

South African Police Service



Suid-Afrikaanse Polisie

Sworn Affidavit / Beedigde Verklaring

I Jeandre De Kock with ID No 9712095170081
Sex / Geslag: M Age / Ouderdom: 27
Residing at / Woonagtig by 8 Florence crescent Pelican Park.
Tel No 061 251 7713

STATES UNDER OATH IN ENGLISH / VERKLAAR ONDER EED IN AFRIKAANS:

Dogs belongs to my brother was confiscated by
the SPCA, The owner, Jean Lawrence is out
of Cape Town, The dogs were left in the care of
a guy named Edries, unable to locate him, I will
now take responsibility of the dogs until owner
returns next week.

I certify that I know the contents
I have no objection to taking the prescribed oath
I consider the prescribed oath binding on my conscience

Ek is vertrou met die inhoud van hierdie Verklaring en begryp dit.
Ek het geen beswaar teen die afle van voorgeskrewe eed nie.
Ek beskou die voorgeskrewe eed as bindend op my gewete.

SIGNATURE OF DEPONENT / HANDTEKENING VAN VERKLAARDER

J. De Kock

I certify that the above statement was taken by me and that the deponent has acknowledged that he/she knows and understand the contents of this statement. This statement was sworn before me and the deponent's signature was placed thereon in my presence at GRASSY PARK SAPS on

Grassy Park at 12:40

Ek sertifiseer dat die bostaande Verklaring deur my afgeneem is end dat verklaarder erken dat hy/sy vertrou is met die inhoud van hierdie Verklaring en dit begryp. Hierdie Verklaring is voor my beedig en die verklaarder se handtekening is in my teenwoordigheid daarop aangebring te GRASSY PARK SAPS op

_____ at _____

COMMISSIONER OF OATHS:

[Signature]

DATE:



1. *Author's name:* _____
 2. *Author's address:* _____
 3. *Author's phone number:* _____
 4. *Author's e-mail address:* _____
 5. *Author's fax number:* _____
 6. *Author's postal code:* _____
 7. *Author's city:* _____
 8. *Author's country:* _____
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Country code / Code du pays

ZAF

Surname / Nom
DE KOCK

Given names / Prénoms

JEANDRÉ GLYNN

Nationality / Nationalité

SOUTH AFRICAN / SUD-AFRICAIN

Date of birth / Date de naissance

09 DEC 1997

Sex / Sexe

ZAF

Date of issue / Date de délivrance

20 JAN 2024

Date of expiry / Date d'expiration
20 JAN 2024

19 JAN 2034

Authority / Autorité

DEPT OF HOME AFFAIRS

Holder's signature / Signature du titulaire

19 JAN 2034

Johnston

[illegible]

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