



**STATE OF NEW YORK  
PUBLIC EMPLOYMENT RELATIONS BOARD**

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PRACTICES AND REPRESENTATION

**NOTICE OF APPEARANCE\***

RE: \_\_\_\_\_ - \_\_\_\_\_

Entered below is the name of the person, counsel or representative who will appear in this matter on behalf of:

\_\_\_\_\_  
Name of Party

By \_\_\_\_\_

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Email

\*To be filed within ten (10) working days of receipt at [sera@perb.ny.gov](mailto:sera@perb.ny.gov)