



Clear

REQUEST FOR "ROAD TO INDEPENDENCE" PROGRAM DOCUMENTATION

Date: _____

Name: _____

Address: _____

----- (Fold here for window envelope) -----

Dear: _____,

The Department of Children and Families has recently conducted an audit of your Independent Living benefit file. It appears from that review that your file is missing documentation of the following:

Please provide the documentation to this office OR call me at _____ or call my supervisor, whose name is _____ and whose number is _____ so that we can help you obtain the missing documentation. You must submit the documentation or make contact with us by _____ or you will be sent a Notice of Termination of the "Road to Independence" Program benefits based on lack of documentation of eligibility.

If applicable, enter "ext."
and extension number

Thank you for your cooperation in this matter.

Sincerely,

Name and Title