

COUNTY GOVERNMENT OF WAJIR



Declaration of Income, Assets & Liabilities

The Public Officer Ethics Act, 2003

1. Name of the Public Officer

(Surname)	(First Name)	(Other Name)
_____	_____	_____

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 (Permanent, Temporary, Contract e.t.c)

6. Name of Spouse or Spouses

(Surname)	(First Name)	(Other Names)
(i) _____	_____	_____
(ii) _____	_____	_____
(iii) _____	_____	_____

(Surname)

(First Name)

(Other Names)

(iv) _____

(Surname)

(First Name)

(Other Names)

(v) _____

7. Name of dependent children under the age of 18 years

(Surname)

(First Name)

(Other Names)

(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)

8. Financial Statement 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: _____

b. Income, including emoluments, for period from _____ to _____

(Including, but not limited to, salary and emoluments and income from investments. The period is from the previous statement date to the current statement date. for an initial declaration, The period is the year ending on the statement date.)

Description	Approximate Amount

c. Assets (as of the statement date)

(Including, but not limited to, land, building, vehicles, investments and financial obligations owed to the person for whom the statement is made)

Description (including location of assets where applicable)	Approximate Amount

Liabilities (as of the statement date)

Description	Approximate Amount

9. Other information that may be useful or relevant:

I solemnly declare that the information I have given in this declaration is, to the best of my knowledge, true and complete:

Signature of officer: _____

Date: _____

Witness:

Name: _____

Signature: _____

Address: _____