



VERIFICATION AND APPROVAL LETTER

Employer Name _____

Street Address _____

City, State & Zip _____

Please verify that your employee: _____

Social Security Number: _____ worked _____ Percent of his time outside

Fayette County, KY, for the year of _____ .

Please list all locations the employee worked during the year:

Employer Signature _____

Title _____

Date _____

