

[DATE]

-Insert Agency Letterhead or Name Here-

RE: **Client Name:** \_\_\_\_\_  
**PACTS No.** \_\_\_\_\_  
**TREATMENT PROGRAM FAILURE NOTICE**

Dear USPO:

The purpose of this letter is to provide notification that this defendant/offender has failed to:

\_\_\_\_\_ Failure to report for drug testing on \_\_\_\_\_

\_\_\_\_\_ Failure to report for counseling or evaluation appointment on \_\_\_\_\_

\_\_\_\_\_ Failure to provide sufficient urine sample on \_\_\_\_\_

\_\_\_\_\_ Failure to report for sweat patch application or removal on \_\_\_\_\_

\_\_\_\_\_ Failure to call for initial appointment on \_\_\_\_\_

Sincerely,

[Name]