

**MANCHESTER**  
HOUSING AUTHORITY

P.O. Box 110 522 M.L.K. Drive

Manchester, Georgia 31816

Phone: 706-846-9428 Fax: 706-846-5139 Email: [mha1@alltel.net](mailto:mha1@alltel.net)

Felicia Warren, Executive Director

DEPARTMENT OF SOCIAL SECURITY ADMINISTRATION

314 North Lewis Street  
LaGrange, Georgia 30241

\_\_\_\_\_ Date

TO WHOM IT MAY CONCERN: Please verify my social security and / or S.S.I. for the Housing Authority of the City of Manchester. My claim number (s) is \_\_\_\_\_

Name of Beneficiary	Type of	Gross Amount of Check	Amount of Medicare/ Medicaid	Net Amount of Check

**Please return to:**

**MANCHESTER HOUSING AUTHORITY  
P.O. BOX 110  
MANCHESTER, GEORGIA 31816**

**Authorization of Recipient:**

\_\_\_\_\_ SIGNATURE

\_\_\_\_\_ Address

\_\_\_\_\_ City, State and Zip Code

**Signature of person filling out form**

\_\_\_\_\_

\_\_\_\_\_ Title

**H.A.C.M. USE ONLY**

Date Received \_\_\_\_\_

By: \_\_\_\_\_