

Housing Authority of the Sac and Fox Nation

201 N. Harrison • P.O. Box 1252 • Shawnee, OK 74801 • Ph (800)831-7515 • (405)275-8200 • Fax (405)275-8203

INCOME VERIFICATION

In order to establish eligibility for occupancy of public housing, the Sac & Fox Housing Authority is required to verify the income of all tenants and household members above 18 years of age for public housing. The following has informed us that he/she is, or has within the past 12 months, been employed by your firm. Your cooperation and prompt return of the information requested below will be greatly appreciated. Such information will be held in confidence and used only by the Sac & Fox Housing Authority as legally necessary. **This can be faxed back to number above or emailed.

EMPLOYEE'S NAME:			
EMPLOYEE'S PHONE #:			
SOCIAL SERCURITY #:			
EMPLOYED FROM:		TO	
OCCUPATION/POSITION: _			
EMPLOYMENT IS: () TEM () SEA	MPORARY ASONAL	() FULL TIME () PART-TIME	
CURRENT PAY RATE: \$		PER	
EFFECTIVE SINCE:	AVERAG	E HOURS WORKED PER WE	EK:
ACTUAL EARNINGS DURING THAN 12 MONTHS:	THE PAST 12 M	ONTHS OR FOR PERIOD OF	EMPLOYMENT IF LESS
FROM:	TO:	\$	
EMPLOYER:		PHONE #:	
EMPLOYER'S SIGNATURE	:		
EMPLOYER'S TITLE:		DATE:	
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THIS DOCUMENT CAN BE FAXED OR EMAILED BACK BY THE EMPLOYER