



SELF-EMPLOYMENT VERIFICATION FOR LOSS OF EARNINGS

This form is required if you are self-employed and lost income relating to a crime.

Required Supporting Documentation:

- A. Two (2) years of federal income tax returns, including Schedule C, for the years prior to the crime; Or
- B. If you were self-employed less than two (2) years, provide one (1) year of returns including Schedule C; Or
- C. If you were self-employed less than one (1) year, provide proof of income earned for the period immediately prior to the start of the business. VCCB may also consider contracts that were negotiated and signed prior to the crime to consider lost net income.

If you need assistance, contact our office to discuss circumstances and other forms of documentation to substantiate income.

BUSINESS INFORMATION

Business Name:

Owner Name:

Line of Business:

Business Start Date:

Regular Hours per Day:

Regular Hours per Week:

Date you were first unable to report to work:

Please indicate type of leave:

Continuous: Duration of time off work (dates): to
Intermittent/Reduced Schedule (dates): to
Off work: Hours

Describe how the crime directly impacted your ability to work:

Have you applied for or are you receiving Social Security benefits or disability benefits? Yes No

If so, how much do you receive per month?

REQUIRED: ATTACH SUPPORTING DOCUMENTATION TO SUBSTANTIATE INCOME

I attest that the information provided is accurate and true.

Name (print):

Mailing Address:

Phone:

Signature:

Date Signed: