## San Bernardino County Homeless Partnership

**Interagency Council on Homelessness** 

Administrative Office

Administrative Office 560 E. Hospitality Lane, Suite 200, San Bernardino, CA 92408-0044 Office: (909) 501-0610



Date

Agency Name Street Address City, State, Zip Code

Re: Filed Community Complaint/Grievance

To Agency Director/Chief Executive Officer (CEO) Name:

This letter is to inform you of a community complaint/grievance filed against your agency on [Date] regarding [description of the complaint/grievance].

The Outreach and Coordinated Entry System (CES) Committee is responsible for investigating community complaints/grievances filed against agencies within the San Bernardino County Continuum of Care (CoC).

The Outreach and CES Committee plans to conduct an onsite programmatic review at your agency's site on [Date]. Please ensure that staff and anyone else needed to review the complaint/grievance and assist during the programmatic review is present during this time.

Sincerely,

Chair, of the Outreach and CES Committee San Bernardino County CoC

**Members of the Interagency Council on Homelessness**