



VERIFICATION OF EMPLOYMENT

Applicant:

Lender: First State Bank
Main Branch
103 Manzanaras Ave E
PO Box Z
Socorro, NM 87801-0479

NOTICE TO EMPLOYER: This form is to be transmitted directly to Lender and is not to be transmitted through the applicant or any other party.

Part I - Request for Verification of Employment (To Be Completed by Lender)

1. To (Name and address of employer)	2. From (Name and address of lender) First State Bank Main Branch 103 Manzanaras Ave E PO Box Z Socorro, NM 87801-0479
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I certify that this verification has been sent directly to the employer and has not passed through the hands of the applicant or any other interested party.

3. Signature of Lender	4. Title	5. Date	6. Lender's Number (Optional)
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I have applied for a loan with First State Bank and have stated that I am now or was formerly employed by you. My signature below authorizes verification of this information.

7. Name and Address of Applicant (Include employee or badge number)	8. Signature of Applicant
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Part II - Verification of Present Employment

9. Applicant's Date of Employment	10. Present Position	11. Probability of Continued Employment
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12A. Current Gross Base Pay (Enter Amount and Check Period)				13. For Military Personnel Only		14. If Overtime or Bonus is Applicable, is its Continuance Likely? Overtime <input type="checkbox"/> Yes <input type="checkbox"/> No Bonus <input type="checkbox"/> Yes <input type="checkbox"/> No
<input type="checkbox"/> Annual <input type="checkbox"/> Hourly <input type="checkbox"/> Monthly <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Weekly				Pay Grade		
\$ _____				Type	Monthly Amount	15. If paid hourly - average hours per week
				Base Pay	\$ _____	
12B. Gross Earnings				Rations	\$ _____	16. Date of applicant's next pay increase
Type	Year To Date	Past Year ____	Past Year ____	Flight or Hazard	\$ _____	
Base Pay	\$ Thru _____	\$ _____	\$ _____	Clothing	\$ _____	17. Projected amount of next pay increase
Overtime	\$ _____	\$ _____	\$ _____	Quarters	\$ _____	
Commissions	\$ _____	\$ _____	\$ _____	Pro Pay	\$ _____	18. Date of applicant's last pay increase
Bonus	\$ _____	\$ _____	\$ _____	Overseas or Combat	\$ _____	
Total	\$ _____	\$ _____	\$ _____	Var. Housing Allowance	\$ _____	19. Amount of last pay increase

20. Remarks (If employee was off work for any length of time, please indicate time period and reason)

Part III - Verification of Previous Employment

21. Date Hired	23. Salary/Wage at Termination Per (Year) (Month) (Week)			
22. Date Terminated	Base _____	Overtime _____	Commissions _____	Bonus _____
24. Reason for Leaving	25. Position Held			

The confidentiality of the information you have furnished will be preserved except where disclosure of this information is required by applicable law. The form is to be transmitted directly to the lender and is not to be transferred through the applicant or any other party.

26. Signature of Employer	27. Title (Please print or type)	28. Date
29. Print or type name signed in Item 26	30. Phone No.	