

GIFT REGISTER FOR THE PERIOD 01 APRIL to 30 SEPTEMBER

ANNEXURE B

DIRECTORATE:

Declaration number	Date received	Receiver				Gift description		Donor details		Noted or Condoned / Not condoned & Reasons
		Initials and surname	Identity number	PERSAL number	Relationship with donor	Nature and description of gift	Estimated value	Person or Company name and address	Contact details (Name and telephone number)	

<p>Checked by SCM Champion: Print name:</p> <p>.....</p> <p>.....</p>	<p>Signature:</p> <p>.....</p> <p>Date:</p>	<p>Authorised by: Print name:</p> <p>.....</p> <p>.....</p>	<p>Signature:</p> <p>.....</p> <p>Date:</p>
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