

# PROOF OF INCOME LETTER

To Whom It May Concern:

This letter is to verify the income of the undersigned individual in compliance with applicable United States laws and regulations. This document is intended solely for income verification purposes and may be relied upon by authorized entities as proof of income.

## Employee / Individual Information:

Full Legal Name: \_\_\_\_\_

Social Security Number (last four digits): \_\_\_\_\_

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

Phone Number / Email: \_\_\_\_\_

## Employer Information:

Company Name: \_\_\_\_\_

Employer Identification Number (EIN): \_\_\_\_\_

Company Address: \_\_\_\_\_

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

## Income Verification Details:

Position / Job Title: \_\_\_\_\_

Employment Status (Full-Time / Part-Time / Contract): \_\_\_\_\_

Date Employment Began: \_\_\_\_\_

Current Gross Income: \_\_\_\_\_ USD (Gross Monthly)

Income Payment Frequency: \_\_\_\_\_

Additional Income Sources (if any): \_\_\_\_\_

## Verification Statement:

The undersigned employer hereby verifies that the above information is true and accurate to the best of their knowledge. This verification is provided in accordance with United States law and may be used for lawful purposes such as loan underwriting, rental qualification, or other income verification requirements. Any falsification or misrepresentation is subject to penalties under applicable federal and state laws.

## Authorized Employer Representative:

Full Name: \_\_\_\_\_

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

Business Phone Number: \_\_\_\_\_

Business Email Address: \_\_\_\_\_

## Signature and Certification:

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

Date Signed: \_\_\_\_\_

This Proof of Income Letter is provided without warranty, express or implied. The employer assumes no liability for decisions made based on this verification. Verification may be subject to further validation upon request by authorized parties.

**EMPLOYER SIGNATURE**

**EMPLOYEE SIGNATURE**

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

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

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