

**To Whom It May Concern:**

This letter is to verify that I have known \_\_\_\_\_ SS#: \_\_\_\_\_

And that he/she was: \_\_\_\_\_ Unemployed (not drawing benefits)

\_\_\_\_\_ Unemployed (drawing benefits)

\_\_\_\_\_ Self-Employed as a \_\_\_\_\_

\_\_\_\_\_ Employed by a company that is no longer in business. \_\_\_\_\_

From \_\_\_\_\_ to \_\_\_\_\_. To the best of my knowledge, this information is true and correct. Feel free to contact me for further information.

Relationship to the above: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**THIS FORM MUST BE NOTARIZED**

State of: \_\_\_\_\_

County: \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

(Name) \_\_\_\_\_ personally appeared before me and acknowledged that the above information was true and correct to the best of their knowledge.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Commission Expires