



**Yellowstone Country Assistance Network
Employer Income Verification Form**

Use this form if you do not have paystubs for the past 30 days. Yellowstone Country Assistance Network is required to verify income on all applicants age 18 and older for the preceding 30 days, including today's date. Once completed, you can upload a copy of this form to your application.

Employee Name * _____

Date of Hire _____ How often Paid _____

Employee's Total Gross Income Amount* \$ _____ Source*: _____

Employer Name * _____ Title* _____

Employer Phone Number _____

When the verification is obtained from an employer, complete information concerning the amount and source must be documented. In addition to recording the income amount and the source, documentation must include the name and title of the person who gave the verification.

Employer Signature * _____ Today's Date*: _____