed more than 10 minutes, the hearing will proceed without them.

It is **your responsibility** to inform your representative and witnesses of the hearing date, time and location. If there are unforeseen delays, you will be expected to wait up to one hour after the scheduled starting time for this hearing to begin.

**NO WEAPONS:** To preserve the decorum of the hearing, no weapons of any kind will be allowed in the hearing room. You, and any person accompanying you, must either **not** bring a weapon to the building, or be prepared to store the weapon outside the building in a secure manner. The agency will not store the weapon for you. Failure to comply with this request may result in the issuance of a citation.

**REPRESENTATIVES:** If you are receiving this hearing notice, it is **your responsibility** to inform your client of the hearing date, time and location. All participants are expected to arrive on time, appearing as instructed.

**WITHDRAWAL:** A request to withdraw the appeal can be made at any time by mail, fax or calling the hearing office. **ONLY** the party who requested the hearing (the **Appellant**) may request this action and should include the hearing number that appears on this notice. A withdrawal means the Determination remains in effect, and no further proceedings will be scheduled.

**POSTPONEMENTS:** A request to postpone the hearing can be made **ONLY** by calling the hearing office. All participants are expected to arrange time off from everyday affairs to attend. Postponements are not granted for the mere convenience of the participants. If you need a postponement, contact the hearing office immediately.

**ACCOMMODATIONS:** If you need an interpreter (sign or language) during the hearing, it will be provided at no cost to you. For this need and other accommodations or questions contact the hearing office immediately.

**ADDITIONAL INFORMATION:** For additional information regarding the appeal or hearing procedures, review 'Attending a UI Hearing' online at <https://dwd.wisconsin.gov/dwd/publications/ui/hearing.htm>.