Date:_____

Substantiation Reviews Office of Child and Family Services Department of Health and Human Services 11 State House Station Augusta ME 04333-0011

To Whom It May Concern:

I am writing to appeal a substantiation that was issued against me on ______(original date of substantiation). I dispute the allegations in the substantiation. I dispute that the facts as described by DHHS rise to the level of a substantiation. I request a paper review. If my substantiation is upheld at paper review, I would like a fair hearing.

Thank you for your attention to this matter,

Signed:	

Name: _____

Address:_____