

[Employer Name]
[Employer Address]
[City, State, Zip Code]
[Phone Number]
[Date]

To: [Name of State Housing Authority]
[Housing Authority Address]
[City, State, Zip Code]

Subject: Employment Verification for [Employee Name]

To Whom It May Concern,

This letter is to formally verify the employment of [Employee Name] with [Employer Name].

Employment Details:

- **Employment Status:** [Active / Terminated]
- **Job Title:** [Title]
- **Hire Date:** [Date]
- **Employment Type:** [Full-time / Part-time / Seasonal]

Income Information:

- **Base Pay Rate:** \$[Amount] per [Hour / Week / Year]
- **Average Hours Per Week:** [Number of Hours]
- **Overtime Rate:** \$[Amount] per hour
- **Average Overtime Hours:** [Number] per week
- **Other Compensation (Bonuses/Tips/Commissions):** \$[Amount]
- **Total Gross Year-to-Date Earnings:** \$[Amount]

I certify that the information provided above is true and correct to the best of my knowledge.

Sincerely,

[Signature]
[Printed Name]
[Title]
[Company Name]