

# Confirmation of Earnings Form

## You must fill in this section

Please fill in your pay number, sign and date the form and then pass it to your employer who will fill in the necessary details.

Name	<input style="width: 95%;" type="text"/>	Case Ref.	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%; height: 60px;" type="text"/>	UPN	<input style="width: 95%; height: 25px;" type="text"/>
		Received by	<input style="width: 95%; height: 25px;" type="text"/>
		Date	<input style="width: 95%; height: 25px;" type="text"/>
Pay Number	<input style="width: 95%; height: 25px;" type="text"/>		

I give you permission to confirm the income I have earned for the last five weeks, three fortnights or two months and give the information to **The Benefits Service, Gateshead Council, Civic Centre, Regent Street, Gateshead, Tyne & Wear, NE8 1HH.**

Your Signature	<input style="width: 95%;" type="text"/>		Date	<input style="width: 95%;" type="text"/>
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## Your employer must fill in this section

Please fill in this section, giving details of your employee's pay for the last five weeks, three fortnights or two months.

Pay period	Gross earnings (before deductions)	Tax	National Insurance	Superannuation or pension contributions	Statutory Maternity Pay (not included in gross earnings)	Statutory Sick Pay (not included in gross earnings)
From						
From						
From						
From						
From						

Please give details of any changes in earnings within the last six months (such as a pay rise, loss or gain in overtime or any bonus).

**Your official stamp:** If you do not have an official stamp we need evidence to establish that you are the employer, such as self employed accounts, business rates bill or invoices.

Your Signature

Date

<input style="width: 95%;" type="text"/>
<input style="width: 95%;" type="text"/>