



# Form 4 Annexure

## CONFIRMATION OF APPOINTMENTS AS AT 31 OCTOBER 202\_\_ (Regulation 3 of the Regulations relating to Sheriffs, 1990)

I, \_\_\_\_\_

(full names and surname) sheriff / acting sheriff for \_\_\_\_\_

\_\_\_\_\_ (place or area of appointment hereby declare that the information below is to the best of my knowledge true and authentic.

	UNIQUE NO.	NO.	AMOUNT
SHERIFF/ACTING SHERIFF(delete if not applicable)			

DEPUTY SHERIFFS:			
NAME & SURNAME	ID NO.	NO.	AMOUNT

Amount due before VAT @15%

PLUS 15% VAT

**Total Amount due by the end of October 202\_\_**