*Date*

*Landlord Name*

*Landlord Address*

*City, State, Zip*

Dear Mr. / Mrs. *Landlord Name*

 You are receiving this Acknowledgement Letter to verify the payment you have received from the Illinois Housing Development Authority for your participation in the Rental Housing Support Program. Due to a recent change in the Quarterly Reporting process within the program, we are asking that you certify to the accuracy of your payment by signing this letter and returning an original copy to your LAA representative.

Date of Payment: (insert payment date here)

Round Number: (insert round number here)

Months Subsidy Provided: (insert quarter dates here)

Amount of Payment: (insert payment figure here)

Subsidized Units: (list all occupied units here)

By signing below, you are in agreement that the above information is correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Owner signature)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (“Agent” on behalf of Owner)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Printed name)

You must complete this certification and return it to your LAA representative by **(insert date here)**. Failure to complete this requested certification three times will result in your contract being terminated.

We appreciate your cooperation in this matter.

Sincerely,

*LAA Rep Signature*

*LAA Rep Title*

*Date*

*LAA Representative*

*LAA Address*

*City, State, Zip*

Dear IHDA,

 You are receiving this Acknowledgement Letter to verify an over/under payment submitted for (**insert landlord name here**). Below please see detail of an incorrect payment made to (**insert LAA name here)**.

Date of Payment: (insert payment date here)

Round Number: (insert round number here)

Landlord Name: (insert landlord name here)

Amount of Payment Received: (insert payment figure here)

Amount of Payment Forwarded: (insert payment figure here)

Amount of Difference: (insert difference amount here)

Justification: (Explain in detail reasoning why payment made to landlord differed from what was submitted to LAA, please be specific, giving dates/names of parties involved)

By signing below, I acknowledge that (**insert LAA name here**) has made the above payment and understand the process of returning an overpayment. Additionally, I understand that an underpayment will be corrected in a future quarterly payment cycle.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (LAA signature)

Sincerely,

*LAA Rep*

*LAA Rep Title*