PLUS 15% VAT

Total Amount due by the end of October 2018



Form 4 Annexure

CONFIRMATION OF APPOINTMENTS AS AT 30 SEPTEMBER 2018 (Regulation 3 of the Regulations relating to Sheriffs, 1990) (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%