



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: NOV 06 2013**

Ms. Dolores L. Smith Sharer  
Smith's Personal Care Home  
47 Front Street, P.O. Box 65  
Wyalusing, Pennsylvania 18853

Dear Ms. Smith Sharer

By letters of June 25, 2013 and August 1, 2013, the Department of Public Welfare (Department) notified you an application was required to renew your license to operate a Personal Care Home at the above address. Your current license expired on November 1, 2013. To continue operation of your personal care home, it is required that you submit a renewal application, including the application fee, Bureau of Equal Opportunity Civil Rights Compliance approval letter, and a Certificate of Occupancy. Applicable forms are enclosed with this letter. Please mail all documentation to:

Department of Public Welfare  
Bureau of Human Services Licensing  
P.O. Box 2675  
Harrisburg, PA. 17105-2675

Failure to complete and return the renewal application and applicable documents within 14 calendar days of the mailing date of this letter will result in the non-renewal of your license to operate the above facility. If you have any questions, please contact Jacob Herzing, Regulatory Enforcement Manager, at 717-265-8039.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones", with a long horizontal flourish extending to the right.

Matthew J. Jones  
Acting Director

Enclosures:  
Application Checklist  
Renewal Application  
Bureau of Equal Opportunity Questionnaire