“ANNEXURE 1A”

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Prosperatas Centre, c/o Goudvis & Conrad Road, Florida North, 1724, PO Box 2363, Florida Hills, 1716
Tel: 011 472-3028, Fax: 0872370576, Email: provident@tshepong.co.za, Website: www.extradimensions.org.za
Reg No: 2007/000667/23 cc
AUTHORISED FINANCIAL SERVICES PROVIDER
(Licence number 38344)

NAME OF EMPLOYER _____

EMPLOYEE DETAILS

	Title (Ms, Mr)	Initials	First name	Surname	Date of birth (dd/mm/yyyy)	Identity number (no spaces between numbers)	Passport number (if no ID, no spaces between numbers)	Passport country of issue	Gender (F / M)	Marital status (Married, Single, Divorced, Widowed, Unknown)	Email address (unique to the member)	Cell number (unique to the member, no spacing between numbers)	Members private e-mail address	Pensionable salary
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