

Philna Moelich

From: Lynn <lynn@elevationstud.co.za>
Sent: 11 November 2020 08:59 AM
To: 'Philna Moelich'
Subject: Melkbok Nuwe lid - D Uijs
Attachments: IMG_20201111_0002.pdf

More Philna

Hoop dit gaan goed.

Hier is nog n aansoek vir lidmaatskap vir die Melkbokke. Die betaaling is aangeheg.
Hy het nie gese wat se rash y het nie maar ek dink dit is Saanen en Toggenberg.

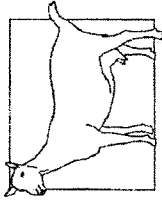
Laat weet as daar nog iets is asb.

Groete

Lynn



Virus-free. www.avast.com



APPLICATION FOR MEMBERSHIP
AANSOEK OM LIDMAATSKAP

Postbus / P.O. Box 36 DE RUST 6650
Tel: 044 251 6022
E-pos / E-mail: info@milkgoats.co.za
Webblad / Webpage: www.milkgoats.co.za

PARTICIPANT / DEELNEMER

(The Participant is the owner of the animals / Die Deelnemer is die eienaar van die diere)

NAME - EKONS,

1. TITLE (indicate PROF., DR., MR., MRS., MISS., etc.)

TITEL (maak PROF., DR., MNR., MEV., MEJ., ens.)

2. INITIALS / VOORLETTERS DL / (NAME / NAAM) Piek

3. SURNAME / VAN

WILLIS

4. MEMBERSHIP NAME (if not to be registered under surname or an individual)

LIDMAATSKAPNAAM (indien nie geregistreer word onder die van of as dit nie 'n individu is nie)

MILK GOATS FARM

ID. NUMBER:

5. ID. NOMMER: 9301155177085

ADDRESS OF APPLICANT / ADRES VAN AANSOEKER

6. ADDRESS LINE 1

ADRESLYN 1 11 Bosfonteinstraat

7. ADDRESS LINE 2

ADRESLYN 2 MALULA ESTATE

8. ADDRESS LINE 3

ADRESLYN 3 Leimale

9. POSTAL CODE TELEPHONE NUMBER
POSKODE 015551 TELEFOONNUMMER 073 15452886

FAX CELL
FAXS: () SEL: 0735452886

10. EMAIL ADDRESS
E-POS ADRES: shopdick@gmail.com

11. LANGUAGE IN WHICH CORRESPONDENCE IS REQUIRED:
TAAL WAARIN KORRESPONDENSIE VERLANG WORD: AFRIKAANS ☒ ENGELS ☐

DO HEREBY APPLY FOR PARTICIPATION / DOEN HIERMEE AANSOEK OM DEELNAME

12. PARTICIPATION REQUIRED AS FROM D D M M C C Y Y
DEELNAME WORD VERLANG VANAF 10/1/11 11/2/10

TYPE OF PARTICIPATION FOR WHICH APPLICATION IS MADE
TYPE DEELNAME WAARVOOR AANSOEK GEDOEN WORD

(INDIVIDUAL PARTICIPANT) INDIVIDUELE DEELNEMER ☒ COMPANY / MAATSKAPPY ☐
PARTNERSHIP / VENNOOTSKAP ☐ NUMBER OF PARTNERS / AANTAL VENNOTE ☐
BODY CORPORATE / REGSERSOONLIKHEIDSLIGGAAM ☐

13. WERE YOU FORMERLY OR ARE YOU AT PRESENT A PARTICIPANT OF ANY BREED SOCIETY WITH REGARD TO THE SAME OR ANY OTHER BREED?
IS U HUIDIGLIK OF WAS U VOORHEEN 'N DEELNEMER VAN ENIGE TELERSGENOOTSKAP TEN OPSIGTE VAN DIESELFDE OF ENIGE ANDER RAS? YES/JA ☐ NO/NEE ☒

IF YES, STATE HEREUNDER THE BREED SOCIETY AND YOUR PARTICIPANT NUMBER, IF AVAILABLE.
INDIEN JA, MELD HIERONDER VAN WELKE GENOOTSKAP EN VERSTREK U DEELNERNOMMER, INDIEN BESKIKBAAR.

