

AFFIDAVIT OF FAAVELA HENRY MOELASI ON 2
DECEMBER 2021

COURT DETAILS

Court

Division

List

Registry

Case number

TITLE OF PROCEEDINGS

Plaintiff

Defendant

FILING DETAILS

Filed for

Contact name and telephone

Contact email

AFFIDAVIT

Name	FAAVELA HENRY MOELASI
Address	8 BULOLO DRIVE, WHALEN
Occupation	SUPPORT WORKER
Date	2 December 2021

I say on oath (or affirm):

- I SOUGHT THE HELP OF DAVID MURPHY (DEBT WIPEOUT) TO HELP PAY OFF A DEBT WITH I HAD WITH ICM PARTNERS. DEBT WIPEOUT WAS TO ASSIST WITH PAYING OUT MY DEBT WITH ICM PARTNERS (\$10,064.04) FROM DAVID MURPHYS RESERVE ACC, WHILST I PAID TO DEBT WIPEOUT \$2,516.01 AS BEING 25% OF THE DEBT AS MY PAYMENT. DAVID MURPHY PUT TOGETHER A NOTICE OF TENDER FOR ICM TO ACCEPT THE OFFER IN WHICH I SENT THROUGH VIA EMAIL jess@icmpartners.com.au on the 03/06/20 WITH NO REPSONSE THEN AGAIN ON 02/07/20 STILL NO REPSONSE TO OUR EMAILS. I WAS THEN ADVISED THEY HAD NOT RESPONDED BACK IT WOULD APPEAR THEY DID NOT ACCEPT THE NOTICE OF TENDER FOR MY DEBT TO BE PAID IN FULL, AND WOULD APPEAR THE DEBT WITH ICM PARTERS WOULD BECOME VOID. AND THE FUNDS OF THE DEBT WOULD TRANSFER TO MYSELF FROM DAVID MURPHYS RESERVE ACC. WE TOOK THE LIBERTY OF SENDING IT THROUGH AGAIN ON THE 27/03/21 WITH STILL NO RESPONSE, NIL CONTACT FROM ICM PARTNERS. I WAS THEN INFORMED AS THERE WAS NO RESPONSE FROM ICM PARTNERS DAVID MURPHY ADVISED OUTSTANDING FUNDS WILL BE ALLOCATED TO MYSELF. I HAVE SOUGHT FURTHER GUIDANCE FROM DAVID MURPHY AND WAS INFORMED TO DO A AFFIDAVIT AS IM WRITING HERE.

SWORN (or AFFIRMED) at _____
 Signature of deponent _____
 Name of witness _____
 Address of witness _____
 Capacity of witness _____

And as a witness, I certify the following matters concerning the person who made this affidavit (the **deponent**):

- I saw the face of the deponent.
 OR
 I did not see the face of the deponent because the deponent was wearing a face covering, but I am satisfied that the deponent had a special justification for not removing the covering.
 (*delete one*)

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I have known the deponent for at least 12 months.

OR

I have confirmed the deponent's identity using the following identification document:

Identification document relied on (may be original or certified copy)

(delete one)

Signature of witness

Note: The deponent and witness must sign each page of the affidavit. See UCPR 35.7B.