



INCOME VERIFICATION FOR VETERAN ASSISTANCE

I. CLIENT CONTACT INFORMATION

First and Last Name:

Address:

Email Address:

Phone:

II. CLIENT INCOME VERIFICATION

I _____, hereby certify that:

A. I **do not** individually receive income from **any** of the following sources:

- ☐ Wages from employment (including commissions, tips, bonuses, fees, etc.);
- ☐ Income from operation of a business;
- ☐ Rental income from real or personal property;
- ☐ Interest or dividends from assets;
- ☐ Social Security payments;
- ☐ Supplemental Security Income payments;
- ☐ Payments from annuities, insurance policies, retirement funds, pensions, or death benefits;
- ☐ Unemployment or disability payments;
- ☐ Public assistance payments (other than food stamps);
- ☐ Periodic allowances from alimony or child support;
- ☐ Gifts received from persons not comprising the household;
- ☐ Sales from self-employed resources (Avon, Mary Kay, Pampered Chef, Shaklee, etc.);
- ☐ Any other source not named above;

III. CLIENT CERTIFICATION

I certify, to the best of my knowledge, that the information presented in this certification is true and accurate.

Printed Name

Signature

Date



This program is supported by a grant from the Texas Veterans Commission Fund for Veterans' Assistance. The Fund for Veterans' Assistance provides grants to organizations serving veterans and their families. For more information, visit www.TVC.Texas.gov.