ADOPTION CHECKLIST

ADMISSION NO: MBY 8999

CONTRACT NO: MA0242

- [x] Admission Form
- [x] Application for adoption
- [x] Pre-Home Inspection Report
- [x] Adoption contract
- [ ] Copy of Identity Document or Driver's License
- [x] Proof of Residence
- [x] Letter from Body Corporate
- [x] Sterilization Contract and Date of sterilization Contract Done 12/03/2026
- [x] Copy of Vaccination Record/ Certificate
- [x] Microchip 13/03/26.
- [x] Microchip Registration- chip number 992003000579471

Adopter INFO:

Name & Surname Giovanni Furness

Contact INFO: 072 370 3521

Completed by: _____ Date: 13/03/26

Manager: _____ Date: 13/03/26

FUTURE POST HOME INSPECTION (every 6 Months)	
Date of inspection	Date of inspection

This checklist must be completed and attached to the front of every adoption that has been processes.

All documents relating to a single adoption must be kept together in a single bundle, in order of checklist.

ANNEXURE A

Additional Household Members & Emergency Contacts

1. Spouse Details

- Full Name: Mark Furness
- Contact Number: 082 546 2344
- Email Address: mark@boardins-co.za

2. Additional Family Member/Friend Details

- Full Name: Claudia van Coller
- Contact Number: 082 780 1958
- Email Address: _____

3. Previous SPCA Adoption

- Have you previously adopted SPCA? (Yes/~~No~~)
- If yes, when? 2012
- Where? Mossel Bay
- What animal did you adopt? Dog

1. Adoption Contract Acknowledgment

I, the adoptee, confirm that I have read and fully understand the adoption contract in its entirety.

Signature: _____

Date: 13/03/2026

Virbac

MICROCHIPPED ANIMAL REGISTRATION FORM

MICROCHIP NUMBER

992003000579471

Please note that it is the Pet Owner's responsibility to ensure that the Pet's details are registered on the BackHome Database

VETERINARY PRACTICE DETAILS

Vet Practice Number *

Vet Practice Name *

Vet Practice Phone Number

OWNER CONTACT DETAILS

Cell no. * 072 370 3521 — Only mobile numbers in South Africa, Botswana and Namibia will be used for SMS notifications.

E-mail * giovanna@bardins.co.za — If possible, please provide a personal email, not a company email.

Title * MRS   Initials * G   Surname FURNESS

Street 67 BRUNO ROAD   City

Suburb   Area Code MOSSELBAY

Country   Province

Phone - Day time   Phone - Night time

OTHER CONTACTS

Title *   Initials *   Surname *

Cell No. *

Title *   Initials *   Surname *

Cell No. *

Title *   Initials *   Surname *

Cell No. *

CHIP DETAILS

Registration Date * 13 . 03 . 2026

Date of Implant * 12 . 03 . 2026

Was the Microchip implanted by this veterinary practice? (Yes) No

Name of Vet who implanted the Chip KAY IEVERS

PET DETAILS

Pet Name Chelsea Rosey   Date of birth

Species * CANINE   Breed * TERRIER X MALTESE

Colour BLACK + TAN   Markings

Gender Male (Female)   Sterilised (Yes) No

KENNEL UNION OF SOUTH AFRICA (KUSA)

Are you a KUSA Registered Member? Yes No

KUSA Registration Number

Pet Registered Name

MEDICAL

Medical Conditions

Medical Insurance Company

Medical Insurance Policy Number

Medical Insurance Phone

PROTECTION OF PERSONAL INFORMATION LAW

The client hereby agrees that his / her personal information herein supplied and / or any of his / her personal information already in possession of the veterinarian may be processed by the said Veterinarian and / or it's office to bring about this agreement between the client and the veterinarian. The client further agrees that the veterinarian may forward his / her personal information to VIRBAC (Supplier of the Chip), in order for Virbac to lodge the clients personal information on their database for tracking purposes. The client also agrees that where other relevant institutions need to trace a lost animal, and they use that code on Virbac's website they will be given the personal information of the owner of said animal. The client also agrees that his / her personal information may be used by Virbac to forward him / her a Newsletter as well as to send him / her general information concerning pets. The client acknowledges that he / she has a right to object to the processing of its personal information for marketing purposes and unless expressly stated otherwise hereby consents to its personal information being used by ______________________ and Virbac RSA (Ltd) Pty for the above-mentioned purposes. SIGNATURE ______________________

