

# INCOME VERIFICATION STATEMENT

## I. DATE OF ISSUANCE

This Income Verification Statement is issued on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

## II. RECIPIENT INFORMATION

This statement is provided to: Name of Recipient Organization/Individual: \_\_\_\_\_

Attention: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Purpose of Verification: \_\_\_\_\_

## III. EMPLOYEE/INDIVIDUAL INFORMATION

Employee/Individual Name: \_\_\_\_\_

Employee/Individual Social Security Number (Last 4 digits): XXX-XX-\_\_\_\_\_

Employee/Individual Date of Birth: \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Employee/Individual Current Address: Street Address:

\_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

## IV. EMPLOYER INFORMATION (IF APPLICABLE)

Employer Name: \_\_\_\_\_

Employer Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Employer Phone Number: \_\_\_\_\_

Employer Email Address: \_\_\_\_\_

## V. EMPLOYMENT AND INCOME DETAILS

**This section verifies the employment and income details for the Employee/Individual named above.**

**Employment Status:**  Currently Employed  
 Formerly Employed (Employment End Date: \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_) )  
 Self-Employed

**Position/Title:** \_\_\_\_\_

**Date of Hire/Commencement of Employment:** \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

**Employment Type:**  Full-Time  
 Part-Time  
 Contract  
 Other: \_\_\_\_\_

**Current Gross Annual Salary/Wages:** \$ \_\_\_\_\_

**Pay Frequency:**  Weekly  
 Bi-Weekly  
 Semi-Monthly  
 Monthly  
 Annually  
 Other: \_\_\_\_\_

**Average Gross Monthly Income (for self-employed or variable income):** \$

\_\_\_\_\_  
(Based on the period from \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ to \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_)

**Year-to-Date Gross Earnings (as of the date of issuance):** \$ \_\_\_\_\_

**Additional Income/Benefits (e.g., bonuses, commissions, overtime, housing allowance):**

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## **VI. VERIFICATION STATEMENT**

This statement is provided as an accurate representation of the Employee's/Individual's employment and income information based on our records as of the date of issuance. This information is provided solely for the purpose stated in Section II and should not be construed as a guarantee of future employment or

income.

**VII. CONTACT FOR FURTHER VERIFICATION**

**For any further inquiries regarding this verification, please contact: Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

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[EMPLOYER REPRESENTATIVE OR SELF-EMPLOYED INDIVIDUAL]

**Signature:** \_\_\_\_\_

**Print Name:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Date:** \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_