

STATEMENT OF GROSS INCOME

Section 196.101(4)(c), Florida Statutes

DR-501A R. 06/94

This statement must be completed and signed by applicants for the Exemption for Totally and Permanently Disabled Persons, Section 196.101, Florida Statutes, and attached to the exemption application.

Name of all persons residing in o	or upon homestead for which	h exemption is requested.	
			2.1()
Gross income: include that of a Income Statement(s) (W-2) for al		ch prior year Federal Income Tax F	Return(s) and wage and
Gross Income:			
Earned Income	\$	Veterans Administration Benefits	\$ \$
Income from investments Gains Derived from Disposition of Appreciated Property	\$	Income from Retirement Plans	\$
	\$	Pensions	\$
Interest	\$	Trusts	\$
Rents	\$	Estates	\$
Royalties	\$	Inheritances	\$
Dividends	\$	Direct and Indirect Gifts	\$
Annuities	\$	Other (Specify)	\$
Social Security Benefits	\$	Total Gross Income	\$
I certify that the above Statemer	nt of Gross Income is true an	nd correct to the best of my knowle	edge and belief.
		Applicant	
State of Florida County of			
The following instrument	t was sworn to and subsc	ribed before me this date	date
by	who is personally known to me or who has producedtype of ID		
as identification.			type of ID
		Notary Public Signature and Seal	