

29/10/2006/7

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AFRICAN NATIONAL CONGRESS

CLEARANCE APPLICATION FORM.

(To be complete in triplicate)

\*This Form must be submitted fourteen days in advance.

TO: CHIEF REPRESENTATIVE

FROM: OFFICE OR DEPARTMENT OF: P.M.C.

NAME OF REQUISITIONER: Andrew Mkhize

NAME OF VISITOR:

AREA/REG ON OF DEPARTURE

MATHOLE MOTSHEGOA

ADDRESS (HOME):

AGE:

OCCUPATION:

DATE OF EXPECTED ARRIVAL: 20.10.89.

POINT OF ENTRY: LUSAKA INTERNATIONAL AIRPORT

PURPOSE OF VISIT/MISSION: CONSULTATIONS

DURATION OF STAY: 7 DAYS

APPROVED BY HEAD/DEPUTY OF DEPARTMENT: Mkhize

FINAL APPROVAL BY S.G.O.:

DATE: 20.10.89

FOR OFFICIAL USE ONLY:

REMARKS: