



**FAXED COPY OF BROKER
ACCREDITATION CERTIFICATE**

Please phone (012) 4310500 and quote the Broker Number on this Certificate to Verify Accreditation if in doubt

To Fax:

CERTIFICATE OF ACCREDITATION AS A HEALTH CARE BROKER

THIS SERVES TO CONFIRM THAT

Full Names:	CHARLENE JANSEN VAN RENSBURG
Accreditation Number:	BR30297
Identity Number:	7505120051082
Accreditation Date:	August 29, 2016
Expiry:	August 29, 2018

**HAS BEEN ACCREDITED AS A HEALTH CARE BROKER IN
TERMS OF SECTION 65(4) OF THE MEDICAL SCHEMES ACT,
ACT 131 OF 1998.**

A handwritten signature in black ink, appearing to be 'D. Lehtj', written over a horizontal line.



8/30/2016

.....
Registrar of Medical Schemes

.....
Date

CONFIDENTIALITY WARNING: This message is intended for the individual or entity to which it is addressed and contains information which is strictly confidential. Should you receive this transmission in error, kindly contact the sender immediately and destroy this transmission. Thank you.