

Program	Branch	Case Number	Worker ID
Case Name			Date

## **OFSET Appointment Letter**

Dear	
	tion Program (OFSET) will help you gain skills to get a ontinue to get food stamps. You must keep all scheduled heduled for:
Date:	Place:
Time:	
and you did not call to make a new one	. You did not come to the appointment
You must come to this appointment. You melow if you cannot come.	nust call me or leave a message at the phone number
Worker Name:	
Branch:	
Phone:	