

**Child Certification Letter**

DEPARTMENT OF HEALTH & HUMAN SERVICES

---

**ADMINISTRATION FOR CHILDREN AND FAMILIES**  
370 L'Enfant Promenade, S.W.  
Washington, D.C. 20447

HHS Tracking Number  
55555555555

Ms. Susie Doe  
C/o Jim Thomas, Refugee Social Worker  
Smith County Community Service Office  
123 Main St.  
Bellevue, WA 55555-5555

**CERTIFICATION LETTER**

Dear Ms. Doe:

This letter confirms that, pursuant to Section 107(b) of the Trafficking Victims Protection Act of 2000, you are eligible for benefits and services under any under any federal or state program or activity funded or administered by any federal agency to the same extent as an individual who is admitted to the United States as a refugee under Section 207 of the Immigration and Nationality Act, provided you meet other eligibility criteria.

Your initial eligibility date is \_\_\_\_\_. This eligibility is valid for eight months from the date of this letter. The expiration date is \_\_\_\_\_.

You should present this letter when you apply for benefits or services. Benefit-issuing agencies should call the trafficking verification line at (202) 401-5510 to verify the validity of this document and to inform HHS of the benefits for which you have applied.

Sincerely,

Carmel Clay-Thompson  
Acting Director  
Office of Refugee Settlement