

SWORN AFFIDAVIT BY LIFE PARTNER

TO BE COMPLETED BY LIFE PARTNER

I, the undersigned, do hereby state under oath/solemnly declare that:

1. I have perused the 'Application for Registration of Life Partner' signed and sworn to/affirmed by:

Full names of my life partner

Date and

2. I confirm that the contents thereof are accurate, and I regard him/her as my spouse.

Full names (please print)

ID number

Fund membership number

Signature

Date

TO BE COMPLETED BY COMMISSIONER OF OATHS

I certify that on this day of at

1. The deponent acknowledges that he/she knows and understands the contents of the above declaration;

2. Delete which is not applicable:

- I duly administered the oath as prescribed by law;
- He/she objected to taking the oath and did not consider it to be binding on his/her conscience. I duly administered the affirmation prescribed by law; and

3. Thereafter the deponent signed the affidavit in my presence.

Signature

STAMP

TO BE COMPLETED BY THE FUND

Delete which is not applicable:

- Registration approved on condition that the material information in the affidavit is accurate and remains so.
- Not approved. Reason if not approved:

Signed on behalf of the LA Retirement Fund, being duly authorised thereto:

Initials and surname of signatory (please print)

Signature

Date