## **AFFIDAVIT**

, S/o							, N	⁄lus	lim,
Adult, holding CNIC No									
				do	herel	by	state	e a	and
declare on oath are as under:-									
Γhat my daughters namely				_ D/o _					,
nolding CNIC No.		ar	nd						D/o
, holding CNIC No							They	are	my
eal daughters and they are un-m	arried ar	nd the	y are	deper	nd on r	ne t	for the	ir d	aily
outine expenses.									
Γhat, whatsoever have been s knowledge and belief.	tated is	true	and	correc	ct to t	he	best	of	my
Deponent :	-								
Name:	_								
S/o	-								
CNIC No	-								
Dated ·									