



State of Alaska
Department of Health & Social Services
Division of Public Assistance

Dear

Your family has only ___ months left to receive Temporary Assistance as of _____.

In order to help prepare you for going off of assistance, we are scheduling a meeting to review your situation and to identify the issues that are keeping your family from going off of assistance.

It is very important for you to attend this meeting. We will talk about the services your family needs to help you become more able to support yourself. If you are unable to attend this meeting, please contact me to provide any information you want to be considered at the meeting.

The meeting will be held on _____ at _____

_____. Please let me know if you can attend.

If you have any questions or concerns, call me at _____.

Sincerely,