AFFIDAVIT

(**To be completed upon request to enable the GEPF to confirm authenticity of signature and Thumbprint**)

I, …….. Declare under oath in English and say:

1.

I am an adult male/female, Age……. with Identity Number……, residing at …….., with Telephone/cell phone number ……Unemployed/Employed at ….……...

2.

This serves to confirm my particulars as contained in the documentation forwarded to the Government Employees pension fund for the purposes of processing my pension benefits.
The said particulars include and are not limited to the signature(s) I have appended on the respective documentation.

3.

My five specimen signatures with left and right thumb prints are as follows:

Specimen Signatures	Thumbprint (Press thumb from side and roll gently from left to right)	
	Left Thumbprint	Right Thumbprint
1 _____		
2 _____		
3_____		
4_____		
5_____		

4.

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

_____

I certify that this Affidavit was sworn to before me, and that the specimens signatures and both thumbprints were placed thereon in my presence at ……. on _____ / _____ / _____.

Official Stamp

_____.
COMMISSIONER OF OATHS: REPUBLIC OF SOUTH AFRICA
FULL NAMES:
_____
_____
_____