THREE OAKS PROPERTIES LLC VERIFICATION OF EMPLOYMENT

TO:	(Name & full address of employer)		Date:
			Manager's Name:
			Phone:
			Email:
I hereby	authorize release of my employment information	n to Three Oaks Properties LLC	, its employees, officers and agents.
	Signature of Applicant	Date	Print Name
Social Se	ecurity #:		
required email to	to provide Verification of Income for purposes <u>o ThreeOaksProperties@gmail.com.</u> The information response is important and greatly appreciated.	of qualification. Please comple	uarantor for applicant with Three Oaks Properties LLC and is ete the Employer Section of this form (below) and <u>return via</u> nfidential to satisfaction of that stated purpose only. Your
	William J. Godfrey/Property Man	ager	
	THIS SECTION	N TO BE COMPLETED B	Y EMPLOYER ONLY
			Last Day of Employment: (mm/dd/yy)
			y semi-monthly monthly yearly other
	e # of regular hours per week:		\$through/
	he Rate: \$ per hour	-	hours per week:
Shift Di	fferential Rate: \$ per hour	Average # of shift diffe	rential hours per week:
Commi	ssions, bonuses, tips, other: \$ (circle o	one) hourly weekly bi-we	ekly semi-monthly monthly other
List any	anticipated change in the employee's rate of pay	within the next 12 months:	; Effective date:
If the er	nployee's work is seasonal or sporadic, please ind	icate the layoff period(s):	
Is emplo	oyee eligible for unemployment compensation?	Yes /No If yes	, how long? How much?
Additio	nal remarks:		
	Employer's Signature	Employer's Printed Name	Date
	Employer's Title	Employer [Company] Nan	ne and Address
	Phone #	Email	

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