Promotion of Access to Information (PAIA) Request Form

in accordance with Section 51 of the Promotion of Access to Information Act No. 2 of 2000 Updated:June 2022

For more information

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APPENDIX 1	REQUEST FOR INFO	RMATION FORM	 2
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APPENDIX 1 | REQUEST FOR INFORMATION FORM

A. PARTICULARS OF PERSON REQUESTING ACCESS TO INFORMATION					
Full Names & Surname:					
Identification Number:		Mobile no.			
Other contact no:		Fax no.			
Email address:					
Postal address:			Postal code		
B. PARTICULARS OF PE	RSON ON WHOSE BEHALF THE	E REQUEST I	IS MADE		
*Only complete this section	if a request for information is made	e on behalf of	another pers	son.	
Full Names & Surname/ Legal entity name:					
Identification/ Registration no.					
C. PARTICULARS OF RE	EQUESTED INFORMATION				
*Provide full particulars of the information to which access is requested. If the provided space is not sufficient, please continue on a separate page and attach it to the form. Any additional pages submitted must be signed.					
D. FORMAT IN WHICH INFORMATION IS REQUESTED					
*Indicate the format in which the information requested is required. Please note that the request for access in the specified format may depend on the format in which the record is available and access in the requested format may be refused under certain circumstances.					



E. RIGHT TO BE EXERC	SED OR PROTEC	TED	
*Indicate: 1. What right is to protect and/or to exercise the		or protected and 2.	Why the information is required to
What right is to be protected			
Why the information is required			
F. NOTICE OF APPROVA	AL / REJECTION O	F REQUEST	
			our request has been approved or becify the manner and provide the
G. PAYMENT DETAILS (Only applicable to	Other Requesters	3)
Kindly make payment of the payment to this form.	amount of R	into the following	bank account and attach proof of
Account name: Mergence Bank: Standard Bank Account no: 07 01 96 222 Branch code: 020909	Investment Manag	ers	
H. SIGNATURE			
Signed at:	on this	day of	20
Name of person submitting	the request	Signature	e of person submitting the request