SWORN AFFIDAVIT

B-BBEE QUALIFIED SMALL ENTERPRISE - SPECIALISED ENTITY AMENDED GENERAL

I, the undersigned,

Full name & Surname	Rev. Fr. Stefan Hippler
Identity number	6005065365085

Hereby declare under oath as follows:

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

Enterprise Name:	HOPE Cape Town Trust
Trading Name (If Applicable):	HOPE Cape Town Trust
Registration Number:	053-417 NPO
Enterprise Physical Address:	Room 0005B, K Floor, Educational Buildung, Faculty of Medicine & Health Science Tygerberg Campus, University of Stellenbosch, Francie van Zijl Drive, Tygerberg, Cape Town, 7505
Type of Entity (NPO, PBO etc.):	NPO and PBO
Nature of Business:	
Definition of "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 – (a) Who are citizens of the Republic of South Africa by birth or descent; or (b) Who became citizens of the Republic of South Africa by naturalization Before 27 April 1994; or ii. On or after 27 April 1994 and who would have been entitled to acquire citizenship by naturalization prior to that date.

3. I hereby declare under Oath that:

•	The Enterprise has	100_{-2} % Black Beneficiaries as per Amended Code Series 100 of the
	Amended Codes of Good Pra	ctice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended
	by Act No 46 of 2013,	

- The Enterprise has _______% Black Woman Beneficiaries as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- The Enterprise has ________% Black Designated Group Beneficiaries as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 (1) of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- Based on the Financial Statements/Management Accounts and other information available on the latest financial year-end of 2019/2020, the annual Total Revenue/Allocated Budget/Gross Receipts was R50,000,000.00 (Fifty Million Rands) or less

Please Confirm on the below table the B-BBEE Level Contributor, by ticking the applicable box.

At Least 75% Black Beneficiaries	Level One (135% B-BBEE procurement recognition level)	X
At Least 51% Black Beneficiaries	Level Two (125% B-BBEE procurement recognition level)	

- 4. 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.
- 5. The sworn affidavit will be valid for a period of 12 months from the date signed by commissioner.

I CERTIFY THAT S. HIPPLET HAS ACKNOWLEDGED THAT HEISHE		
KNOWS AND UNDERSTANDS THE CONTENTS OF THIS AFFIDANT. THAT HE/SHE DOES NOT		
HAVE ANY OBJECTION TO TAKING THE OATH, AND THAT HE/SME CONSIDERS IT TO BE		
BINDING ON HIS HER CONSCIENCE, AND WHICH WAS SWORN TO AND SIGNED BEFORE ME		
AT CAPE TOWN ON THIS THE 6 th DAY OF JULY 2024 AND THAT		
THE ADMINISTERING OATH COMPLIED WITH THE REGULATIONS, CONTAINED IN		
GOVERNMENT GAZETTE NO.R 1258 OF 21 JULY 1972, AS AMENDED		
COMMISSIONER OF CARIS (RSA)		
SATCA REG. NO. 0484 8853		
JAP REYNEKE CA (SA)		
POSTNET SUITE 12, PRIVATE BAG X3, BLOUBERGRANT, 7743		

Deponent Signature:

06 July 2020

Date:

Commissioner of Oaths

Signature & stamp