



Society for the Prevention of Cruelty to Animals
Dierebeskermingsvereniging

NOTICE TO COMPLY

NAME & SURNAME: Brendon Griffiths DATE: 4/9/23
PHYSICAL ADDRESS: 4 Gavina Str Hopland
Saldanha ID No. _____
TEL. No. _____ CELL No. _____ REG No. _____

You are hereby instructed to:

* Provide your dog with medical
treatment for the skin. will recheck
after 7 days.

This notice has been issued in terms of the Society for the Prevention of Cruelty to Animals Act No 169 of 1993 and refers to the Animals Protection Act No 71 of 1962

SIGNED & ACCEPTED BY: B. Corbe TIME: 13 H40
PLACE: Saldanha W.C.
REPRESENTATIVE: J. Mathabeka SPCA: _____