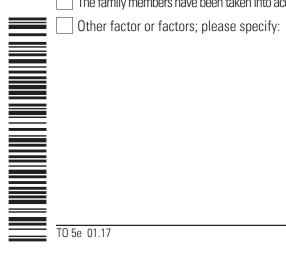
Kela®

Rectification request Social assistance

Kela Oikaisuvaatimuskeskus PO Box 10 00056 KELA

1. Person requesting rectification	
Personal identity code	Family name and given name
Address	
Postal number	Postal district
Phone number	E-mail
2. Request for rectific	
Which decision does the rewhen the decision was issued.	ectification request concern? Also indicate the Insurance District that made the decision and the date ued.
Describe how you want th	e decision to be changed.
On what grounds are you r	requesting rectification?
The incomes have been to	aken into account incorrectly. Indicate the correct incomes below and explain why these incomes are the correct ones.
The assets have been tak	en into account incorrectly. Indicate the correct assets below and explain why these assets are the correct ones.
The expenses have be how and why the expe	en taken into account incorrectly or they should have been accepted to a higher amount. Indicate below enses calculation should be changed.
The decision concerning reasons for requesting	ng rental security deposit or voucher is incorrect. Indicate below the changes you request and the the change.
The family members have	been taken into account incorrectly. Indicate below how the family composition should be taken into account and why.



Additional information on a separate sheet. Write your name and personal identity code on the sheet.
3. Enclosures Name the supporting documents below. Indicate what you wish to prove with each supporting document.
Document 1.
This document shows that
Document 2.
This document shows that
Document 3
This document shows that
Document 4
This document shows that
Document 5
This document shows that
4. Signature
Date Signature and printed name