**PLEASE COPY AND PASTE THE FOLLOWING TEXT ONTO COOK COUNTY SHERIFF OFFICE LETTERHEAD, COMPLETE, SIGN, AND EMAIL TO: COVID.INTAKE@COOKCOUNTYHHS.ORG**

[CCSO point of contact]

Cook County Sheriff’s Office

[CCSO address]

[CCSO POC phone number]

[Date]

This letter is to verify that [eligible Sheriff’s employee name] is employed at [CCSO employment location] as a [position/title] in the [department name]. Additionally, [eligible employee’s name] has been identified as a first responder eligible for hotel accommodation due to direct contact with COVID-19 positive or symptomatic persons.

This letter serves as confirmation that [CCSO eligible employee’s name] has been determined eligible for a hotel accommodation by the Cook County Sheriff’s Office.

Please do not hesitate to contact [first responder entity point contact] with any additional questions or concerns.

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Authorizer name (printed) Employee name (printed)

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Authorizer signature Employee signature

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Employee e-mail

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Employee phone number