

Notification of Suspected Benefits Diversion

Date:

To:

From:

Case Number:

Subject: Suspected Benefits Diversion

This is to notify you that we have reason to believe that there may have been a diversion of benefits in the referenced case. Please review the following details and provide your response as soon as possible.

Name of Recipient:

Benefit Type:

Period in Question:

Summary of Suspicion/Findings:

Action Requested:

If you have any questions or require further information, please contact our office at the earliest convenience.

Sincerely,