

TAXABLE EARNINGS DECLARATION FORM

Statement of Taxable Income and Earnings

DECLARANT INFORMATION

Full Name:

Tax Identification Number (TIN):

Address:

Tax Year / Period:

Contact Number:

EMPLOYER / PAYOR INFORMATION

Employer Name / Company:

Employer Identification Number (EIN):

Employer Address:

STATEMENT OF EARNINGS

Earnings Category	Gross Amount	Taxable Amount
Basic Salary / Wages		
Overtime Pay		
Bonuses & Commissions		
Allowances (Taxable portion)		
Other Taxable Benefits / Compensation		
Total Taxable Earnings		

DECLARATION & AUTHORIZATION

I hereby declare and certify under penalty of perjury under the applicable laws that this statement of taxable earnings, including any accompanying schedules and statements, has been examined by me, and to the best of my knowledge and belief, is a true, correct, and complete declaration of all taxable earnings received during the specified tax period.

Declarant Signature

Date

Authorized Representative / Witness Signature

Date