**Affidavit**

I Salinder Singh S/o Sh. Sardari Lal R/o Near Khera, Dhurala, Distt. Ambala do hereby solemnly declare and affirm as under-

1. That I am a partner in firm **M/s S & P Medical System, H.No. 140-B, Civil lines, Preet Nagar, Ambala City.**
2. That I am applying for registration of said firm under The Partnership Act, 1932 with District Registrar of Firms and Societies
3. That the said firm has not been registered earlier within the jurisdiction of Ambala or no other firm has been registered at this place with same name.

Deponent\_\_\_\_\_\_\_\_\_\_\_

**Verification**

It is verified that the facts and information provided above is true and correct to my knowledge and belief and nothing is concealed therein.

Deponent\_\_\_\_\_\_\_\_\_\_\_