

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

[Department of Social Services]
[Office Address]
[City, State, Zip Code]

Subject: Food Stamp Appeal

Dear [Name of the Appeals Officer or "To Whom It May Concern"],
I am writing to formally appeal the decision regarding my Food Stamp application dated [date of application] with the case number [case number]. I received a notice on [date of notice] stating that my application was [reason for denial or reduction].

I believe this decision was made in error due to the following reasons:

1. [Provide a clear and concise explanation of your first reason]
2. [Provide a clear and concise explanation of your second reason, if applicable]
3. [Any additional reasons or supporting information]

I have included the following documents to support my appeal:

- [List of enclosed documents, e.g., pay stubs, rental agreements, etc.]

I kindly request a review of my case. I appreciate your attention to this matter and look forward to your prompt response.

Thank you for your assistance.

Sincerely,

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