

Beneficiary Income Verification

Date: [Insert Date]

To Whom It May Concern,

This letter is to verify the income of [Beneficiary's Name], who has been a beneficiary of [Program/Trust Name] since [Start Date]. This verification is provided for tax purposes.

Beneficiary Details:

- Name: [Beneficiary's Full Name]
- Social Security Number: [SSN]
- Address: [Beneficiary's Address]

Income Details:

- Source of Income: [Source]
- Total Annual Income: [Amount]

Please feel free to contact us at [Contact Number] or [Email Address] if further information is required.

Thank you for your attention to this matter.

Sincerely,

[Your Name]

[Your Title]

[Organization Name]

[Organization Address]

[Phone Number]