 **B. J. Walker**, **Commissioner**

Gwendolyn B. Skinner, Division Director

Georgia Department of Human Resources • Division of Mental Health, Developmental Disabilities and Addictive Diseases

Two Peachtree Street, NW • Suite 23-215 • Atlanta, Georgia 30303 • 404-657-2134

Re: Jane Doe

DOB: 10/24/1900

SSN: 555-55-5555

[Today’s Date]

Social Security Administration

2630 M.L. King Jr. Drive, SW

Atlanta, GA 30311-9903

To Whom It May Concern:

I have enclosed an SSA-561: *Request for Reconsideration* for Jane Doe. In addition, Ms. Doe has signed an SSA-1696: *Appointment of Representative* form and SSA-8274: *Authorization to Disclose Information*, which are also enclosed.

Ms. Doe’s initial application was denied on [insert date]. She is only now filing for the appeal because she did not know the status of her application. Ms. Doe is homeless and has been for over a year. She has been living on the street and only recently began receiving services. Her disability has caused her to refuse any sort of help up until now. She did not have a reliable mailing address and did not receive the last few notices from SSA. She recently met and began speaking with a homeless advocate who asked us to look into her application. We believe that this is *good cause* for accepting her *Request for Reconsideration*.

I will be serving as her representative throughout the application process and all future deadlines will be met.

If you have any questions, please do not hesitate to contact me at (404) 555-5555. Thank you for your assistance and consideration.

Sincerely,

Ms. SOAR Case Manager, LMSW

SOAR Benefits Specialist

An Agency