

**LEGAL SECTOR CONFIRMATORY AFFIDAVIT
EXEMPTED LEGAL ENTITY (ELE) STATUS (LAW FIRM)**

I, the undersigned,

Full name and Surname	
Identity number	
In my capacity as	

Do hereby declare and state under oath as follows:

1. The contents of this statement are to the best of my knowledge and belief, a true and correct statement of facts.
2. I am a director/partner/sole proprietor (select one) of the following law firm and am duly authorised to act on its behalf:

Firm Name	
Trading name (If applicable)	
Registration Number	
LPC Firm number	
VAT Number	
Firm's Address	
Province in which the Firm practices	

DEFINITIONS

“Black People”	As per the Broad-Based Black Economic Empowerment Act 53 of 2003 as amended by Act no 46 of 2013, Black people is a generic term which means Africans, Coloureds and Indians: • who are citizens of the Republic of South Africa by birth or descent; or • who became citizens of the Republic of South Africa by naturalisation: - before 27 April 1994; or - on or after 27 April 1994 and who would have been entitled to acquire citizenship by naturalisation prior to that date
“Designated Categories”	means black women, black youth, black people with disabilities and black people from the rural areas, as contemplated in the LSC

3. I further confirm under oath that:

- 3.1. The firm was established in _____ (year of incorporation/partnership agreement);
- 3.2. The firm is _____ % Black owned,
- 3.3. The firm is _____ % Black woman owned;
- 3.4. Designated Categories Owned % breakdown as per the definition stated above (excluding Black women as this is already provided for above):
 - 3.4.1. Black Youth % = _____ %
 - 3.4.2. Black people with disabilities % = _____ %
 - 3.4.3. Black people living in rural areas as contemplated in the LSC % = _____ %.

- 3.5. Based on the financial statements and other information available on the latest financial year-end of _____ (DD/MM/YYYY), the firm's annual revenue did not exceed **R5,000,000.00** (Five Million Rand).
4. I know and understand contents of this affidavit and I have no objection to take the prescribed oath or affirmation and consider same binding on my conscience.
5. I accept that should any information on which I have relied on in deposing to this affidavit change prior to the Affidavit Expiry Date of 12 months; that I will advise third parties to whom this affidavit has been supplied, including the LSCC of such change.
6. I acknowledge and understand that each of the declarations and representations made by me in this affidavit are material and will be relied upon by third parties to whom this affidavit is provided as to their truthfulness and correctness.

Deponent Signature: _____

Date: _____

Commissioner of Oaths:

Signature: _____