



AMAPOLISA OMEZANTSI AFRICA

PROOF OF ADDRESS

Name (name & surname) : Refiloe Mbeki  
 Address : P.O Box 196 Nxaxolo Sautana Idutywa E.C 5000  
 Identity number : 0602130802088  
 Employed as : N/A  
 At : N/A  
 Declares under oath/affirm (scratch one)  
 I am staying at : P.O Box 196 Nxaxolo Sautana Idutywa E.C 5000  
 Since : 2006/02/13 Till: 2024  
 I am staying with (if applicable) : Ndumiso Mtsali

I know and understand the contents of this statement  
 I have no/ have objection in taking the prescribed oath  
 I consider / do not consider the prescribed oath to be binding on my conscience

MFULENI

DATE : 2024/10/08  
 Time : 16:00

*[Signature]*  
 Signature

I certify that the above statement was taken by me and that the above deponent acknowledge that he/she understands the content thereof and that the statement was sworn/affirmed before me and that the deponent's signature was placed thereon in my presence at MFULENI SAPS on (date)..... (time).....

*[Signature]*  
 FULL SIGNATURE  
 COMMISSIONER OF OATH

SUID-AFRIKAANSE POLISIE DIENS  
 SAPS MFULENI FULL NAME AND SURNAME : *[Signature]*  
 08 OCT 2024 ADDRESS: MFULENI SAPS  
 EERSTERIV WAY  
 BLUE DOWNS  
 7700  
 SOUTH AFRICAN POLICE SERVICE RANK: *[Signature]*