BREED SOCIETY: MEMBER NUMBER
RASGENOOTSKAP: LIDNUMMER: _____

HERD PARTICULARS / KUDDEBESONDERHEDE

KEEPER / OPSIGTER

(The Keeper is the person where the animals are, if this person is the same as the participant, skip (items 1,2,3) / Die Opsigter is die persoon by wie die diere loop, indien hierdie persoon dieselfde is as by die deelnemer, los (items 1,2,3)

1. TITLE (indicate PROF., DR., MR., MRS., MISS., etc.)
TITEL (meld PROF., DR., MNR., MEV., MEJ., ens.) M L _ _ _ _ _

2. INITIALS / VOORLETTERS D S _ _ _ _ _

3. SURNAME / VAN WILLS

4. FARM NAME
PLAAS NAAM WILLY GOOTSI FARM

5. TOWN OR CITY NEAREST TO YOUR FARM / DORP OF STAD NAASTE AAN U PLAAS
Leopoldville

POSTAL ADDRESS WHERE YOUR CORRESPONDENCE MUST BE SENT TO:
MELD DIE POSADRES WAARHEEN U KORRESPONDENSIE GESTUUR MOET WORD

6. ADDRESS LINE 1
ADRESLYN 1 11 Biosipat ry

7. ADDRESS LINE 2
ADRESLYN 2 M. Mulla Estate

8. ADDRESS LINE 3
ADRESLYN 3 Leopoldville

9. POSTAL CODE
POSKODE 101555 TELEPHONE NUMBER 0731 545 2886

FAX/FAXS: 11 CELL/SEL: 0735452886

10 E-MAIL ADDRESS
E-POS ADRES: shopdirt@gmail.com

11. MY CHOICE FOR HERD DESIGNATION MARKS ARE:

Please supply two [2] combinations in order of preference

MY KEUSE VIR KUDDEKENNERK IS: Verstrek asb. twee [2] kombinasies in orde van voorkeur

A) W/L B) U/M C) U/F

D) W/S E) L/L F) L/L

12. MY/OUR CHOICE FOR A HERD NAME (PREFIX) IS/HY/ONS KEUSE VIR KUDDENAAM (VOORVOEGSEL) IS:

(Please supply two [2] combinations in order of preference) / (Verstrek asb. twee [2] keuses in orde van voorkeur) / Names of towns and cities are not allowed. / Name van dorpe en stede word nie toegelaat nie

13. PREFIX / VOORVOEGSEL
A) WILLY GOOTSI STUD (2nd choice)

3

B) UMLIL STAD (1st choice)

14. Copy of I.D. must be accompany by application form / Afskrif van I.D. moet vergesel word met aansoekvorm.

15. Type of goat / Tipe bok waarvoor aansoek om lidmaatskap gedoen word.
SAANEN / ☒ TOGGENBURG / ☒ BRITSH ALPINE / ☐ BLUNTE DEUTSCHE EDELZIEGE / ☐

16. Which is your nearest town / Waar is u naaste dorp Lephalale

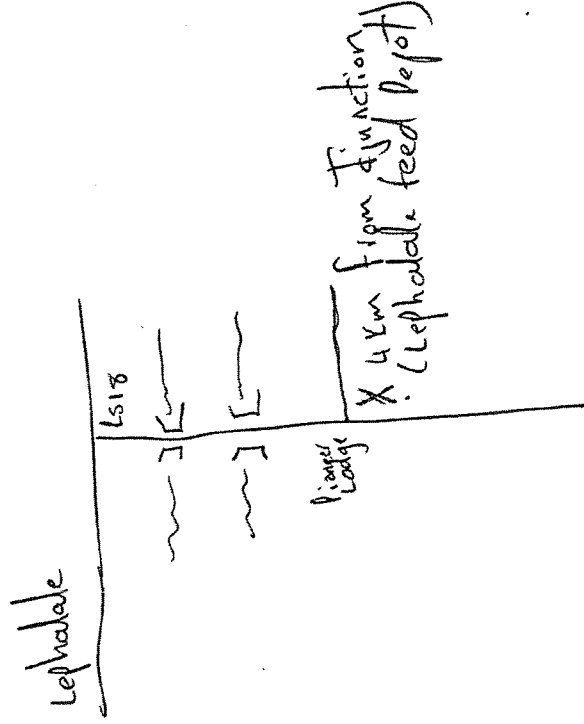
17. Distance from town / Afstand van dorp 5 km

18. On which main road and in which direction is your farm? / Op watter hoofpad en in watter rigting is u plaas?
LS18

19. Kindly furnish a good indication of the road to your farm with distance in kilometers / Verstrek asseblief 'n duidelike skets waarop u die pad na u plaas aandui met afstande in kilometers.

SKETS

SKETCH



I AGREE TO OBSERVE AND BE BOUND BY THE CONSTITUTION AND THE RULES, REGULATIONS AND BYE-LAWS OF THE SA MILCH GOAT SOCIETY AND SA STUDBOOK.

EK ONDERNEEM OM MY AAN DIE BEPALINGE IN DIE GRONDWET EN DIE REÛLS, REGULASIES EN VERORDENINGE VAN DIE SA MELKBOKTELEERS GENOOTSKAP EN SA STAMBOEK TE ONDERWERP.

