ANNUAL ACTIVE INCOME DECLARATION

TAX YEAR: 20_____

1. DECLARANT PERSONAL INFORMATION

Full Name: _____

Tax Identification Number: _____ **Social Security Number:** _____

Residential Address: _____

Phone Number: _____ **Email Address:** _____

2. SOURCES OF ACTIVE INCOME

Income Source / Employer / Business Name	Gross Amount	Expenses / Deductions	Net Active Income
Total Active Income:			

3. SOLEMN DECLARATION

I hereby declare under penalty of perjury that the information provided in this Annual Active Income Declaration is true, correct, and complete to the best of my knowledge and belief. I understand that any false statements or misrepresentations made herein may subject me to legal and administrative penalties under applicable laws.

_____ _____

Declarant Signature Date (DD / MM / YYYY)