

[Agency Name]  
[Department Name]  
[Address]  
[City, State, Zip Code]

[Date]

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

**RE: Notice of Hearing Decision**

Case Number: [Case Number]  
Hearing Date: [Date of Hearing]

Dear [Recipient Name],

This letter serves as formal notification regarding the outcome of the administrative hearing held on [Date] concerning [Brief Description of Matter].

**Decision:**

After reviewing the evidence presented and the testimony provided, the Hearing Officer has reached the following decision: [Insert Decision - e.g., Upheld, Overturned, or Modified].

**Findings of Fact:**

The decision is based on the following findings:  
[List key facts and evidence relied upon here]

**Legal Basis:**

This determination was made in accordance with [Citation of Specific Law, Regulation, or Policy].

**Right to Appeal:**

If you disagree with this decision, you have the right to appeal. Your appeal must be filed in writing no later than [Number] days from the date of this letter. Please send your appeal to:

[Appellate Body/Address]  
[Instructions for filing]

If no appeal is filed within the specified timeframe, this decision will become final.

Sincerely,

[Signature]  
[Name of Hearing Officer/Administrator]  
[Title]