**Executive Director/Board Approval**

**(Sign and Return this Document to DHCD, along with a list of all employees authorized to request and receive information provided through Wage Match)**

Executive Director/Board Approval

Your signature below will indicate that you have read and thoroughly understand the contents of Public Housing Notice 2019-16. **It will also indicate that all authorized employees at your housing authority have read and signed the attached “Acknowledgement Regarding Confidentiality of the Department of Revenue’s Information & DOR Disclosure and Security Training for Safeguarding Information,” and that your authority has these signed acknowledgements on file.** **Please note that the Acknowledgements include a summary of the law and other information.**

After Board Approval, please have the Executive Director, as well as the Chairperson of the Housing Authority Board sign on the appropriate lines below, **and scan/return to DHCD**, **within forty-five (45) days of the date of this Public Housing Notice (PHN) to Michael Chow, Auditor, Bureau of Housing Management, at** [**Michael.Chow@Mass.Gov**](mailto:Michael.Chow@Mass.Gov)**, along with a list of all employees that are authorized to request and receive information provided through Wage Match.**

If you have any questions about the Wage Match System, please call Michael Chow of the Bureau of Housing Management at (617) 573-1201.

Executive Director

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Housing Authority

(Name of Housing Authority)

Chairman, Board of Commissioners

Date