

Investment Form

Investor Account No		
Commencement Date		
Authorising Officer		Mili

tor details

Type of entity	Company	Individual	X
Entity Name	HOMPLIMELE LO	TOLANDA SKHISAZANA	
Identity no/ Registered no	931009000508		
Date of Birth/Inception	1993-10-09		
Residential address	3061 /4 UMSI PROTEA GLEN	NI STREET, EXTENSION :	,
Postal code	1619		

Contact Person

Title	M5	
First Name	NOMPUMELELO	
Surname	SKHISAZANA	
Telephone (W)	011 631 7409	
Cell	071 173 2628	
Email	yolandaskhisazana 09@gmail.com	
Nationality	SOUTH AFRICAN	
Identity No	93 1009 0005 085	
	Towards and Dataila	

Monthly Contributions	R 1000 - 00
Commencement Date	30 November 2016

Beneficiary Details (Not applicable to businesses)

Name & Surname	NOMALLINGELO SKHISAZANA
Identity Number	6603110383085
Residential address	3261/4 UMSWI STREET, EXTENSION 2, PROTER GLEN
Tel/cell	OSO 709 2050

MASCHISTIZETTE STANDARD BANK, 5 SIMMONDS 29-11-2016

Signature of Investor

Place

Date



Investor Profile Form

Name & Surname	NOMPLIMELELO SKHISAZANA
Contact Number	UTI 123 2628
E-mail	yolanda skhisazana 09@gnail.com
LinkedIn	
Position	FINANCE LEARNER
Education	BACHELOR OF ACCOUNTING - OBTAINED NOT G - FINANCIAL MARKETS AND INSTRUMENTS (CURRENTLY STUDYING)
Experience	8 months - Finance Leavner 2 months - General Store Assitant
Skills	Research skills Analytical skills Numerical skills