|                           | Walk in Form<br><u>Clients will be seen by <i>Appointment Only</i></u> |
|---------------------------|--|
| Date:                     | Direct this message to:  |
| Your name:                | Public Housing   |
| SSN: Last 4 digits xxx-xx |  |
| E-mail address:           | This is <u>In Response to:</u>   |
| Address:                  | Phone call   |
| Phone Number:             | Letter   |
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Thank you for your patience and cooperation. *Elkhart Housing Authority Staff*