

Employer's Certificate of Earnings

A condition for the validity of the employer's certificate is that all fields be completed, the certificate be officially signed by the Employer, and that it include the Employer's confirmation on the contents and authenticity of the certificate.

DETAILS OF THE EMPLOYER

Employer's name: Employer's webpage:

Employer's registered office: post code town/city

street house number, entrance number floor door number

Employer's telephone number*: extension Employer's tax number:

Main activities of the company: Industry, manufacturing Agriculture Construction industry Trade, hospitality, communication, transportation, travel

Financial services, legal and related services, other advisory activity

Healthcare, education, government, social care, local government Other:

The business is under liquidation, bankruptcy, or dissolution: Yes No

*Please, provide an employer's phone number which is public (e.g. on the public website of the company, through directory enquiry services or from public company data available)

DETAILS OF THE EMPLOYEE

Name:

Name at birth:

Mother's maiden name:

Place of birth: Date of birth: year month day

Employee's position: senior manager middle manager other white-collar employee blue-collar employee

Start of employment: year month day Nature of employment: full-time part-time Employee's job title:

Type of employment: open-ended fixed-term, end of contract: year month day

Employee is working in probationary period: Yes No End of probationary period: year month day

Employee is working under notice: Yes No Start of the notice period: year month day

Employee was incapable of work in the last 2 months: Yes No If yes, the beginning of it: year month day The end of it: year month day

NET EARNINGS DATA (FIGURES FOR THE LAST 3 MONTHS)

Currency: <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> year <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> month
Monthly net salary (without supplements, daily expense allowance, deductions):	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Title of regular monthly supplements (net): <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Other non-regular supplements (net): <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Variable wage, commission, performance wage (net): <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Daily expense allowance (net): <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Deductions or dockings from wages: <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Employer's loan, salary prepayment: <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Monthly transferred / paid salary <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Reasons for any difference(s) (e.g. reimbursement) : <input type="text"/>	Amount	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Any payment in cash? <input type="checkbox"/> Yes <input type="checkbox"/> No Net annual amount of Cafeteria benefits allowance: Amount <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

BONUS, PREMIUM, REWARD PAID OUT IN THE PAST 12 MONTHS

Number of bonus/premium/reward payouts in the past 12 months: Net amount of bonus/premium/reward paid out in the past 12 months:

CERTIFICATE

Name of company that does the payroll (if different from the Employer):

Name of person responsible for completing the form/who may be contacted if there are any questions:

Workplace telephone number of person responsible for completing the form: extension E-mail address:

This certificate has been issued at the request of the employee, in connection with his/her loan application submitted to Raiffeisen Bank. In full knowledge of my/our responsibility under criminal law, I/we declare, that the details stated in this certificate are correct, and that the prescribed taxes and contributions have been paid in respect of the certified earnings stated herein.

Place: Date: year month day Employer's official corporate signature

CONSENT TO DATA RECONCILIATION BETWEEN THE EMPLOYER AND THE BANK

I voluntarily agree and at the same time give and grant authorisation to my Employer named in the loan application to provide the information necessary for the purpose of credit assessment to the credit administrator of Raiffeisen Bank Zrt. via the means of the Bank's choice (phone, fax, email). Furthermore, by this declaration, I hereby release the Bank from the obligation of confidentiality relating to my data contained in the loan application and which are considered bank secrets, and authorise the Bank to disclose such data to my Employer to the extent necessary to verify the details relevant to my employment (including those shown in the employer's certificate).

DECLARATION ON THE AMOUNT OF ANY FAMILY SUPPLEMENT

I, the undersigned employee, declare that the amount of the family supplement disbursed to

Employee's signature