SWORN AFFIDAVIT - B-BBEE EXEMPTED MICRO ENTERPRISE - SPECIALISED ENTITY - GENERAL

I, the undersigned,

Full name & Surname	Talia Jade Magnes	٦
Identity number	8812020103081	٦

Hereby declare under oath as follows:

- 1. The contents of this statement are to the best of my turowledge a true reflection of the facts.
- 2. I am a Director of the following enterprise and am duly authorised to act on its behalf:

Enterprise Name:	Shaken & Abused Baby Initiative		
Trading Name (If			
Applicable):			
Registration Number:	NPC 2012/033736/08		
Enterprise Physical Address:	The Children's Memorial Institute, 13 Joubert Street Extension Parktown 2193		
Type of Entity (NPO, PBO etc.):	Non-profit Company		
Nature of Business:			
	Looking after the health & welfare of babies and children that have been abused.		
Definition of "Black People"	As per the Broad-Based Black Economic Empowerment Act 53 of 2003 as Amended by Act No 46 of 2013 "Black People" is a generic term which means Africans, Coloureds and Indians –		
	(a) Who are citizens of the Republic of South Africa by birth or descent; or (b) Who became citizens of the Republic of South Africa by naturalization- i. Before 27 April 1994; or ii. On or after 27 April 1994 and who would have been entitled to acquire citizenship by naturalization prior to that date		

3.	I hereby declare under Oath that:	
•	The Enterprise has 77 % Black Beneficiaries as per Amended Code Series 1	00
	of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of	f
	2003 as Amended by Act No 46 of 2013,	
•	The Enterprise has% Black Woman Beneficiaries as per Amended Code	
	Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE	lct
	No 53 of 2003 as Amended by Act No 46 of 2013,	
•	The Enterprise has 77 % Black Designated Group Beneficiaries as per	
	Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9	
	(1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,	
	Based on the Financial Statements/Management Accounts and other information available	on
-	the latest financial year-end of the annual Total Revenue/Allocated	
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Budget/Gross Receipts was R10,000,000.00 (Ten Million Rands) or less

Please Confirm on the below table the B-BBEE Level Contributor, by ticking the applicable

At Least 75% Black Beneficiaries	Level One (135% B-BBEE procurement recognition level)	✓
At Least 51% Black Beneficiaries	Level Two (125% B-BBEE procurement recognition level)	
Less than 51% Black Beneficiaries	Level Four (100% B-BBEE procurement recognition level)	

- 4. I know and understand the contents of this affidavit and I have no objection to take the prescribed oath and consider the oath binding on my conscience and on the Owners of the Enterprise which I represent in this matter.
- 5. The swom affidavit will be valid for a period of 12 months from the date signed by commissioner.

Deponent Signature:

Signature & stamp

12 PAMERSON ROAD

BOUTH AFHICAN DOLIDE SEDVICE

CLIENT SERVICE CENTRE
NORWOOD

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RETION COMMANDER

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