



Office of the  
State Inspector General



RECOVERY ACT

FRAUD ALERT

Date:

To: Office of the State Inspector General

From:

Subject:

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**Please be advised that the above office has received a complaint regarding ARRA funds involving the below listed business/person(s):**

- 1) **Business of Interest:** (Corporate name, DBA's, address, phone number(s))
- 2) **Person(s) of Interest:** (name, address, phone numbers, other identifying information)
- 3) **Allegations:** (Briefly describe nature of allegations, type of suspected fraud)
- 4) **Location of Activity:** (provide location(s) in Georgia where activity(s) is/are occurring.)
- 5) **Agency Contact(s):** (Name of auditor, investigator, supervisor, etc.)
- 6) **Referrals:** (List other agencies, State or Federal, that have been contacted, if any)
- 7) **Additional Information:**

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**Note: Please contact the reporting agency for more information**