

SWORN AFFIDAVIT

INSP 220274

A1

NAME & SURNAME:

Lucille Christian

IDENTITY NUMBER OR PASSPORT:

ID: 5305120068083

D.O.B:

12/05/1953

HOME ADDRESS:

30 SNOWDROP SQUARE

BRIDGETOWN

WORK ADDRESS:

49 CENTRAL DR

CAMPBAY

TEL NUMBERS:

WORK: 063 788 1757 HOME: —

CELL: 063 8600 771

Statement under Oath in English:

I Lucille Christian have Mrs Shetone Cupido and her children residing on my property for over 11 years. Currently they not sleeping in the building due to damages. Last night Shetone and her daughter slept in the building. About several years ago I told Shetone I don't want any animals on the property. They first brought the black dog onto my property which I had to feed. I did not see they left the dog in my building.

I know and understand the contents of this statement.

I have no objection to take the prescribed oath.

I consider the oath to be binding on my conscience.

SIGNATURE OF DEPONENT

I certify that the deponent has acknowledged that he/she knows and understands the contents of this statement. The statement was sworn to/affirmed before me and the deponent's signature was placed there on in my presence at

CAMPBAY

On 2025-09-30 at 07:50

SIGNATURE
(Commissioner of Oaths)

FULL NAMES

RANK:

SA POLICE SERVICE, 97 VICTORIA ROAD, CAMPBAY

SUID-AFRIKAANSE POLISIEDIENS
CAMPBAY SAPS
30 SEP 2025
CAMPBAY KAMPBAAI
SOUTH AFRICAN POLICE SERVICE

SWORN AFFIDAVIT

NAME & SURNAME: Lucille Christina
IDENTITY NUMBER OR PASSPORT: 530512 00 68083
D.O.B: 12/05/1953
HOME ADDRESS: 30 SNOW DROP SQUARE
BRIDGE TOWN, ATTLENT-
WORK ADDRESS: 49 CENTRAL DR.
CAMPS BAY
TEL NUMBERS:
WORK: 063 788 1754 HOME:
CELL: 063 8600771

Statement under Oath in English: Another puppy was left inside the building. This I discovered when the black dog was put outside to accommodate the puppy. The animals were left for two days and a turn without being fed. I also have to pick up the dog faeces. The black dog are very destructive and dig holes over the yard. I am 72 years old and might injure myself by falling due to the holes being deep. For that past there was over 10 rats at different times, which died of starvation. Some barked on my property.
I know and understand the contents of this statement.
I have no objection to take the prescribed oath.
I consider the oath to be binding on my conscience.

X
SIGNATURE OF DEPONENT

I certify that the deponent has acknowledged that he/she knows and understands the contents of this statement. The statement was sworn to/affirmed before me and the deponent's signature was placed thereon in my presence at
CAMP BAY
On 2025-09-30 at 07:50
7172086
P. MATIKA
SIGNATURE
(Commissioner of Oaths)
FULL NAMES PHATHISWA MATIKA
RANK: SERGEANT
SA POLICE SERVICE: 97 VICTORIA ROAD: CAMPS BAY

RECEIVED
CAMP BAY SAPS
30 SEP 2025
CAMP BAY KAMPBAAI
SOUTH AFRICAN POLICE SERVICE