

\_\_\_\_\_  
 (unit name)  
 Main object of activity/CAEN code \_\_\_\_\_ / \_\_\_\_\_  
 CUI (Fiscal Registration Code): \_\_\_\_\_  
 No. Reg. Trade: \_\_\_\_\_  
 Tel/Fax work point \_\_\_\_\_

Registered Office: Str. \_\_\_\_\_ No. \_\_\_\_\_ Bl. \_\_\_\_\_  
 App. \_\_\_\_\_ County/Sector \_\_\_\_\_ Locality \_\_\_\_\_  
 No. employees \_\_\_\_\_  
 Tel/Fax registered office \_\_\_\_\_  
 No. Register \_\_\_\_\_ Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
 (DD/MM / YYYY)

### INCOME STATEMENT

The Commercial Company (Autonomous Kingdom, public institution) \_\_\_\_\_, through its legal representatives, hereby certify that Mr./Ms.  **indeterminate** /  **determined** until the date of \_\_\_\_/\_\_\_\_/\_\_\_\_  without previous renewal, in the position of \_\_\_\_\_, with a gross monthly employment salary of \_\_\_\_\_, having a net monthly income for the last 3 months collected:

- a. Income of the type:  Salary  
 b. Other incomes with continuity character  YES  NO representing:  
 overtime  guards  increments  primes  bonuses  incentives  others, please specify: \_\_\_\_\_

Month / Year	The gross salary received	The net salary received	Other net incomes with a continuity character, with the frequency of collection				Food norm <sup>1</sup>	Total net collected
			month	Quarterly	semester	annually		
...../20.....								
...../20.....								
...../20.....								

**The change in income compared to the previous year** (if applicable) was generated by:  Change in function;  Legislative change;  Renegotiation/Collective Decisions;  Change of work schedule;  Change of contract period (determinate → indefinite);  Expiration of the trial period;  Other (to be specified) \_\_\_\_\_

**It is completed only for Employment Contracts concluded for the determined period:**

We declare that in the Employment Contract (as modified by additional documents, if applicable), concluded for a fixed period: **There is**  **a conditional extension clause**;  **There is an Unconditional extension clause**;  **There is no extension clause**  
**Note: The conditional extension of the duration of the Employment Contract** takes into account, but is not limited to, performance indicators.

The employee benefits from meal vouchers  YES  NO, and collects on average a number of \_\_\_\_\_ vouchers per month, worth \_\_\_\_\_ Ron / meal voucher.

The employee recorded increases in income compared to the previous year  YES  NO

The gross income achieved in the previous year, including the food allowance if applicable, was \_\_\_\_\_ RON, the personal deductions granted were \_\_\_\_\_ RON, the tax calculated and withheld was \_\_\_\_\_ RON, and the number of months worked was \_\_\_\_\_ and the number of dependents of was by \_\_\_\_\_.

Salary is paid monthly on: \_\_\_\_\_ and on \_\_\_\_\_. Method of payment:  cash or  in the account opened at the Bank \_\_\_\_\_  
 The salary is burdened by monthly deductions:  NO  YES  
 The monthly amount of deductions is \_\_\_\_\_ RON;  
 We have been notified of assignments/seizures of salary rights  YES  NO

The company is:  **Of the state**  **private company with Romanian capital**  **private with foreign capital**  **private with capital mixed**  **public institution**  **multinational**.  
 The society  **is not**  **It is** in the liquidation, bankruptcy or restructuring procedure.  
 employee  **is not**  **is** registered on the list of restructured jobs / notice / trial period.  
 employee  **is not**  **It is** from the date of \_\_\_\_/\_\_\_\_/\_\_\_\_ on maternity/child-rearing leave.

This certificate was issued to our employee specified above to fulfill the capacity of borrower / co-debtor / guarantor and we assume full responsibility regarding the data mentioned in this document. We agree to confirm by telephone the employee status of Mr./Ms. \_\_\_\_\_ and the release of this certificate, identified by the number and date of registration. We confirm that the signatories of this certificate undertake our responsibility regarding the reality of the information contained therein and we sign it validly, certifying that the given signatures are those of authorized persons

Full name: \_\_\_\_\_  
 Function: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**LS**

Full name: \_\_\_\_\_  
 Function: \_\_\_\_\_  
 Signature: \_\_\_\_\_

**The food norm** : it is valid only for the categories that receive it according to the law / a special statute .