

**Declaration of Minor Regarding Eligibility for Dependent Child Exemption
under Section 390.01114(3)(b)(4), F.S.**

I, _____, declare
as follows:

1. I am a minor who is less than 18 years of age.
2. On _____, I gave birth to a boy/girl,
in the city and state of

at the following
location _____
3. The child is my dependent.

I state that according to my best knowledge, information and belief, the above
information is true, accurate and correct.

Signature of
Minor _____

Printed Name of
Minor _____

Dated on _____ in _____
County, FL