BUREAU OF HEARINGS AND APPEALS

Administrative Region 2330 Vartan Way, 2nd Floor Harrisburg, Pa 17110 Receptionist 717-783-3950 Fax 717-346-1959	Central Region 2330 Vartan Way, 2nd Floor Harrisburg, Pa 17110 Receptionist 717-783-3950 Fax 717-772-2769	Eastern Region 801 Market Street 5th Fl Philadelphia, Pa. 19107 Receptionist 215-560-2145 Fax 215-560-2378	Western Region 2 Gateway Center 603 Stanwix Street, Suite 1125 Pittsburgh, Pa 15222 Receptionist 412-565-5213 Fax 412-565-5514
Federal Hearings & Appeals (FHA) 117 W. Main Street Plymouth, PA 18651 570-779-5122 1-800-664-7717 Fax:570-719-0306	Reading Field Office 625 Cherry Street 4th Floor, Room 440 Reading, PA 19602 Receptionist 610-378-4081 Fax 610-378-4461		Erie Field Office 1001 State St Suite 401 Erie, PA 16501 Receptionist 814-871-4433 Fax 814-878-5736

WITHDRAWAL COVER SHEET

County/District: _____

BHA Region: _____

Co/Record No.: _____

Client Name: _____

Appeal No. Being Withdrawn: _____

Appeal Scheduled? (YES/NO): _____

Date of Withdrawal: _____

IR Due Date: _____

Date Original Appeal Submitted: _____

Withdrawal Code (1,2 or 3): _____

Date Withdrawal Data Entered: _____

Withdrawal Codes: 1- Appellant Withdrew - Adverse Action Continues
2 - CAO Rescinded Action - Adverse Action Canceled
3 - Withdrawn - Other (When 1 or 2 Does Not Apply)

COMPLETE THIS SECTION ONLY IF THE APPEAL HAS BEEN SCHEDULED

Date/Time of Hearing: _____

Hearing Officer: _____

Scheduled withdrawals: Please fax this Cover Sheet and a copy of the written withdrawal immediately upon receipt to the BHA office where the presiding ALJ is located. Specific fax numbers are indicated on the Reference Listing of Administrative Law Judges fact sheet. (Reference Listing of Administrative Law Judges sent to all offices.) **DO NOT mail the original withdrawal to BHA**. Be sure to maintain your fax confirmation receipt as proof that you faxed the withdrawal.

NOTE: You will be unable to data enter the withdrawal information if the hearing has been scheduled.

Unscheduled withdrawals: After the withdrawal has been data entered, please mail this Cover Sheet and the **written withdrawal** directly to the BHA region where you sent the appeal.

REMINDER: Enter in Comments Section of the Control Card – "Withdrawal entered by CAO MM/DD/YY"

If you are submitting the appeal and the withdrawal at the same time, both the Appeal Cover Sheet and the Withdrawal Cover Sheet should be completed. The appeal and the withdrawal should be data entered at the same time and forwarded to the appropriate Bureau of Hearings and Appeals region.

_____
CAO Representative Signature

_____
Date

_____
Telephone Number