SUID-AFRIKAANSE POLISIEDIENS



SOUTH AFRICAN POLICE SERVICE

AFFIDAVIT

NAME(S): EONARD	SU	RNAME: MATENCIA
ID NO/PASSPORT NO: 6300	1065352188	GENDER MALE/FEMALE
RESIDENTIAL 8843 O	DESSA CRE	8 COSMOCITY 8x17
WORK ADDRESS: SAME		
CONTACT: 0739810	637 CELL NO:_	0739810637
I WITH THE ABOVE INFORMATION WOULD LIKE TO STATE UNDER OATH THAT: / AM A 14EN171945		
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I KNOW AND UNDERSTAND THE CONTENT I HAVE NO OBJECTION IN TAKING THE PR I CONSIDER THE PRESCRIBED OATH TO B	RESCRIBED OATH	SUID-AFRIKAANSE POLISIEDIENS GEMEENSKAPDIENSSELTRUM
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DEPONENT SIGNATURE)`	SOMMUNITY SERVICE CENTRE
I CERTIFY THAT THE ABOVE STATEMENT KNOWS AND UNDERSTAND THE CONTEN DEPONENTS SIGNATURE WAS PLACED IN	TS OF THIS STATEMENT THIS ST.	THE DEPONENT HAS AKNOWEED SE THAT HE ATEMENT WAS SWORN BEFORE ME AND THE
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ADDRESS: CNR GARDENIA AND ORCHID STREET KINROSS