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TRANSLATION	
IKANNI AIIII	

AFFIDAVIT

I hereby state under oath that the information below reflects my current financial and socioeconomic situation, and that I shall notify of any changes which may modify the terms of this statement.

I further declare that I lack sufficient economic resources to pay the fees of a private lawyer to act on my behalf before the Courts of the Argentine Republic.

PARTICULARS		
Last and first name:		
Address:		
Phone number:	Mobile:	
Date of birth:		
Identity document (DNI) No.:		
Marital status:		
Studies:		
Work address:		
Work phone number:		
E-mail address:		
INCOME		
Occupation:		
Monthly income:		
Other income (pension, retireme	ent pension, benefits):	
Monthly income:		
ASSETS		
Are you the registered owner o	f any real property? (If your answer is 'yes', state	if it is
a country estate, a house, an a	apartment or other, as well as its location and ass	sessed
valuation)		

Do you own a motor vehicle and/or a vessel? (If your answer is 'yes', state its assessed
valuation)
Do you have bank deposits or financial investments? (If your answer is 'yes', state the amount)
Do you have any other income? (If your answer is 'yes', state the amount)
HOUSING
Type of dwelling (house, apartment or other):
Title (owner, tenant, on loan or other):
Monthly rent:
Number of people with whom you live:
FAMILY
Spouse/partner:
Occupation: Monthly income:
Children:
Ages:
Studies or occupation:
Other dependants:
Family relationship or other:
Done in on the day of,
Deponent's signature: Printed name:

Before me:

(Signature and seal of the official of the Central Authority/Civil Law Notary)

The falsehood or inaccuracy of any of the particulars above which have been decisive to grant the benefit sought may result in the termination of the representation provided by the Public Defender's Office of the Argentine Republic subject to the terms of articles 35 (bb), 41, 42 (a) and related provisions of the Organic Law of the Public Defender's Office (Law No. 27149).