Disabled or Incompetent Person Care Allowance Credit

Under Notification of the Director-Government of Revenue Department on Income Tax (No. 182)

1. I (Name-Surname)	Personal Identification No.								Щ	
(Required if no personal identification no.)	Taxpayer Identification No). <u> </u>								
Address										
is a care taker under 1.1 and/or 1.2 and is certifi	ed to care allowance in filing Personal	Incom	ie Tax	returr	ı for y	ear ()
1.1 Disabled person who has disabled person ID exceed 30,000 Baht and specify taxpayer's					-					
(1) (Name-Surname of disabled person)	-				ППОП	matioi			. Tollar	
Relationship with taxpayer * 1 2		, —				.	_11			
(2) (Name-Surname of disabled person)		-	-		ШН			<u></u>		Н
1.2 Taxpayer is entitled to allowance in the follo	wing case - Must be Incompetent Pe	erson f	or at 1	east 1	80 da <u>y</u>	ys				
- has Medical Certificate issued in tax year the allowance is claimed										
	- has Incompetent Persor	care (Certific	cate (i	ລ.ຍ. 0	4-1)				
(1) (Name-Surname of disabled person)	Personal Identification N	o. 🔃								
Relationship with taxpayer * 1 2	3 4 5 6 7 8 9									
(2) ((Name-Surname of disabled person) Relationship with taxpayer * 1 2		_	НП			-		<u></u>	-	-
lø. I have taken care of disabled or incompetent pe	rson under1.1 and/or1.2 totalp	erson(s	s) allo	wance	e per p	erson	60,000	Baht *	:	
Total allowance	Baht (to be filled in ภ.ง.ค.90 form No. 9	5. or	ภ.ง.ค.9	01 for	m C :	5.)				
* where taxpayer is husband or wife, entitled to	deduct allowance for children who is	a disa	ble or	incon	npeten	t perso	on marri	ed for	the w	/hole tax
year and wife file separate tax return under section	40(1) under the Revenue Code. Husbar	nd and	wife i	s entit	le to c	deduct	allowar	ice 30,	,000 B	aht each
under section 57 quinque (2) of the Revenue Code										
I here	eby certify that all items are true									
Signed	I	.Taxpa	ıyer wl	no ent	itled t	o dedi	ıct allov	vance		
	(DD/MM/YYYY)									
Notice* Mark X for status of disabled or incomp	etent person									
husband/wife of taxpayer 4	father of husband/wife of taxpayer	7	legitin	nate cl	nild of	f husba	and/wife	of tax	apayer	•
2 father of taxpayer 5	mother of husband/wife of taxpayer	8 a	dopted	d child	l of ta	xpaye	r			
3 mother of taxpayer 6	legitimate child of taxpayer	=	other							