

Template Letter Documenting Income

As part of the required documents for the Johnson County Direct Assistance Program, you may use the following template to document your current income. Income includes wages for work, but also incoming payments like Social Security or pension benefits. This document will only be used for the purpose of establishing your eligibility for the Johnson County Direct Assistance Program.

If you have an employer, please fill out the first column. If you are self-employed or unemployed, please fill out the second column.

Employment Income

Applicant Name: _____

Employer or Business Name: _____

The frequency and amount of payment is:

- Weekly _____
- Every two weeks _____
- Bimonthly _____
- Monthly _____
- Annually _____

Employer Name: _____

Employer Signature: _____

Applicant Name: _____

**Applicant Signature: _____

Date: _____

Income from Other Sources

Applicant Name: _____

Receives benefit payment(s) from: _____

The frequency and amount of payment is:

- Weekly _____
- Every two weeks _____
- Bimonthly _____
- Monthly _____
- Annually _____
- Annually no income, \$0

Applicant Name: _____

**Applicant Signature: _____

Date: _____

**Applicant must sign the letter documenting income