STATUTORY DECLARATION

I	
(given name/s)	(surname)
of	
	(address)
Do solemnly and sincerely declare that:	
As the responsible officer at	, ABN
(name o	of organisation)
*	us to any Uniting SA facility (including staff we nal current compliance criminal history checks or DCSI Screening).
statutory declaration that records that the a) has been convicted of mu	•
This is in compliance with the <i>Accounta</i> under the <i>Aged Care Act 1997</i> .	bility Amendment Principles 2006 formulated
And I make this solemn declaration cons by virtue of provisions of the Oaths Act,	scientiously believing the same to be true and 1936, and as amended.
(Signature of person making Declaration)	(Printed name of person making Declaration)
Declared and subscribed at In the State of South Australia.	
This day of	20
Before me(A Justice of the Peace in and fo	or the State of South Australia)