



Town of Coventry

FINANCE DEPARTMENT • OFFICE OF THE ASSESSOR

Kerrin Martini • Tax Assessor

1670 Flat River Road • Coventry, RI 02816

401-822-9163 • kmartini@coventryri.gov

Confidential Statement of Annual Income

Name: _____

Phone: _____

Property location: _____

List all residents of this property, including yourself:

1 _____

2 _____

3 _____

4 _____

List income from each resident:

Income Type	Person 1	Person 2	Person 3	Person 4
Wages, salaries, tips, etc.				
Dividends, interest				
Social Security				
Pensions, annuities, IRAs				
Capital gains, gifts, inheritances				
Other income				
Total annual income				

Grand Total Household Income from ALL residents: \$ _____

I, the undersigned, do hereby swear or affirm under penalty of perjury, that the above information is true, correct, and complete to the best of my knowledge and belief.

Signature: _____

Date: _____

Witness: _____

Date: _____

Witness: _____

Date: _____

State of _____

County of _____

On this ____ day of _____, 20__, before me, the undersigned notary public, personally appeared _____ (name of document signer), personally known to the notary or proved to the notary through satisfactory evidence of identification, which was _____, to be the person whose name is signed on the preceding or attached document in my presence.

Seal

(official signature of notary)