

Investor Application Form

FOR OFFICE USE O	NLY		
Investor			
Account No			
Commencement Date			
Authorising Officer			
Investor details			
Type of entity	Company	Individual	×
Entity Name			
Identity no/ Registered no	8312160276086		
Date of Birth/Inception	16/12/1983		
Residential address	9 SAI BN, SPINE RD EXT, KHAYELITSHA		
Postal code	7784		
	Contact Pe	rcon	
	Contact Fe		
<i>Title</i>	MRS		
First Name	PAMELA		
Surname	BOZA KASEKE		
Telephone (W)	0217876209		
Cell	0614402070		
Email	MPUMIEBOZA@YAHOO.COM		
Nationality	SOUTH AFRICAN		
Identity No	8312160276086		
Next Of Kin	Nomvuyo Boza		
Next of Kin contact details	0797241990		
	Investment	Details	
Monthly Contributions		R1000	
Commencement Date	16/11/2016		
5-100 C-1000 (100)		licable to businesses)
Name & Surname	KHANYA T. KASEK	Œ	
Identity Number	0710240186084		
Residential address	15 Ntlazane Rd Pakamisa Khayelitsha 7784		
Tel/cell	0769825536		

Khayelitsha 18 Nov. 2016

Signature of Investor Place Date