

TEMPLATE: Deny Secondary Capital Plan

Date

SENT BY CERTIFIED MAIL

Name
Board Chairperson
Address
City, State Zip

Dear Mr./Mrs. Name:

[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]

Sincerely,

[NAME]
Regional Director

[REDACTED]

[REDACTED]

[REDACTED]