AFFIDAVIT OF TAX-EXEMPT INCOME

STATE OF _____

COUNTY OF _____

I, _____, residing at _____

having been duly sworn, hereby depose and state under penalty of perjury:

1. I am submitting this affidavit to document and verify my sources of tax-exempt income for the tax year ending _____.

2. I receive income from the sources described below, which are legally exempt from federal, state, and/or local taxation under the applicable provisions of the internal revenue laws.

3. The following is a true, accurate, and complete statement of the tax-exempt income received by me during the period specified:

Source of Income	**Exempt Amount ($)**	**Tax-Exemption Authority / Code**

4. I have attached supporting documentation (e.g., statements, letters, or official notices) corresponding to each of the tax-exempt income sources listed above to the extent such documentation is available.

5. I declare under penalty of perjury under the laws of the United States of America and the State of _____ that the foregoing statements and information are true, correct, and complete to the best of my knowledge, information, and belief.

_____ _____

Affiant Signature Date

Print Name: _____

NOTARY ACKNOWLEDGMENT

Subscribed and sworn to (or affirmed) before me on this _____ day of _____, 20 _____, by _____, proved to me on the basis of satisfactory evidence to be the person who appeared before me.

(Place Seal Here)

_____

Notary Public Signature

My Commission Expires:

_____