



# STATEMENT OF ADDITIONAL DEPENDENTS

***Office of the City Clerk - City of Boston***

Our f qo gwle'f ct vpgt uj k'''(cj qqug appropriate term) now includes the following additional dependents:

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I declare that to the best of my knowledge that the foregoing statements are true and accurate under the pains and penalties of perjury.

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

