Appendix M

Date

Salesperson Dealership Address City, State, Zip

RE: Reimbursement Package Rejection Letter: Voucher Number # _____

Dear Salesperson:

Thank you for your participation in the Voucher Incentive Program. Unfortunately, the reimbursement package submitted for Voucher Number # ____was reviewed and found to be incomplete and/or not meeting the requirements of the program. The package was rejected because:

The reimbursement package did not meet the following Voucher Incentive Program criteria listed in the guidelines

The reimbursement package was incomplete. The following information was not included in the package:

If your reimbursement package was incomplete, please re-submit the entire reimbursement package including the missing documentation. If your reimbursement package did not meet the criteria of the program, please contact air district staff immediately for further explanation.

If you have any questions, please contact <insert contact> at <insert phone> or <insert email>.

Sincerely,

Name Title Air District Phone Number

Attachment: Reimbursement Package