## CARDHOLDER AFFIDAVIT

l,	state in English under oath tha			
I am an adult M resident at:	MALE/FEMALE W	rith ID/Passport no		and
I am the owner of/employed ataddress:				situated at street
Contact details	Mobile:	S: ()		
Card Type		Card number		Expiry Date
MasterCard Pre	e-Paid	Cara nomber		
		/stolen on	Ω	nd was reported to
<ul> <li>My card has been lost/stolen on and was reported to Diamond Cash on</li> </ul>				
My card  Genuine Transc  Details of my last	actions:	ssion and I enclose a c (please cross-out action:	• •	t applicable)
Date	Merchant (p	lace)		Amount
2 6.10	1110101101111 ( 0			7
	nsaction and/or	attempted transactions v	were not made b	by me or with my consent:
Date	Merchant (p	lace)		Amount
objection to to conscience.	iking the presc		the prescribed	understand it. I have no d oath as binding on my
Date				e of Deponent(Cardholder)
,	•			ove affirmation and that ce, gives the affirmation
Signed on this _	day of	2(	t	
				·
official stamp			Commis	sioner of Oaths