Verification of Zero Earned Income
I,, do hereby declare that I am: Not employed, have zero earned income, and not receiving unemployment benefits at this time.
Verification of Employment
Business Name Phone Number Hire Date
currently employ Employee's First & Last Name
Gross Earned Income (\$)
☐ Weekly ☐ Bi-Weekly ☐ Twice Monthly ☐ Monthly ☐ Annually
Notarization
Printed Name
Signature Date
 Signature – document must be signed in front of the Notary and notarized Photo identification is required to be present to notary
State of County of
Signed and sworn before me, a Notary Public, this day of,,
Notary Public Signature
My commission expires