

Income Declaration Statement

REPORTING PERIOD: _____ 20 _____
MONTH YEAR

CASE NUMBER: _____

HOME PHONE NUMBER: _____

PLEASE NOTE - ALL INCOME OTHER THAN INCOME ASSISTANCE MUST BE REPORTED. IN THE CHART BELOW, EITHER CHECK "NO" OR REPORT THE AMOUNT RECEIVED THIS MONTH FOR EACH TYPE OF INCOME. EVERY QUESTION MUST BE ANSWERED EVEN IF "NO" APPLIES.

TYPE OF INCOME	NO	MONTHLY INCOME	TYPE OF INCOME	NO	MONTHLY INCOME
Wages (before deductions)			Autopac		
Tips and Gratuities			Life/Disability Insurance		
Family Day Care Operator			Maintenance/Child Support		
Self-Employment includes: caretaking child care/babysitting commission income farm income fur/fish sales			Pension Income includes: Canada Pension Plan (retirement, disability, survivor's/orphan's benefits) Old Age Security Guaranteed Income Supp. Spouse's Allowance War Veterans Allowance Private Pension		
Back Pay/Vacation Pay					
Employment Insurance					
Workers Compensation					
Education/Training Support includes: educational bursary student loan training allowance			Property Revenue includes: boarder income roomer income property rental		
Winnings, Gifts (bingos, lotteries, slot machines)			Other Income (Specify)		

EMPLOYMENT INFORMATION:

Current occupation _____

Pay period Weekly
Monthly

Every two weeks
Twice a month

Date employment began _____

Next Pay Date _____

Number of days worked this month _____

NOTE: If the pay date is not indicated on a pay stub, please write the date you received the cheque on the pay stub.

If you left your employment this month, indicate the date your employment ended _____

Reason for leaving _____

Please attach a copy of your "Record of Employment" (separation slip) and written confirmation from Employment Insurance (EI) that you have applied for EI benefits.

