

****HHS Complaint Letter Template****

[Your Name]

[Your Address]

[City, State, Zip Code]

[Your Email Address]

[Your Phone Number]

[Date]

[Recipient Name]

[Department/Agency Name]

[Address]

[City, State, Zip Code]

Dear [Recipient Name],

****Subject: Complaint Regarding [Nature of Complaint]****

1. **Introduction**

- Explain who you are and your relationship to the issue.
- Briefly state the purpose of your letter.

2. **Details of the Complaint**

- Describe the specific issue, including dates, locations, and any relevant parties involved.
- Include any relevant documents or evidence to support your claim.

3. **Impact of the Issue**

- Explain how this issue has affected you personally or professionally.
- Include any emotional, financial, or physical impacts.

4. **Attempts at Resolution**

- Describe any steps you have taken to resolve the issue prior to writing this letter.
- Include any responses received or lack thereof.

5. **Requested Action**

- Clearly state what resolution or action you are seeking from HHS.
- Mention any specific outcomes you would like to see.

6. **Conclusion**

- Thank the recipient for their attention to your complaint.
- Include a statement expressing your hope for a prompt response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]