

SWORN AFFIDAVIT – B-BBEE QUALIFYING SMALL ENTERPRISE

I, the undersigned,

Full name & Surname	Fatima Dos Santos DaSilva
Identity number	6406110085084

Hereby declare under oath as follows:

- The contents of this statement are to the best of my knowledge a true reflection of the facts.
- I am a member / director / owner of the following enterprise and am duly authorised to act on its behalf:

Enterprise Name	MIZOSERVE CC
Trading Name	MIZOSERVE
Registration Number	2010/167256/23
Enterprise Address	UNIT 45, KYA NORTH PARK, 28A BERNIE STREET, KYA SANDS, 2163

- I hereby declare under oath that:
 - The enterprise is 51 % black owned;
 - The enterprise is 0 % black woman owned;
 - Based on the management accounts and other information available on the 2022 financial year, the income did not exceed R50,000,000.00 (fifty million rands);
 - The entity is an Empowering Supplier in terms of Clause 3.3(a) or (b) or (c) or (d) or as amended 3.3 (e) (**select one**) B of the dti Codes of Good Practice.
 - Please confirm on the table below the B-BBEE level contributor, **by ticking the applicable box.**

100% black owned	Level One (135% B-BBEE procurement recognition)	
More than 51% black owned	Level Two (125% B-BBEE procurement recognition)	✓
(a) At least 25% of cost of sales, (excluding labour costs and depreciation) must be procurement from local producers or suppliers in South Africa; for the services industry include labour costs but capped at 15%.	(b) Job Creation – 50% of jobs created are for black people, provided that the number of black employees in the immediate prior verified B- BBEE measurement is maintained	
(c) At least 25% transformation of raw material / beneficiation which include local manufacturing, production and /or assembly, and/ or packaging	(d) At least 12 days per annum of productivity deployed in assisting QSE and EME beneficiaries to increase their operation or financial capacity	
(e) At least 85% of labour costs should be paid to South African employees by service industry entities.		

- 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.
- The sworn affidavit will be valid for a period of 12 months from the date signed by commissioner.

I certify that the DEPONENT has acknowledged that he/she knows and understands the contents of this affidavit, that he/she does not have any objection to taking the oath, and that he/she considers it to be binding on his/her conscience, and which was sworn to and signed before me at Fourways on this 24 day of APRIL 2022 and that the administering oath complied with the regulations contained in Government Gazette No. R1258 of 21 July 1972, as amended.

Deponent Signature: _____

Date: _____

Commissioner of Oaths
 Signature: _____
 27 Waterlooplein Office Park
 Witkoppen Road, Fourways, 2191