

## Affidavit - Witness Statement

The undersigned hereby declares to know the applicant

\_\_\_\_\_

(Name of applicant)

\_\_\_\_\_

(Applicant's date of birth)

who has applied for having Samleikin registered and distributed.

The undersigned can witness that the applicant is who he/she states to be.

The undersigned knows it is a punishable offence to give an untruthful Affidavit, and this can be punished with a fine or up to two years jail time with reference to § 161 in the Criminal Code.

The undersigned knows this document will be saved as documentation for the undersigned's witness statement for the above-mentioned applicant.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

The undersigned's P-tal: \_\_\_\_\_