SWORN DECLERATION AND WAIVER OF RIGHT TO CLAIM EXEMPTIONS OF QUALIFIED DEPENDENT CHILDREN

In a Mr	ccordance with the provision	ns of Section 29 (1) (2) (A) of	the National Internal Revenue Code, as amended, I, hereby voluntarily depose and say:
Name o	 That we file a joint in That I am a (check p That this waiver will unless sooner revoke That I hereby waiver my wife presently en of wife's employer 	be effective for the taxable yeard; my right to claim the additional aployed with:	aged in business; practice profession; r and shall continue for the succeeding years l exemption for all our qualified children in favor of
TIN of	employer	Tel No	Fax No
	Name of qualified o	lependent child(ren)	Date of Birth (mm/dd/yyy)
1	Name of qualified t	icpendent cinia(ren)	Bate of Birth (min/da/yyy)
2			
3			
4			
	t is voluntarily and knowingl		resentations are true and correct and that the waiver provisions of the National Internal Revenue Code, as
(Signat	ture of husband over printed	name) TIN	Date
	ACKN	OWLEDGEMENT OF HUSI	BAND'S EMPLOYER
Name o	of husband's employer		
Address of employer			
TIN of	employer	Tel No	Fax No
(Signature over printed name of husband's employer/ Chief Accountant/ Head, Personnel Office)			Date (mm/dd/yyy)
	ACI	KNOWLEDGEMENT OF WI	FE'S EMPLOYER
This i		in	right to claim additional exemptions of Mr. favor of his wife Mrs/Ms. im the additional exemptions for all their qualified
childre	n effective	who shall be childed to cla	
	(Month)	`	ble year)
Name o	of wife's employer		
Addres	s of employer		
TIN OI	employer	1ei No	Fax No
(Signature over printed name of wife's employer/ Chief Accountant/Head, Personnel Office)			Date (mm/dd/yyy)
Note:	Must be signed by both er respective employer.		Acknowledgement of Husband's Employer. efore effecting changes in the payroll of their . 1902.