

[Your Name]
[Your Address]
[City, State, ZIP Code]
[Email Address]
[Phone Number]
[Date]
[Recipient Name]
[Title]
[Agency/Organization Name]
[Address]
[City, State, ZIP Code]

Dear [Recipient Name],

Subject: Clarification of IHSS Payment

I hope this letter finds you well. I am writing to seek clarification regarding my In-Home Supportive Services (IHSS) payment for the month of [Month/Year].

Despite my understanding of the payment schedule, I have noticed a discrepancy in my payment amount, which I believe may have been due to [briefly explain any issues or concerns].

To assist in resolving this matter, I would appreciate if you could provide detailed information regarding:

1. The calculation of my payment for the specified month.
2. Any deductions or adjustments made to my account.
3. Steps I can take to rectify any potential issues.

I value the service provided by IHSS and appreciate your assistance in this matter. Thank you for your attention, and I look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]
[Your Printed Name]
[Your IHSS Case Number]