REGISTRATION PROCESS - Please use one of the following option to register on the backhome database

1. On-line — Log onto www.backhome.co.za. Complete the registration process.
2. By fax — Fax this completed form to backHome on 0800 222 546 (TOLL FREE) or 011 852 6164
3. By e-mail — Scan and E-mail the completed form to backhome@virbac.co.za or backhome.support.external@virbac.co.za
4. By App — Download the Virbac BackHome Africa App

ADMISSION No.
TOELATINGSNR. MA0242

ADOPTION CONTRACT

Garden Route

DOG / CAT	Breed	Male/Female	
Microc	992003000579471		

This animal has been given to you in the firm and confident belief that it will receive a good home with responsible and loving care. Ownership of an animal yields much pleasure and satisfaction. It also has its obligations and responsibilities. The fact that the animal has been in our care usually indicates that someone has, in the past, failed to recognise these responsibilities.

1. I do hereby confirm and undertake that:
2. I am over eighteen (18) years of age.
3. All family members agree to the adoption and will abide by the conditions in the contract.
4. I will not part with possession of the animal except to **return** it to the SPCA if for any reason I am unable to keep it. In the event that I fail to do so, I agree that I will be liable to pay to the SPCA all costs which they may incur in obtaining confirmation that the animal has been homed to a suitable person, with suitable premises. In the event that this is not the case, I also agree that I will be liable for all costs which the SPCA may incur, including all legal costs on an attorney and client scale, in recovering possession of the animal.
5. I will give the animal a fair chance to adjust to its new home.
6. I understand that donations are not refundable or transferable.
7. I will feed and house the animal to the Society's satisfaction.
8. I will **not chain or cage** the animal, and understand that if it is found chained or caged, it will be removed from my care immediately.
9. I can afford the services of a private veterinary practitioner.
10. I will ensure that vaccinations are kept up to date and in the case of injury or illness professional veterinary treatment will be provided.
11. I understand that in case of illness (not injury) occurring within the first seven (7) days of adoption, I may bring the animal to the Society to be attended to by its veterinarian (at the discretion of the Society) at no charge to myself.
12. I will ensure that the animal is sterilised as stipulated by the Society.
13. I undertake to ensure that the animal has identification at all times, either in form of a microchip or a collar and tag - only **elasticated or quick release collars** may be used for cats.
14. My property is adequately enclosed and at no time shall I knowingly allow my dog to roam the streets.
15. I will notify the Society within forty-eight (48) hours should the animal die or go missing.
16. I know and understand the "By-Laws pertaining to animals" of the Municipality in which I reside.
17. I will permit an authorised officer of Society to visit my premises from time to time, to be assured that the animal is being treated in accordance with this Policy, and I will allow the Society to repossess the animal, if in the Society's opinion, the terms of this policy are not being reasonably adhered to.
18. I will not use or allow the animal to be used as a watchdog on any industrial or commercial premises.
19. I will notify the Society of any change of address in writing by registered post with seven (7) days.

** I agree to never harm, neglect, abuse or abandon the animal that I adopt.*
** I confirm that I have never been convicted nor charged with cruelty or neglect of any animal.*

I hereby declare that I have read through the Adoption Contract, and that I agree and acknowledge that the above contract is legal and binding.

UITPLASINGSKONTRAK

Garden Route

HOND / KAT	Ras	Manlik/Vroulik	
Mikroskyfie en of ID nSkyfie Nommer:			

Hierdie dier is aan u oorhandig met die vertroue dat u die dier 'n goeie tuiste sal bied met verantwoordelike en liefdevolle sorg. Elenaarskap van 'n dier gee bale plesier en tevredenheid. Daar is ook verantwoordelikhede en verpligtinge wat nagekom moet word. Die feit dat hierdie dier in ons sorg was, dui gewoonlik daarop dat lemand hulle plig versuim het.

