



DEPARTMENT OF HEALTH & HUMAN SERVICES

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**ADMINISTRATION FOR CHILDREN AND FAMILIES**

370 L'Enfant Promenade, S.W.

Washington, D.C. 20447

SEP 10 2009

Leo Ribas, Director  
Community Services Division  
Department of Social and Health Services  
P.O. Box 45440  
Olympia, Washington 98504-5440

Dear Mr. Ribas:

We have completed our review of your Temporary Assistance for Needy Families (TANF) amended Work Verification Plan and find that it meets the requirements of Section 402 of the Social Security Act, 45 CFR 261.62(b) and applicable guidance issued by the Office of Family Assistance. We are approving this plan conditioned upon full implementation of the plan by April 1, 2009. If we have misconstrued or overlooked any provision of this plan that is inconsistent with the law including but not limited to Title IV-A of the Social Security Act, applicable regulations, final TANF Deficit Reduction Act regulations, or any applicable guidance, we reserve the right to require the State to amend this plan.

We are approving this plan despite the fact that the certification refers to an earlier plan date. We understand that the certification of accuracy and completeness you provided with the earlier plan continues to apply to this one, which reflects changes you made in response to our review. If this understanding is incorrect, please provide a new, valid certification.

Sincerely,

A handwritten signature in cursive script, reading "Ann H. Barbagallo", is positioned above the typed name.

Ann H. Barbagallo  
Acting Director  
Office of Family Assistance

Cc: Frank Shields  
TANF Program Manager  
ACF Region 10  
2201 Sixth Avenue, MS-70  
Blanchard Plaza  
Seattle, Washington 98121-1857