

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

[Date]
[Recipient's Name]
[Title]
[Department of Social Services]
[Address]
[City, State, Zip Code]

Dear [Recipient's Name],

Subject: IHSS Claim for [Your Name or Client's Name]

I hope this letter finds you well. I am writing to formally submit a claim for In-Home Supportive Services (IHSS) for [briefly describe the individual needing help, including their relation to you, if applicable].

Overview of Assistance Needed:

- Specific assistance required (e.g., personal care, household tasks)
- Duration and frequency of services needed

Background Information:

- Medical/health conditions impacting daily activities
- Any relevant documentation (attach if necessary)

Financial Information:

- Current income status
- Explanation of financial need

Conclusion:

I appreciate your attention to this matter and kindly request an assessment for IHSS services. Please contact me at your earliest convenience to discuss any additional information you may require.

Thank you for your assistance.

Sincerely,

[Your Name]

[Signature, if sending a hard copy]