



**CABINET FOR HEALTH AND FAMILY SERVICES**  
**Department for Community Based Services**  
**Office of the Commissioner**

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**Marta Miranda-Straub**  
Commissioner

**PROTECTION AND PERMANENCY MEMORANDUM, 21-27**

**TO:** Service Region Administrators  
Service Region Administrator Associates  
Service Region Clinical Associates  
Regional Program Specialists  
Family Services Office Supervisors

**FROM:** Tracy DeSimone, Assistant Director  
Division of Protection and Permanency

**DATE:** September 27, 2021

**SUBJECT:** Updated Special Expense Request form

The purpose of this memorandum is to make staff aware of the updated [Special Expense Request Letter](#), which is located under [All SOP Forms](#) in the [Standards of Practice Online Manual](#).

If you have previous versions of this form saved on your desktop or in hard copy form, please delete and begin using the updated version immediately.

If you have any questions regarding this memorandum, please contact:

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