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# Self Declaration Statement for Income

**I. Introduction** [Your Name] issues this Self Declaration Statement to transparently declare all sources of income and financial standings. This document confirms [his/her] financial responsibility and integrity.

## II. Income Information

- **Primary Source of Income:** [Your Primary Job/Activity]
- **Secondary Sources of Income:** [Any Secondary Sources]
- **Annual Income:** [Your Total Annual Income]
- **Additional Financial Benefits:** [Any Other Benefits, e.g., Bonuses, Stock Options]

## III. Declarations

- **Financial Support:** [State if you provide financial support to anyone]
- **Debt Status:** [Outline of any Outstanding Debts]
- **Investment Details:** [Brief on Investments]

**IV. Conclusion** By issuing this Self Declaration Statement for Income, [Your Name] affirms the accuracy and completeness of the information and commits to updating the document as necessary.

**Signature** [Your Signature] [Date]

**Self Declaration Statement for Health**

**I. Introduction** This Self Declaration Statement issued by [Your Name] transparently shares [his/her] current health status and medical conditions to ensure all related parties are informed of [his/her] well-being.

## **II. Health Information**

- **General Health Status:** [Your General Health Description]
- **Known Medical Conditions:** [List of Known Conditions]
- **Medications:** [Medications You Are Currently Taking]
- **Allergies:** [List any Allergies]

## **III. Declarations**

- **Recent Hospitalizations:** [Any Recent Hospital Visits or Treatments]
- **Disability Status:** [Any Disabilities]
- **Health Insurance:** [Information About Your Health Insurance]

**IV. Conclusion** By issuing this Self Declaration Statement for Health, [Your Name] commits to the accuracy of the information and pledges to update it should there be any significant changes to [his/her] health.

**Signature** [Your Signature] [Date]