

To whom it may concern:

PERSOL

AUTHORISATION LETTER

I,

Full names and Surname: _____

RSA ID number: _____

SADF force number: _____

Residential address: _____

hereby authorise the official of the veterans Aid Fund to obtain the following printouts, on my behalf in order for me to be registered on the database of the Department of Military Veterans.

EPN01 EPG14 EPC01 EPN10 EHG01 ESN20
ETN20

Signed at _____ on this _____ day of _____ 20____

Name & Surname

Signature

Name & Surname Witness

Witness Signature