

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

[Recipient Name]
[Recipient Title]
[Agency/Organization Name]
[Agency Address]
[City, State, Zip Code]

Subject: IHSS Payment Request

Dear [Recipient Name],

I hope this letter finds you well. I am writing to formally request payment for the In-Home Supportive Services (IHSS) I provided for [Client's Name] during the period of [Start Date] to [End Date].

Details of the services provided are as follows:

- Type of service: [Describe service (e.g., personal care, housekeeping)]
- Total hours worked: [Total hours]
- Rate of pay: [Hourly rate]

The total amount requested for this period is [Total Amount].

Attached to this letter are the necessary documentation and time sheets for your review. I kindly ask for your prompt attention to this matter and look forward to your response.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]

Attachments: [List of attached documents, e.g., time sheets, invoices]