

## REPUBLIC OF KENYA THE PUBLIC OFFICER ETIHCS ACT, 2003 (No. 4 of 2003)

## Declaration of Income, Assets & Liabilities (section 26)

1.	Nam	Name of the Public Officer					
(Surn	ame)	(First name)		(Other names)			
2.	Birth Information						
	a.	Date of birth					
	b.	Place of birth					
3.	Mari	rital Status					
4.	Address						
	a.	Postal address					
	b.	Physical addr	ess				
5.	Employment Information						
	a.	Designation _					
	b.	Name of Emp	oloyer				
	c.	Nature of employment (permanent, temporary, contract, etc)					
	d.	T.S.C. No					
	e.	School/Institution					
	f.	District					
6.	Nan	Name of spouse of spouses					
(i)	(Suri	name)	(First name)	(Other names)			
(ii)	(Surname)		(First name)	(Other names)			

iii)	(Surname)	(First name)	(Other names)	
(iv)	(Surname)	(First name)	(Other names)	
(v)	(Surname)	(First name)	(Other names)	
(vi)	(Surname)	(First name)	(Other names)	
(vii)	(Surname)	(First name)	(Other names)	
7.	Name of depend	ent children under the ag	es of 18 years	
(i)	(Surname)	(First name)	(Other names)	
(ii)	(Surname)	(First name)	(Other names)	
(iii)	(Surname)	(First name)	(Other names)	
(iv)	(Surname)	(First name)	(Other names)	
(v)	(Surname)	(First name)	(Other names)	
(vi)	(Surname)	(First name)	(Other names)	
(vii)	(Surname)	(First name)	(Other names)	
(viii)	(Surname)	(First name)	(Other names)	
(ix)	(Surname)	(First name)	(Other names)	
8.	Financial statem	ent for		

(A separate statement is required for the officer and each spouse and dependent child under the age of 18 years. Additional sheets should be added as required)

a. Statement date	
(Statement date is the first day of the month pre	ceding the month in which the declaration is due.)
b. Income, including emoluments, for the period	d from
tc	)
(Including, but not limited to, salary and emolu	ments and income from investments, the period is
from the previous statement date to the current s	statement date. For an initial declaration, the period
the year ending on the statement date.)	
Description	Approximate amount
the person for whom the statement is made)	chicles, investments and financial obligations owed t
Description	Approximate amount
(Including the location of asset where	
applicable)	

d. Lia	Liabilities (as of the statement date)			
Description	n	Approximate amount		
0 01				
9. Oth	ner information that may be useful or	relevant		
I solemnly	y declare that the information I	have given in this declaration is, to the best of		
my knowl	ledge, true and complete.			
Signature of	of Officer:			
Date:				
Witness:				
	Signature:			
	Name:			
	Address:			