Certified Tax Practitioner Application AFFIDAVIT

	(full name & Surname)	
siding at:		
l:		
ce:	Sex	Age
No:		
ereby declare under Oath	that I have the following prac	tical experience:

I also understand the following statement T	ax Avoidance vs Tax Evasion (define below)
I know and understand the contents of this stat	tement
I have no objection in taking the prescribed oa	th
I consider the prescribed oath to be binding on	
r consider the prescribed oath to be britishing on	
	Signature of Depone
	own by me as submitted by the deponent and that the
deponent has acknowledged that he / she know	vs and understands the contents of this statement.
This statement was sworn before me and the d	eponent's signature was placed hereon at:
on	Time::
	COMMISSIONER OF OATHS
	Full names & Surname:
	SAP Rank:
	Business Address: