

1. Client		
Personal identity code	Family name and given name	
L Telephone	E-mail	
(i) Kela retrieves address	data from the population data system.	
2. Benefit		
Name of the benefit overpa	id	
Overpayment of the benefit	was confirmed in a decision issued on	(date).
3. Financial and socia	al situation	
	us about your income, expenses, debt or maintenance	
4. Reasons for the ov		
You can state your view on	the reason for the overpayment.	
5. Signature		
Place and date	Signature	