

INFORMAL HEARING FORM LETTER



Date: _____

**RE: INFORMAL HEARING
FEIN NUMBER**

Dear _____ :

State law still requires the Department of Human Services (DHS) to take necessary steps to assure collection or resolution of unspent grant-in-aid funds. Based on analysis of the financial information submitted to DHS, it appears that your agency has not fully expanded the following grant(s):

<u>Fiscal Year</u>	<u>Office</u>	<u>Program</u>	<u>Lapse Amount</u>
--------------------	---------------	----------------	---------------------

If you would like to discuss and exchange information related to these issues, please request in writing an Informal Hearing **15 calendar days** after receipt of this letter. An Informal Hearing will be conducted via telephone by the program office responsible for the grant. All requests should be submitted to my attention at the following address **or** fax to (217) 524-5529:

Department of Human Services
222 South College, 2nd Floor
Springfield, Illinois 62704

If we do not resolve this issue or you do not request an Informal Hearing, the Department will send a Formal Notice of Intent to Recover Grant Funds letter before the recovery process shall proceed.

If you have questions in regard to this letter, please contact _____ at _____.

Sincerely,