**County of null - Administrative Services**

Phone: (916) 851-3175

## Worker Name: Worker ID:

**Worker Phone Number: Date:**

**Case Name:**

**Case Number:**

**Collections Demand Letter**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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## Recovery Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear ,

You were paid $\_\_\_\_\_\_\_ too much while you were working with \_\_\_\_\_\_\_\_\_\_, Case Number \_\_\_\_\_\_\_\_\_\_.

You must pay back the money or show the County your plan for paying.

If you are paying with cash, pay in person. Do not mail cash. Be sure to ask for a numbered receipt with the County name on it.

If you are paying with check or money order, bring it in person or mail it to:

In Person: By Mail:

Please call <office number> if you have any questions

Print

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(07/2020)

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