MODEL PROFORMA FOR INCOME CERTIFICATE

(In case of non-salaried Parent/ Guardian)

(To be given by any Govt. Officer not below the rank of Jt. B.D.O. in case of rural areas /Executive Officer in case of Municipality/Deputy Commissioner of Corporation/Group –A Gazetted Officer)

I Certify to the best of r	ny knowled	dge t	hat	Shri	/ Kum	nari /s	Smt.					
son/daughter/wife of Sri	resident of Village / Town :											
P.S	District	:					i	is	known	to	me	for
(Years/N	Months).											
His/Her father/Guardiar P.S.	n/husband 											vn : State
The total annual parents/Guardian/Husband/Stud	family ent for the										oth	the
Place :								(Sig	nature)			
Date :						N	ame (me (in Block Letters)				
					Full	Addr	ess:		signatio	,		
N. B. In case of salaried person/	guardian s	alarv	cer	tificat	 — e of th				authorit			_

submitted.