

<b>Notarized Statement of Earnings and Compensation</b>
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***\*\*This form should be completed by the employee, notarized, and returned to the agency\*\****

Employee Name: \_\_\_\_\_

Employee Social Security Number: \_\_\_\_\_

To Whom It May Concern:

By my signature, I certify the following information is correct:

Did you earn wages, unemployment compensation, workers' compensation, or State retirement income during the back pay period?

No

Yes. If you answered yes, please indicate below the amount earned for each. Enter \$0.00 for any earnings types that do not apply.

Earnings Type	Amount Earned
Wages	\$
Unemployment Compensation	\$
Workers' Compensation	\$
State Retirement Income	\$
<b>Total Amount Earned</b>	\$

**Note: The amount of Unemployment Compensation received will be verified with the Department of Employment and Workforce.**

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**Employee Signature**

**Date**

Witnessed before me this \_\_\_\_\_

day of \_\_\_\_\_, \_\_\_\_\_.

My Commission expires: \_\_\_\_\_

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(Notary Public Signature)