AFFIDAVIT

PERSONAL PARTICULARS OF THE DECLARANT		
Full Names and Surname		
ID No.:	Age:	years
Residential Address:		
Tele	ephone No.:	
Work		Address
Tele	phone No.:	
Occupation: Gender		
DECLARATION		
l,(full names) is	an adult male/female	(delete whicheve
not applicable), agedyears,		
DECLARE UNDER OATH AS FOLLOWS:		
I am employed/unemployed (delete whichever is not	applicable).	
If employed, state the name and adress of the emplo	yer	
I have no hesitation in stating my monthly income deriving from the following source/s:	as follows:	(in rands)
Formal employment/self-employment/remittances fro (delete whichever is not applicable) State other	m family member/s or r	elative/state gran
I am familiar with and understand the content of the c I have no objection to taking the prescribed oath. I regard the oath as binding on my conscience.	path.	
Place:	Date:	
Signature of deponent:		
The affidavit was made on this, taken in my presence a		
Signature of COMMISSIONER OF OATHS		