

STATE OF ILLINOIS
ILLINOIS EDUCATIONAL LABOR RELATIONS BOARD

WITHDRAWAL REQUEST

In the matter of _____
(Case Name) (Case Number)

This is to request withdrawal of the (petition) (charge) in the above case.

(Name of Party Filing)

By: _____
(Name of Representative)

(Title)

(Date)

Withdrawal request approved:

Executive Director, IELRB

Date _____