STATE OF CALIFORNIA

HOW TO APPLY FOR INCOME AND SUPPORT LOSS

CalVCB may reimburse an applicant for loss of income or support. Although your application may have been found eligible, not all applicants qualify for the income or support loss benefits. To determine if the loss of income was a direct result of the crime, certain documentation is required.

Please read these instructions carefully and provide the requested information to assist CalVCB staff in verifying your request.

1. A written request or renewal

To be considered for income or support loss, CalVCB must receive a written request signed by the applicant. If the income loss continues, a new request must be submitted every six months unless the victim is permanently disabled. CalVCB may accept a request or renewal in either of the following ways:

- ☐ A completed and signed **CalVCB Income/ Support Loss Request Reply form**.
- ☐ A signed written statement by the applicant containing all the same information that is on the **CalVCB Income/Support Loss Request Reply form**. This statement must be signed under penalty of perjury.

2. Disability Statement

CalVCB will need to verify the victim's disability period using one of the following:

- ☐ A completed **CalVCB Disability Statement for Income Loss Authorization form** signed by the victim's treating medical or mental health provider.
- ☐ A statement on the treating medical or mental health provider's letterhead containing all the same information requested in the **CalVCB Disability Statement for Income Loss Authorization form**. The statement must be signed under penalty of perjury by the treating provider.

- ➤ CalVCB cannot create a bill for income or support loss without a written request and disability statement on file.
- ➤ Before CalVCB can review a request for income or support loss, we must confirm that the victim was working or had a job offer at the time of the crime.

See the next page for a list of documents that can be used to verify the victim's employment.

3a. Verification documents for employed individuals

One of the following must be submitted by the employed victim to demonstrate eligibility for income or support loss:

- At least one month of ***Wage Statements/Paystubs*** for the pay periods immediately prior to the disability period,
- At least one month of ***Employer Payroll Records*** for the pay periods immediately prior to the disability period, or
- At least one month of ***Bank Records*** reflecting deposits were made from the employer for the month immediately before the disability period.

When one of the above verification documents is received along with the disability statement, CalVCB will attempt to obtain one of the following:

- Tax Returns for the year the crime occurred or the tax year prior,
- EDD Employment Documentation reflecting the victim's employment in the year the crime occurred or the tax year prior, or
- **Employer Verification Reply Form** – a statement from the employer confirming employment information and time missed from work.

** **Please note:** CalVCB will try to get these documents but sending them in may help speed up your claim. If you send tax returns, you must also show proof that they were filed. This can include a receipt from a tax preparer, proof of a refund, or copies of receipts, cashed checks, or money orders that match the amount due on the return.*

3b. Verification documents for self-employed individuals

To verify income for self-employed individuals, CalVCB will use Line 31 of the Form Schedule C. This is obtained from Tax Returns from the year the crime occurred or the tax year prior.

- For a victim's survivors or dependents to be considered for support loss, the following documents may be submitted to verify legal dependency: birth certificates, marriage certificates, voluntary declarations of parentage/paternity, certificate of domestic partnership, adoption records, child support records, orders granting legal custody, income tax records, Social Security disability or survivor benefits, veteran's death benefits, workers' compensation disability or death benefits, or any court order finding legal dependency or ordering support.

**If you have received this information by mail, the required forms should be included in your packet. If not, the forms can be obtained on our website at www.victims.ca.gov.*

Mail the completed documents to:
California Victim Compensation Board
P.O. Box 3036 Sacramento, CA 95812-3036

Or send by fax:
1-866-902-8669

If you have any questions or need assistance, please feel free to contact us at 800.777.9229, Monday through Friday between the hours of 8 a.m. and 5 p.m.