1. Ek onderneem en bevestig dat:
2. Ek ouer as agtien (18) jaar is.
3. Alle familielede stem saam oor die aanneming en sal al die voorwaardes in die kontrak nakom.
4. Indien ek om enige rede nie langer die dier kan versorg nie, onderneem ek om dit alleentlik aan die DBV **terug** te besorg. As ek om enige rede nie daartoe in staat is om die dier te hou nie sal ek nie besit van die dier afstaan nie tensy ek dit aan die DBV terugbesorg. Ingeval ek nie so optree nie, aanvaar ek aanspreeklikheid om alle onkostes aan die DBV te betaal wat hulle mag aangaan in die verkryging van bevestiging dat die dier by 'n geskikte persoon met aanvaarbare huis en erf gehuisves is. Ingeval dit nie die geval is nie, aanvaar ek ook aanspreeklikheid vir alle onkostes wat die DBV mag aangaan, insluitende die regskostes volgens 'n prokureur en kliënt skaal, in die terugbesorging van die dier.
5. Ek sal die dier 'n redelike kans gee om aan sy nuwe tuiste gewoond te raak.
6. Ek begryp dat donasies nie oordraagbaar is of terugbetaal word nie.
7. Ek onderneem om die dier te versorg en te huisves na die Vereniging se tevredenheid.
8. Ek sal **nie die dier vasketting of gehok hou nie,** en aanvaar dat indien die dier wel in my besit vasgeketting of gehok gevind word, die Vereniging dit dadelik sal verwyder.
9. Ek kan die dienste van 'n private veeartsnykundige bekostig.
10. Ek onderneem om die dier se nodige inentings op datum te hou en in die geval van siekte of beserings sal ek 'n veearts se dienste gebruik.
11. Ek verstaan dat, indien die dier siek word (beserings uitgesluit), binne sewe (7) dae van aanneming, ek die dier na die Vereniging mag bring vir behandeling deur sy veearts sonder enige koste (volgens die Vereniging se diskresie).
12. Ek onderneem om toe te sien dat die dier gesteriliseer word soos deur die Vereniging voorgeskryf.
13. Ek onderneem om my dier te identifiseer ter alle tye met behulp van 'n mikroskyfie of halsband en naamplaatjie - **slegs rekbandjies** mag vir katte gebruik word.
14. My erf is behoorlik omhein en ek sal nie toelaat dat my hond in die straat rondloop nie.
15. Ek sal binne agt-en-veertig (48) uur die Vereniging in kennis stel indien die dier sterf of verlore raak.
16. Ek verstaan en ken die "By-wette aangaande diere" van die Munisipaliteit waarin ek woonagtig is.
17. Ek sal toelaat dat 'n gemagtigde persoon van die Vereniging my erf kan besoek van tyd tot tyd, om te verseker dat die dier wel versorg word soos in die Uitplasingsbeleid uiteengesit. Ek sal toelaat dat die Vereniging die dier in besit neem indien die voorwaardes en reëls van hierdie beleid nie redelik nagekom word nie.
18. Ek sal nie die dier gebruik of toelaat dat die dier as 'n waghond gebruik word op enige industriele of kommersiële perseel nie.
19. Ek sal die Vereniging binne sewe (7) dae per geregistreede pos in kennis stel van enige verandering van adres

** Ek onderneem om nooit die dier wat ek aanneem te mishandel verwaarloos of te verlaat nie.*
** Ek verklaar hiermee dat ek nog nooit skuldig bevind of aangekla is van wreedheid of verwaarlosing van enige dier nie.*

Ek verklaar hiermee dat ek die Uitplasing Kontrak gelees het, en dat ek bevestig en erken dat die kontrak wettig en bindend is.

