

[Your Name]  
[Your Address]  
[City, State, ZIP Code]  
[Email Address]  
[Phone Number]  
[Date]

[Recipient Name]  
[Organization Name]  
[Address]

[City, State, ZIP Code]

Subject: IHSS Payment Renewal Request

Dear [Recipient Name],

I hope this letter finds you well. I am writing to formally request the renewal of my In-Home Supportive Services (IHSS) payments. My current authorization is set to expire on [expiration date], and I would like to ensure continuous support for my [relation, e.g., parent] who requires assistance with daily activities.

My IHSS case number is [case number], and I have attached the necessary documentation for your review. I kindly ask you to expedite the processing of my renewal request to avoid any lapse in services.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]