

I certify that the information furnished above is true and correct. Also certify that I am aware that if I furnish or cause to be furnished any false return or information relating to this claim I shall on conviction be liable to a fine or imprisonment under Section 39 of the Employees' Trust Fund Act No. 46 of 1980.

Name of the Employer -

Address -

Tel: No

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Signature

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Date

Name of the Signatory -

Designation -

