

[Date]

[Recipient Name]  
[Recipient Address]  
[City, State, Zip Code]

**Subject: Comprehensive Agency Contact Directory and Office Hours**

Dear [Client/Stakeholder Name],

To ensure you have easy access to our services, we are providing this comprehensive directory of our departments and their respective operating hours. Please keep this information for your records.

**General Contact Information:**

Main Phone: [Main Phone Number]  
General Email: [General Email Address]  
Website: [Website URL]

**Departmental Directory:**

- **[Department Name 1]**  
Phone: [Phone Number]  
Email: [Email Address]  
Hours: [e.g., Mon-Fri, 8:00 AM - 5:00 PM]
- **[Department Name 2]**  
Phone: [Phone Number]  
Email: [Email Address]  
Hours: [e.g., Mon-Fri, 9:00 AM - 4:00 PM]
- **[Department Name 3]**  
Phone: [Phone Number]  
Email: [Email Address]  
Hours: [e.g., By Appointment Only]

**After-Hours and Emergency Support:**

For urgent matters outside of standard operating hours, please contact our 24/7 helpline at [Emergency Number] or visit our online support portal at [Portal Link].

**Office Location:**

[Physical Office Address]  
[City, State, Zip Code]

Sincerely,

[Your Name]  
[Your Title]  
[Agency Name]