

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

[Recipient's Name]  
[Recipient's Title]  
[Organization Name]  
[Organization Address]  
[City, State, ZIP Code]

Subject: IHSS Payroll Letter

Dear [Recipient's Name],

I am writing to inquire about the IHSS payroll process for the [specific month/year]. As a caregiver for [Recipient's Name], I would like to ensure that all necessary documentation and hours worked have been submitted correctly.

My details are as follows:

- Caregiver Name: [Your Name]
- Recipient Name: [Recipient's Name]
- Recipient's Case Number: [Case Number]
- Hours Worked: [Total Hours]

Please confirm the status of the payroll process and any further information you may need from my end to facilitate this.

Thank you for your assistance.

Sincerely,

[Your Name]

[Your Signature (if sending a hard copy)]