

FORM 1b

REQUEST FOR A COPY OF THE GUIDE

[Regulation 3]

TO: *Information Officer

(Address)

I,

Full names:			
In my capacity as: (mark with "x")	Information officer		Other
Name of *public/private body: (if applicable)			
Postal Address:			
Street Address:			
E-mail Address:			
Facsimile:			
Contact numbers:	Tel.(B):		Cellular:

Hereby request the following copy/copies of the Guide:

Language (mark with "X")	No of copies	Language (mark with "X")	No of copies
Sepedi		Sesotho	
Setswana		siSwati	
Tshivenda		Xitsonga	
Afrikaans		English	
isiNdebele		isiXhosa	
isiZulu			

Manner of collection (*mark with "x"*):

Personal collection	Postal address	Facsimile	Electronic communication (Please specify)

Signed at _____ this _____ day of _____ 20 _____

Signature of requester