

SWORN AFFIDAVIT – B-BBEE EXEMPTED MICRO ENTERPRISE (SPECIALISED ENTITY) - which include (Not Limited to) Non-Profit Organisations, Non-Profit Companies, Public Benefit Organisations etc.

I, the undersigned,

| | |
|--------------------------------|-----------------------|
| Full name & Surname | Darryl Norman Cousins |
| Identity number | 4608165042082 |

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: | Tereo Project |
| Trading Name (If Applicable): | |
| Registration Number: | NPO 010-517 |
| Vat Number (If Applicable) | |
| Enterprise Physical Address: | Old Ambulance Building Victoria Street Somerset West |
| Type of Entity (NPO, PBO etc.): | NPO |
| Nature of Business: | School |
| 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- i. 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 |
| Definition of "Black Designated groups" | "Black Designated Groups means: (a) unemployed black people not attending and not required by law to attend an educational institution and not awaiting admission to an educational institution; (b) Black people who are youth as defined in the National Youth Commission Act of 1996; (c) Black people who are persons with disabilities as defined in the Code of Good Practice on employment of people with disabilities issued under the Employment Equity Act; (d) Black people living in rural and under developed areas; (e) Black military veterans who qualifies to be called a military veteran in terms of the Military Veterans Act 18 of 2011;" |

3. I hereby declare under Oath that:

- The Enterprise has 100 % Black 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 50 % Black Female 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 0 % Black Designated Group Beneficiaries as per Amended Code Series 100 of the Amended Codes of Good Practice issued under section 9 of B-BBEE Act No 53 of 2003 as Amended by Act No 46 of 2013,
- Black Designated Group Owned % Breakdown as per the definition stated above:
 - Black Youth %= _____ %
 - Black Disabled % = _____ %
 - Black Unemployed % = _____ %
 - Black People living in Rural Areas % = _____ %
 - Black Military Veterans % = _____ %
- Based on the Audited Financial Statements/ Financial Statements and other information available on the latest financial year-end of 31-12-2022 (DD/MM/YYYY), the annual Total Revenue/Allocated Budget/Gross Receipts was R10,000,000.00 (Ten 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) | <input checked="" type="checkbox"/> |
| At Least 51% Black Beneficiaries | Level Two (125% B-BBEE procurement recognition level) | <input type="checkbox"/> |
| Less than 51% Black Beneficiaries | Level Four (100% B-BBEE procurement recognition level) | <input type="checkbox"/> |

| | YES / NO |
|--|----------|
| Do you know and understand the content of the declaration? | Yes |
| Do you have any objection to taking the prescribed oath? | No |
| If yes to the above, do you want to make an affirmation? | |
| Do you consider the prescribed oath to be binding on your consciences? | Yes |

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

Deponent Signature: _____

Date: 17/4/2023

CST
7210379-5
N. MLAVI

Commissioner of Oaths

Signature & stamp (if applicable)

Date: _____