ADOPTER NAME - Prof/Dr/Mr/Mrs/Ms (Including initials)
NAAM - Prof/Dr/Mnr/Mvr/Mej (Insluitende voorletters): Giovanna Furness

HOME ADDRESS
WOONADRES: 67 Bruns Road, Mosselbai

ID/PASSPORT No.:
ID/PASPOORT Nr.: 841010 0321 085

TEL No (H):
TELEFOON Nr (H):

(B):
(W):

CELL No:
SELFOON Nr: 072 370 3521

FAX No:
FAKS Nr:

E-MAIL:
E-POS. giovanna@bardins.co.za

ADOPTION FEE:
AANEMINGSVOOI: R850

cash /eft / card
kontant /eft / kaart

DONATION:
DONASIE:

KWITANSIE Nr
RECEIPT No. 9170

VEHICLE REG No.
VOERTUIG REG Nr. CBS 27

VEHICLE MAKE:
VOERTUIG MAAK: VW

COLOUR:
KLEUR: W.t

SIGNATURE
HANDTEKENING:

WITNESS FOR SOCIETY:
GETUIE VIR VEREENIGING

DATE / DATUM: 13/03/26

ADMISSION NO MBY 8999 9934

9920030005794 71

PRE AND POST HOME INSPECTION FORM DOMESTIC ANIMALS

PASSED: YES / NO DATE UNDERTAKEN: 9/03/26 TIME: 14:41

NAME OF APPLICANT: Giovanna Furness

ADDRESS: 67 Bruns Road, Mosselbay

HOME TEL No: CELL No: 072 370 3521

ANIMAL(S) ADOPTING: Dog - Terrier x Maltese

SEX: Female AGE: 2-3 months

PRE- HOME INSPECTION:

PROPERTY DESCRIPTION			
Type and height of fence: Mesh / brick 2-3meter		Suitability of fence (i.e. small pets can't escape):	
Suitable shelter? (i.e. Kennel in protected area)	YES ☒ / NO ☐	Any sign of Chain/Runner?	YES ☐ / NO ☒
Is the front yard separated from the back?	YES ☒ / NO ☐	If yes, what partitioning?	
Any hazards? (pool, rubble, razor wire, etc)	YES ☐ / NO ☒	Specify:	
Does applicant live at the address?	YES ☒ / NO ☐	How many animals are on the property?	

DESCRIPTION OF ANIMALS ON PROPERTY					
	1	2	3	4	5
BREED					
CONDITION					
WELFARE (good?)					
SEX & AGE	/	/	/	/	/
STERILISED	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐	YES ☐ / NO ☐

OTHER INFORMATION / COMMENTS	Big property

PROPERTY APPROVED FOR THE FOLLOWING ANIMALS:

☒ CATS ☒ SMALL DOGS

☒ MEDIUM DOGS ☒ LARGE DOGS

INSPECTED BY: Cam SPCA: Mossel Bay SIGNATURE:

POST HOME INSPECTIONS

DATE	RESULT	REMARK	BY WHOM

DIAGRAM OF PROPERTY ON REVERSE OF THIS PAGE

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ADMISSION, ASSESSMENT AND HISTORY RECORD

DBV SPCA Garden Route

KENNEL No.	I5C K32			ADMISSION No.	MBY8999	
Stray	Surrender X	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in	09/01/26		Time in		Date for release	

IDENTIFICATION & LOST AND FOUND		Lost & Found checked	Yes (circled) / No	Lost & Found Date checked	
Microchip/Collar or ID tag found	Yes / No (circled)	Date scanned or checked	09/01/26	Microchip or ID Tag number	None

DESCRIPTION & HISTORY

Dog X	Cat	Other species (Specify) R / I		
Breed	Poodle X	Colour and Markings	Brindle	
Condition	Good	Sex F		Age
Temperament	Good	Sterilisation details	None	Name
Coat	Tail L	Teeth Condition	Ears Up	Size Puppy
Area found / collected from	Da nova			Date 09/01/26
Reason for surrender	Cant keep them all			

ASSESSMENT		
GOOD WITH:	Yes	No
Children		
Cats		
Other Dogs		
Livestock/Other		
DO THEY:	Yes	No
Jump Fences		
Run Away		
COMMENTS:		

