



Attention:
This form is to be filled by family members
who are not employed, self-employed
or employed without a **payslip**

**INCOME DECLARATION FORM
APPLICATION OF ZAKAT UKM AID (TAZUKM)**

Name and Applicant's Address

Date : _____

آلله أكبر على كل شيء وآلله وحده
الذي لا اله الا هو
الذي لا اله الا هو
الذي لا اله الا هو

INCOME DECLARATION

Name (Applicant/ Guardian) :	_____	Name (spouse) :	_____
Identity Card No./ Passport No. :	_____	Identity Card No./ Passport No. :	_____
Occupation :	_____	Occupation :	_____
Monthly Income :	_____	Monthly Income :	_____

I declare that the information provided above is true and accurate and I acknowledge that TAZUKM reserves the right to vary or reverse any decision regarding the Zakat aid offered on the basis of incorrect or incomplete information provided by myself.

Yours faithfully

Signature

Signature

CERTIFICATION OF INCOME

I certify that all of the information above is true and accurate.

Name : _____
Identity Card No. : _____
Position : _____
Phone No. : _____
Date : _____

Signature and Designation Stamp

"And among them are men who slander thee in the matter of (distribution of) alms, if they are given part thereof, they are pleased but if not, behold! they are indignant"