

**ANNEXURE A**

**PERSONAL INFORMATION REQUEST FORM**

**Please submit the completed form to the Information Officer**

<b>NAME &amp; SURNAME:</b>	
<b>CONTACT NUMBER:</b>	
<b>E-MAIL ADDRESS:</b>	

**NOTE!** Please be aware that we may require you to provide proof of identification prior to processing your request. There may also be a reasonable charge for providing copies of the information requested.

**A. PARTICULARS OF DATA SUBJECT**

<b>NAME &amp; SURNAME</b>	
<b>IDENTITY NUMBER:</b>	
<b>POSTAL ADDRESS:</b>	
<b>CONTACT NUMBER:</b>	
<b>EMAIL ADDRESS:</b>	

**B. REQUEST**

I request the FSP to: **(please tick the appropriate action)**

(a) Inform me whether it holds any of my personal information	
(b) Provide me with a record or description of my personal information	
(c) Correct or update my personal information	
(d) Destroy or delete a record of my personal information	

**C. INSTRUCTIONS**

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**M E E T I N G   Y O U R   F I N A N C I A L   N E E D S**

Unit 1, Village Corner, 57 via Latina Crescent, Irene Corporate Corner, Irene, South Africa PO Box 61803, Pierre Van Ryneveld, Centurion, Gauteng, 0045  
**Company Reg** 1999/008361/07 **Director:** Mark Weetman **External Compliance:** Mrs Shashika Adsetts, Moonstone Compliance, CO 6220

**D. SIGNATURE**

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<b>SIGNATURE</b>
<b>NAME:</b>

<b>DATE:</b>
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