www.sheriffs.org.za

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South African Board for
SHERIFFS
Upholding the Dignity of Those We Serve

FORM L 12.7.4

Our ref: L12-7-4-BL-TCJ-cp

Your ref: ……..

DECLARATION OF RESIDUE IN TRUST ACCOUNT AND/OR UNCLAIMED TRUST MONIES

TRUST ACCOUNT NAME	TRUST ACCOUNT NUMBER	BANKING INSTITUTION	AMOUNT HELD	DATE SINCE HELD

I certify that the information supplied above is to the best of my personal knowledge and belief both true and correct. I further agree that I shall be fully accountable for any misrepresentation, discrepancy and/or deviation from any or all of the information provided herein.

_____
SHERIFF'S SIGNATURE

PLEASE STAMP AND KINDLY RETURN BY 31 JULY 2011 TO FAX NO's: (021) 462-2099 or (021) 462-2087

Mrs C Mabuza (Chairperson), Mr HJ Choma, Ms P Mantame, Mr NB Nxumalo, Mrs P Roodt, Mr B Rose-Innes, Mr TF Seboka, Mr J Skosana, Mr KH Tau, Mr M Tayob