

## **DECLARATION OF INCOME**

I,	, with BEREA number			
	(Full name and Surname)			
and ID no:		declar	declare to BEREA that:	
(Tick the	e appropriate box)			
	My only source of income is from BEREA			
	I am also employed with (name of agency) and BEREA is my primary source of income			
	I am also employed with (name of agency) and BEREA is my secondary source of income			
	I am permanently employed at (name of employer) and BEREA is my secondary source of Income			
and corr should r	ormation furnished by me or rect. I understand that it is n my employer or employmen uences of me not divulging t	ny responsibility to t status change ar	notify BEREA nd I also unders	in writing
Signed a	at(place)	on (day)	(month)	20
Assigne	e	BERE	A representativ	 e