

District of Columbia Retirement Board (DCRB) Benefits Department

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Affidavit of IRS Non-Filing

Tax real Ulider Review. 2020			
I,	rs' Retirement Plan ("Plan") and	d am under age fifty (
I understand that I am required to suinformation as requested by the Distric			
I hereby certify that I did not and was no	ot required to file a Federal inco	me tax return for the	tax year under review.
I understand that any willful falsificatio retirement annuity.	n of information contained in t	his Affidavit may resu	ult in termination of my disability
I certify under penalty of perjury under true and correct.	the laws of the Federal and D	istrict of Columbia go	overnments, that the foregoing is
Member's Signature (Must sign in the presence of a Notary Public)		Date	
Member's Printed Name	******	داد	
	******	*****	
Notary Public Verification			
STATE OF	COUNTY OF		
Before me, a Notary Public, on this day personally name is subscribed to the foregoing instrument ar	appeared nd acknowledged to me that s/he execu	Ited the same for purposes	known to me to be the person whose and consideration therein expressed.
Given under my hand and seal of office this	day of	, 20	
			(SEAL)
Signature of Notary	Commission Expires		