Surrendered by / Found by	Name	E. Burmeister		
Residential Address	1711 Waaistr 14			
	Da Nova			
Postal Address	none			
Tel (H) none	Tel (W) none	Cell 0840613656		
Email	E.burmeister@gmail.com			
Donation R 200-00	Cash	Card	EFT	(Receipt No.) 5636

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: n/a Case No: n/a Inspector: n/a

STATEMENT OF SURRENDER

I do hereby certify that **I DO / DO NOT** own the animal/s described above, that **IT IS / IT IS NOT** a stray and **I DO / DO NOT** know where it comes from. I also freely surrender all interest, if any, therein to the SPCA, and I request that the animal be dealt with as deemed advisable in the discretion of the SPCA. It is expressly agreed that neither the SPCA nor its officers and employees will incur any obligation to me on account of such disposition of said animal/s. I confirm that I am over the age of eighteen (18) years of age. **Also see" Conditions on reversed side.**

Hiermee verklaar ek dat ek dier/e hierbo beskryf. **BESIT / NIE BESIT NIE**, dat dit 'n **RONDLOPER / NIE RONDLOPER NIE** is, en dat ek **WEET / NIE WEET** waar dit vandaan kom nie. Ek doen ook vrywillig afstand van alle belange daarin, indien enige, ten gunste van die DBV en ek versoek dat die dier hanteer word soos wat die DBV goed ag. Daar word uitdrukiik ooreengekom dat nog die DBV nog sy amptenare, en werknemers enige verpligtinge het, teenoor my ten opsigte van die hantering van die dier/e. Ek bevestig dat ek bo die ouderdom van agtien (18) jaar is. **Sien ook die "Voorwaardes" op die agterblad.**

Signature	Witness for Society
FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ ____________ On Date: ____________

loaded

ADMISSION, ASSESSMENT AND HISTORY RECORD

DBV SPCA
Garden Route

KENNEL No. ~~ISO~~ K32				ADMISSION No. MBY8999		
Stray	Surrender X	Abandoned	Returned	Impounded	Confiscated	Request for euthanasia
Date in 09/01/26			Time in		Date for release	

IDENTIFICATION & LOST AND FOUND				Lost & Found checked		Yes / No	Lost & Found Date checked	
Microchip/Collar or ID tag found		Yes / No	Date scanned or checked	09/01/26	Microchip or ID Tag number	None		

DESCRIPTION & HISTORY					
Dog X	Cat	Other species (Specify) B / I			
Breed	Poodle X	Colour and Markings Brindle			
Condition	Good	Sex ♂	Age		
Temperament	Good	Sterilisation details None	Name		
Coat	Tail	Teeth Condition	Ears Up	Size Puppy	
Area found / collected from	Da nova			Date 09/01/26	
Reason for surrender	Cant keep them all				

ASSESSMENT		
GOOD WITH:	Yes	No
Children		
Cats		
Other Dogs		
Livestock/Other		
DO THEY:	Yes	No
Jump Fences		
Run Away		
COMMENTS:		

Surrendered by / Found by		Name	E. Burmeister
Residential Address	111 Markiser 14 Da Nova		
Postal Address	None		
Tel (H) None	Tel (W) None	Cell 084 061 3653	
Email	E.burmeister@gmail.com		
Donation R 200-00	Cash	Card	EFT (Receipt No.) 5636

PLEASE INSIST ON A RECEIPT

Confiscated: OB No: N/A Case No: N/A Inspector: N/A

STATEMENT OF SURRENDER

I do hereby certify that **I DO / DO NOT** own the animal/s described above, that **IT IS / IT IS NOT** a stray and **I DO / DO NOT** know where it comes from. I also freely surrender all interest, if any, therein to the SPCA, and I request that the animal be dealt with as deemed advisable in the discretion of the SPCA. It is expressly agreed that neither the SPCA nor its officers and employees will incur any obligation to me on account of such disposition of said animal/s. I confirm that I am over the age of eighteen (18) years of age. **Also see" Conditions on reversed side.**

