

	MANUAL PREPARED IN TERMS OF SECTION 51 OF THE PROMOTION OF ACCESS TO INFORMATION ACT NO.2 OF 2000 (AS AMENDED)			
	Author:	SAMWUMED INFORMATION OFFICER	Issue Date:	February 2025
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ANNEXURE B (FORM 2): REQUEST FOR ACCESS TO RECORD [Regulation 7]

NOTE:

1. Proof of identity must be attached by the requester.
2. If requests made on behalf of another person, proof of such authorisation, must be attached to this form.

TO: The Information Officer

Cnr. Trematon and Lascelles Streets
 Athlone
 Cape Town
 7760

E-mail Address: francinam@samwumed.org or legalcompliance@samwumed.org

Fax Number: N/A

Mark with an "X"

- Request is made in my own name Request is made on behalf of another person

PERSONAL INFORMATION				
Full Names:				
Identity Number:				
Capacity in which request is made (when made on behalf of another person):				
Postal Address:				
Street Address:				
E-mail Address:				
Contact Numbers:	Tel. (B):		Facsimile:	
	Cellular:			
Full Name of person on whose behalf request is made (if applicable):				
Identity Number:				
Postal Address:				
Street Address:				
E-mail Address:				