

2120 W Sims Way ♦ Port Townsend, WA 98368 ♦ (360) 385-2571
228 W 1st St, Ste F ♦ Port Angeles, WA 98362 ♦ (360) 452-4726

Energy Assistance Employer Income Statement

EMPLOYER EARNED INCOME FORM

Authorization to Release Information

Client Name: _____
Last First MI

Address: _____

1. _____

2. _____

Signature of applicant

****EMPLOYER PROVIDES INFORMATION BELOW****

Company Address: _____

Month #1 _____ Month #2 _____

Name & Title

Phone Number: _____ Date: _____

****Bring this completed form with you to your appointment****