Hiermee verklaar ek dat ek dier/e hierbo beskryf. **~~BESIT~~ / N BESIT NIE**, dat dit 'n **RONDLOPER / NIE RONDLOPER NIE** en dat ek **~~WEET~~ / NIE WEET** waar dit vandaan kom nie. Ek do ook vrywillig afstand van alle belange daarin, indien enige, t gunste van die DBV en ek versoek dat die dier hanteer word so wat die DBV goed ag. Daar word uitdrukiik ooreengekom dat n die DBV nog sy amptenare, en werknemers enige verpligtin het, teenoor my ten opsigte van die hantering van die dier/e. bevestig dat ek bo die ouderdom van agtien (18) jaar is. **Sien o die "Voorwaardes" op die agterblad.**

Signature	Witness for Society
FOR OFFICE USE: PENDING ADOPTION	Details of second Applicant
Details of first Applicant	Details of third Applicant

Claimed ☐ Adopted ☐ Euthanased ☐ Died ☐ Other ☐ _____ On Date: _____

MY OWNER

NAME: Giovanna Furness

POSTAL ADDRESS:

STREET ADDRESS: 67 Bruns Road

Mosselbay

HOME PHONE:

WORK PHONE:

CELL PHONE: 072 370 3521

BREEDER DETAILS:

ME

SPECIES: CANINE

BREED: MALTESE X TERRIER

COLOUR: BRINDLE

SEX: Female

DATE OF BIRTH:

MICROCHIP / TATTOO: 992003000579471

FEATURES/MARKS:

NEXT VACCINATION DUE

DATE	DATE	DATE

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE
10/01/26	Nobivac Puppy DP PLUS Batch: A256B01 Exp.: 06-2027 + milpro	
09/02/26	352210 R3 + milpro	
10/03/26	352210 R3 + milpro Merieux inactivated RABISIN R 924507 Lot/Batch: F72195 Ut. av./Exp.: 13/07-2026	

I WAS VACCINATED ON

DATE	VACCINE AND BATCH NO.	VET SIGNATURE

One of the very best things you can do to give me a long and healthy life is to vaccinate me against common diseases.
My mother gave me immunity during my first few weeks by disease-fighting antibodies in her milk.
Now it is up to you to keep my vaccinations up to date as advised by my vet!

Nobivac® DHPPi (Reg. No. G2377 Act36/1947), **Nobivac® KC** (Reg. No. G2604 Act 36/1947). **Nobivac® Canine-1 DAPPV** (Reg. No. G3892 Act 36/1947), **Nobivac® Feline-HCP** (Reg. No. G3880 Act36/1947), **Nobivac® Tricat Trio** (Reg. No. G3712 Act 36/1947), **Nobivac® Rabies** (Reg. No. G2207 Act 36/1947), **Quantel® Tablets** (Reg. No. G2717 (Act 36/1947) Contains Praziquantel (isoquinoline) 50 mg/tablet and Fenbendazole (benzimdazole) 500 mg/tablet. **Exitel Plus** (Reg. No. G4226 Act 36/1947) Contains Praziquantel 50 mg, Pyrantel 50 mg (equivalent to 144 mg pyrantel embonate) and Febantel 150 mg. **Exitel Plus XL** (Reg. No. G4227 Act 36/1947) Contains Praziquantel 175 mg, Pyrantel 175 mg (equivalent to 504 mg pyrantel embonate) and Febantel 525 mg. **Bravecto®** (Reg. No. G4083 Act 36/1947) each chew contains 25 mg Fluralaner per kg body weight.

