



I CERTIFY THAT THIS DOCUMENT IS A TRUE REPRODUCTION (COPY) OF THE ORIGINAL DOCUMENT WHICH WAS HANDLED TO ME FOR AUTHENTICATION. I FURTHER CERTIFY THAT FROM MY OBSERVATIONS AN AMENDMENT OR A CHANGE WAS NOT MADE TO THE ORIGINAL DOCUMENT.

Signature: *[Signature]*
RANK: *[Signature]*

FORCE NUMBER: _____
NAME IN PRINT: *[Signature]*

SOUTH AFRICAN POLICE SERVICE
EKURHULENI DISTRICT
25-10-2022
COMMUNITY SERVICE CENTRE
ACTONVILLE
SUID-AFRIKAANSE POLISIEDIENS