

Investment Form

FOR OFFICE US	SE ONLY	r "	
Investor			
Account No			
Date Commencement			
Authorising Officer			
	Investor	details	
Type of entity	Company	Individual	X
Entity Name	Pulena '	Mathibeli	
Identity no/ Registered no		88088	
Date of Birth/Inception	1988-03-	12	
Residential address	320 Mag	finus speet	
		wensous	
Postal code	9945		
	Contact F	Person	
Title	MS		
First Name	Puleng		
Surname	Mathibel	ì	10
Telephone (W)		647	
Cell	0+82044	485	CI
Email	Than high	hiberi @ Mhls. 9C-Z	
Nationality	5 outh at	28088	
Identity No	Investmen		AND REAL PROPERTY OF
	Tiveachten		000-00
Monthly Contributions		K (25-11-2016
Commencement Date	D -1-11- (N-4-		
		oplicable to businesse	5) Resident
Name & Surname	Tselane	Mathibeli	

that when

Identity Number

Tel/cell

Residential address

tyruman

23-11-2016

Signature of Investor

Place

Date

Street van Stadensous



Investor Profile Form

Name & Surname	Puleng Mathibeli
Contact Number	0783044485.
E-mail	puleng. mathibeli@nhis.aciza. Mathibelipc@webmail.co.29.
	matribeliec @ webmail. co. 29.
LinkedIn	
Position	Laboratory manager.
Education	Medional Liplomer biometical technology.
Experience	3 years as a medical technologist in clinical pathology.
Skills	