

NATIONAL POLICE SERVICE COMMISSION

Declaration of Income, Assets & Liabilities (The Public Officer Ethics Act, 2003)

1.	1. Name of the Public Officer:			
	(Surname)	(First Name)	(Other Names)	
2.	Birth Information:			
	a. Date of Birth:			
	b. Place of Birth:			
3.	Marital Status:			
4.	Address:			
	a. Postal Address:			
	b. Physical Address:			
5.	Employment Information:			
	a. Employment No.:			
	b. Designation:c. Name of Employer:			
	d. Nature of Employment (P	ermanent, temporary, contra	ct, etc)	

6. Name of Spouse or Spouses: (i) (First Name) (Surname) (Other Names) (ii) (Surname) (First Name) (Other Names) (iii) (Surname) (First Name) (Other Names) (iv) _____ (First Name) (Other Names) (Surname) (y) (Surname) (First Name) (Other Names) (Attach additional list if necessary and state the names of your spouse(s) as appropriate) 7. Name of dependent children under the age of 18 years (i). (Surname) (First Name) (Other Names) (ii) (Surname) (First Name) (Other Names) (iii (Surname) (First Name) (Other Names) (iv) (First Name) (Surname) (Other Names) (y) (Surname) (First Name) (Other Names) (vi) (Surname) (First Name) (Other Names) (vii) (Surname) (First Name) (Other Names)

	3. Financial Statement for				
a. Statement Date	a. Statement Date				
b. Income, including emoluments, for	b. Income, including emoluments, for period from:				
	to				
	and emoluments and income from investments. ment date to the current statement date. For an ar ending on the statement date.)				
Description	Approximate Amount				
c. Assets (as of the statement date) (Including, but not limited to, land, obligations owed to the person for who	buildings, vehicles, investments and financial om the statement is made.) Approximate				
(include location of asset where applicable)	Amount				

d. Liabilities (as of the statement date)

(State all particulars of your liabilities as at the statement date and attach a separate sheet of the liabilities of your spouse(s) and dependent children under the age of 18 years prepared in a similar way)

Description		Approximate Amount
		1
9. Other information	that may be useful or rele	vant:
(State any useful or rexplanations)	elevant information relatir	ng the financial declaration including useful
I solemnly declare the knowledge, true and		e given in this declaration is, to the best of my
Signature of officer:		
Date:		
Witness:		
Signature:		
Name:		
Address:		

(The witness is any willing adult of sound mind. Do not use a child as a witness. The witness need not be your supervisor or a colleague at work. The witness should see you affixing your signature i.e. to witness the signing).