

Consumer Support Pledge

Independent Providers and Consumers of home care need to unite for change in Ohio's Long Term Care System. Therefore, as a home care consumer — or guardian of a consumer — I support the efforts of providers to form a union.

Please Print

Name _____ E-Mail _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Program (check all that apply)

- Ohio Home Care
- MRDD (IO/Level One)
- Other _____

I am willing to (check all that apply):

- Attend meetings
- Make phone calls to other consumers
- Talk to my legislators
- Attend events around the state
- Other _____

Signature _____ Date _____

SEIU/District 1199 • 1395 Dublin Rd; Columbus, OH 43215 • 1-800-227-1199 ext 5029 • www.seiu1199.org

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