## Form 78 Verification of Income (<u>*Employee Wages*</u>)

(Date) (Employer) (Address) (Address) RE: Income Verification to Determine Eligibility for Utility Connection Assistance (Employee's name) To Whom It May Concern: The above-referenced person has applied for assistance to connect their residence to the (*Grantee*) (*Utility*) system. Funds for this connection are being provided through an Arkansas Community and Economic Development Program grant to the \_\_\_\_\_ (*City/County*). (*Name of applicant*) has authorized the (City/County) to obtain verification of income from your office. Such information will be kept in strict confidence. Please furnish the information requested below and return to me at the above address in the enclosed envelope. Sincerely, *(Grantee's representative)* (Signature of applicant) **CONFIRMATION OF WAGE EARNINGS** The income of \_\_\_\_\_ (*Name of employee*) is

\$ \_\_\_\_\_\_ per month and was \$ \_\_\_\_\_\_ during the
previous calendar year.
Signed: \_\_\_\_\_\_\_ (Name/Title)
Date: \_\_\_\_\_\_