

SWORN AFFIDAVIT

Full names:	Najwa Adams
ID number:	7212110248089
Address:	1 Swallow street, Ndabeni
Cell number:	062 008 9619
Race:	Coloured
Gender:	Female
Age:	50

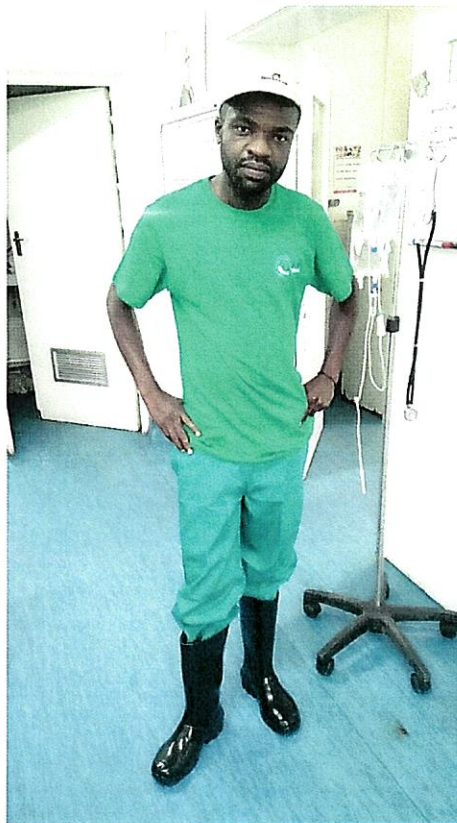
I Najwa Adams state under oath and in English that:

1.

The facts contained in this affidavit fall within my personal knowledge unless indicated otherwise or unless it appears so from the context. The facts are also, to the best of my knowledge and belief, both true and correct.

2.

I hereby confirm that I have identified the suspect below in the photograph as Mr Arlove Illunga. He is the person who performed surgery on my cat on 12 July 2023 at my place of residence, being 1 Swallow street, Ndabeni.

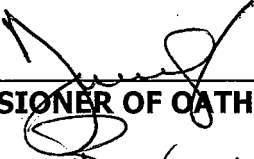


3.

**I know and understand the content of this declaration.
I have no objection to taking the prescribed oath.
I consider the prescribed oath to be binding on my conscience.**

DEPONENT

The deponent has acknowledged that she knows and understands the contents of this affidavit/declaration, which was signed and sworn to before me at Cape Town on this the 20th day of July 2023, the regulations contained in Government Notice No R1258 of 21 July 1972, as amended, and Government Notice No R1648 of 19 August 1977, as amended, having been complied with.


COMMISSIONER OF OATHS



Full names: Selby de Waal

Designation: Senior Admin Officer

Business address: 27 Wale Street, Cape Town