



San Gabriel / Pomona  
Regional Center

Date: \_\_\_\_\_

\_\_\_\_\_  
San Gabriel/Pomona Regional Center  
75 Rancho Camino Drive  
Pomona, CA 91766

- |  |
|--|
| <input type="checkbox"/> 1 <sup>st</sup> request |
| <input type="checkbox"/> 2 <sup>nd</sup> request |
| <input type="checkbox"/> 3 <sup>rd</sup> request |
| <input type="checkbox"/> 4 <sup>th</sup> request |

RE: \_\_\_\_\_

UCI#: \_\_\_\_\_

Dear \_\_\_\_\_,  
*(Service Coordinator)*

I need the following information for my client file immediately.

- Current IPP or IPP extension
- Client Profile or Annual Progress Report
- Other:

\_\_\_\_\_  
\_\_\_\_\_

Thank you very much for your attention to my request.

Sincerely,

\_\_\_\_\_

Mailing Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_