Posbus 74
Trichardt 2300
Straat Adres Trichardt
Voortrekkerstraat
Universele Takkode 250655
fnb.co.za
Verlore Kaarte 087-575-9406
Rekeningnavrae 087-575-9404
Verhoudingsbestuurder Chenay Manchest
chenay.manchest@fnb.co.za
(087) 312-2810

BBST208 006891
MRS GIOVANNA FURNESS
67 BRUNS ROAD
MOSSEL BAY
6506

Kliënt BTW Registrasienommer Nie Verskaf
Bank BTW Registrasienommer 4210102051

FNB Fusion Premier Account : 62206363202
Belastingfaktuur/Staatnommer : 208
Staat Periode : 4 Februarie 2026 tot 4 Maart 2026
Staatdatum : 4 Maart 2026

Staatsaldo's	
Openingsaldo	13,503.18 Dt
Afsluitingsaldo	13,546.51 Dt
# BTW is ingesluit teen 15.00%	42.34 Dt
Totale BTW (ZAR)	42.34 Dt

Bankkoste	
Diensfooie	255.60 Dt
Kontant Deposito Fooie	0.00
Kontant Hanterings Fooie	0.00
Ander Fooie	69.00 Dt

Rentekoers	
Kredietsaldo**	Trapvlak
Debietsaldo*	20.00%
Fasiliteitlimiet	15,000.00

Transaksies in RAND (ZAR)

Datum	Beskrywing		Bedrag	Saldo	Opgeloopte Bank-koste
05 Feb	Petrol Aankope Engen Ocean View	410588*6863 03 Feb	400.00	13,903.18	
06 Feb	Smart-Ap Betaling Van Bardins Jewellers		2,725.00Kt	11,178.18	
06 Feb	POS Aankope S2S*Tobaccohouse	410588*6863 04 Feb	340.00	11,518.18	
07 Feb	POS Aankope Salon Escape 20	410588*6863 05 Feb	350.00	11,868.18	
09 Feb	Magband Debiet Vodacom 0477978908 I2763052		403.49	12,271.67	
10 Feb	Rtc Krediet Bardins Jewellers	18Bo747680	7,600.00Kt	4,671.67	
10 Feb	Smart-Ap Oorplasing Na Pay Arrears Now		7,202.95	11,874.62	
10 Feb	Smart-Ap Betaling Van Bardins Jewellers		900.00Kt	10,974.62	
10 Feb	POS Aankope Cafe Gannet	410588*6863 06 Feb	550.00	11,524.62	
11 Feb	POS Aankope Yoco *Icu Tucksho	410588*6863 09 Feb	70.00	11,594.62	
11 Feb	POS Aankope Temu	410588*6863 08 Feb	368.00	11,962.62	
11 Feb	POS Aankope Temu	410588*6863 08 Feb	447.00	12,409.62	
11 Feb	Petrol Aankope Engen Ocean View	410588*6863 09 Feb	800.00	13,209.62	
12 Feb	POS Aankope Reactivate-Retro A	410588*6863 10 Feb	140.00	13,349.62	
12 Feb	POS Aankope PNA Mosselbaai	410588*6863 10 Feb	246.83	13,596.45	
12 Feb	POS Aankope Reactivate-Retro A	410588*6863 10 Feb	255.00	13,851.45	
13 Feb	#Diensfooi #Eft Charge-FNB To Other		2.00	13,853.45	
13 Feb	Int Betaling Na Squash	Giovanna Box League	120.00	13,973.45	
13 Feb	POS Aankope Superspar Mossel Ba	410588*6863 11 Feb	302.98	14,276.43	
14 Feb	Smart-Ap Oorplasing Van Kids		160.00Kt	14,116.43	
14 Feb	Payshap Credit Mark		1,125.00Kt	12,991.43	
14 Feb	POS Aankope Market Cafe	410588*6863 12 Feb	40.00	13,031.43	
14 Feb	POS Aankope Ackermans Langeberg	410588*6863 12 Feb	429.85	13,461.28	
16 Feb	POS Aankope Mugg And Bean L 22	410588*6863 13 Feb	200.00	13,661.28	
17 Feb	POS Aankope Yoco *Icu Tucksho	410588*6863 14 Feb	50.00	13,711.28	

Tak Nommer	Rekeningnommer	Datum	DDA Q2/94/OR/KM/KM/PA/P6/A6/NC/Y	FN
391	62206363202	2026/03/04	FNB FUSION PREMIER ACCOUNT	

XS12FN01: 62206363202

REPUBLIC OF SOUTH AFRICA
NATIONAL IDENTITY CARD

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Date of Issue
22 MAY 2018

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