

# AFFIDAVIT

## CONFIRMATION OF RESIDENTIAL ADDRESS

I, the undersigned,

CAROLINE MOIRA LYNNE SEPHTON

(Full names of person confirming address)

620819 0007 081

(Identity number)

Do hereby declare under oath that:

Full names and surname: JAMES SWART

Identity Number: 950326 5162 085

Resides with me at the following address:

1 MOORSHEAD STREET

GONUBIE

[Signature]

SIGNATURE OF DEPONENT

THUS SIGNED AND SWORN to before me, at Gonubie on this the 03 day of APRIL, the deponent having acknowledged that he/she knows and understands the contents of this affidavit, that the contents of this affidavit are both true and correct, has no objection to taking the prescribed oath and considers the prescribed oath to be binding on his/her conscience.

[Signature] 7060684-7  
2018-04-03

COMMISSIONER OF OATHS

