

U.S. Department of Labor

Employment and Training Administration
200 Constitution Avenue, N.W.
Washington, D.C. 20210

DATE

NAME

OCCUPATION

FIRM

ADDRESS

Fax:

Dear: Mr./Ms **NAME**

On **DATE**, the Department of Labor requested information needed to determine whether workers at **SUBJECT FIRM, LOCATION**, are eligible for trade adjustment assistance benefits (petition number: **TA-W-XX,XXX**).

Although the letter requested that the data be supplied no later than [date], no information has yet been received. **[IF APPLICABLE]** Forms were sent to you a second time on **DATE** and additional phone calls and e-mails have been sent.

Unless the requested information is received in this office by the close of business on **DATE** the Department will initiate subpoena procedures in accordance with the Trade Act (19 USC 2321) and the Code of Federal Regulations (29 CFR 90.14) to secure the required data.

In order for you to avoid being served with a subpoena, we need **[SPECIFICS ON WHAT IS NEEDED.]**

[IF THE PETITIONER IS A COMPANY OFFICIAL] Alternatively, you as the petitioner may withdraw this petition for trade adjustment assistance by indicating in writing your desire to do so.

Please send your response via facsimile to **(202) 693-3584 or 3585**; Attention: **NAME OF INVESTIGATOR**. Should you have questions, please contact **NAME OF INVESTIGATOR** at **(202) 693-** or me at **(202) 693-**.

Sincerely,

NAME OF CERTIFYING OFFICER

Certifying Officer