



# LUKEMAN PROPERTY MANAGEMENT

## VERIFICATION OF INCOME

Please provide **one** of the following forms of verification of income:

1. Copy of 2 paycheck stubs
2. Copy of award letter stating monthly award
3. Copy of bank statements with clearly marked direct deposit amount
4. Employer to complete the form below

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### (IF APPLICABLE) THIS SECTION TO BE COMPLETED BY EMPLOYER

Employer, please fill in all blanks. Enter N/A if an item is not applicable to the above employee.

Employee Name: \_\_\_\_\_ Job Title: \_\_\_\_\_

Presently Employed: Yes \_\_\_\_\_ No \_\_\_\_\_ Last Day of Employment: \_\_\_\_\_

Current Wages/Salary: \$ \_\_\_\_\_

(Circle one) hourly weekly bi-weekly semi-monthly monthly yearly other: \_\_\_\_\_

Average # of regular hours per week: \_\_\_\_\_

Overtime Rate: \$ \_\_\_\_\_ per hour Average # of overtime hours per week: \_\_\_\_\_

Commissions, bonuses, tips, other: \$ \_\_\_\_\_

(Circle one) hourly weekly bi-weekly semi-monthly monthly yearly other: \_\_\_\_\_

Additional remarks: \_\_\_\_\_

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

Date: \_\_\_\_\_ Title: \_\_\_\_\_ Company Name: \_\_\_\_\_

### Please return this form to:

Lukeman Property Management

426 S Westnedge #B

Kalamazoo, MI 49007

Phone: 269-254-8561

lukemanpropertymanagement@gmail.com