

Affidavit

I _____ duly endorse the following statements:

I am an adult of full capacity residing in _____

The contents of this affidavit are within my personal knowledge and are true and correct

ID number: _____

The following person(s) are my dependant(s):

DEPENDANTS

Dependants Names & Surname	ID Number	Relationship
1		
2		
3		
4		
5		

Reasons:

Deponent

Thus done and sworn before me at

On the

Day of

Time

THE DEPONENT HAVING ACKNOWLEDGED THAT HE/SHE KNOWS AND UNDERSTANDS
THE CONTENTS OF THIS AFFIDAVIT AND CONSIDERS THE OATH BINDING

Commissioner of Oaths