PROOF OF EFT TRANSFER IS ATTACHED

BEWYS VAN ELEKTRONIESE BETALING HIERBY AANGEHEG

S.A. MILCH GOAT ASSOCIATION FEE / MELKBOKTELEERSVERENIGING FOOIE

ENTRY FEE / INTREEFOOI

R 1600.00

LEDEGELD / SUBSCRIPTION

R 1100.00

TOTAL / TOTAAL

R 2 700.00

BANKBESONDERHEDE

FNB, Rek nr/Account number: 6281 4529 931, Tak/Branch: 250 655

EPOS DEPOSITO STROKIE DEUR NA info@milkgoats.co.za

Email proof of Payment to info@milkgoats.co.za

SA STAMBOEK FOOIE / S.A. STUDBOOK FEES:

PARTICIPATE / DEELNAME

R 529.00

REGISTRATION OF PREFIX / VOORVOEGSEL REGISTRASIE

R 713.00

TOTAL / TOTAAL

R1242.00

BANKBESONDERHEDE

Standard Bank, Rekeningnommer/Account number: 041191356, Tak/Branch: Brandwag 055 534

EPOS DEPOSITO STROKIE DEUR NA info@milkgoats.co.za

Email proof of Payment to info@milkgoats.co.za



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In the event of a partnership one of these documents must be completed for EVERY partner in the partnership and these documents must accompany the

11EK,

1. INITIALS

VOORLETTERS!

2. NAME AND SURNAME / NAAM EN VAN

3. TITLE (State PROF., DR., MR., MRS., MISS., etc.)

TTTTEL (Neld PROF., DR., MNR., MEV., MEJ., ens.) /

4. ADDRESS LINE 1

ADRESLYN 1

5. ADDRESS LINE 2

ADRESLYN 2

6. ADDRESS LINE 3

ADRESLYN 3

7. POSTAL CODE

POS/KEY 1 1 1 1 TELEPHONE NUMBER ()
CELL/SEL _____

2. E-MAIL ADDRESS

E-POS ADRES

THAT APPLIED FOR MEMBERSHIP UNDER THE MEMBERSHIP NAME:

WAT AANSOEK GEDOEN HET OM LIDMAATSKAP ONDER DIE LIDNAATSKAP NAAM:

DO HEREBY AGREE AND AM BOUND TO BE HELD JOINTLY AND SEPARATELY RESPONSIBLE FOR PAYMENT OF ANY MONIES DUE AND PAYABLE TO THIS SOCIETY AS MAY BE PAYABLE FROM TIME TO TIME

ONDERNEEM EN IS GEBOUDE OM GESAMENTLIK OF AFSONDERLIK VERANTWOORDELIK GEHOUD TE WORD VIR BETALING VAN ENIGE GELDE WAT AAN HIERDIE GENOOTSKAAP VAN TYD-TOT-TYD BETAALBAAR MAG WEES.

SIGNED AT

THIS DAY



ONDERTEKEN TE Lepreale HIERDIE 4 November OF 2020 DAG VAN 2020

X

*Gevolgmegtigde verteenwoordiger van vennootskap soos bepaal op 'n vergadering van die vennote gehou op _____ 20 ____

*Authorised representative of partnership as determined at a meeting of partners held on _____ 20 ____

Naam / Name: _____

Adres / Address: _____

X

SIGNATURE OF PARTNER / HANDETEKENING VAN VENNOOT

X

in my / our capacity as Director of the Company / individual members of the close corporation, declare myself / ourselves prepared in our personal capacities to be held responsible for the payment of the outstanding debts of the Company / Close Corporation.

In my / our capacity as Director van die Maatskappij / individuele lede van die Beslote Korporasie, verklaar myself / onsself hiermee binne my / ons persoonlike hoedanigheid verantwoordelik te wees vir die versiening van die uitstaande skuldke van die Maatskappij / Beslote Korporasie.

Geleken te / signed at _____ on this / op die _____ day of / dag van 20 _____.

"Gevolgsmagtigde verteenwoordiger van maatskappy, private maatskappy of regpersoon soos bepaal op 'n vergadering van die direkteure / lede gehou op 20"

"Authorised representative of company, private company or body corporate as determined at a meeting of directors /
die direksie / lede genou op _____, 20____"
members held on _____, 20____"

Naam / Name: _____

Adres / Address: _____

[illegible]

SIGNATURES / HANDTEKENINGE

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SOCIETY OF SOUTH AFRICA
GENOOTSKAP VAN SUID-AFRIKA

9

2. RUE WOON- EN POSADRES

van adres veranderhet, of indien besond-
er van u geregistreerde woon- en
die sake.

by
stratenaam en/of kommunale v
ANISCEWING VAN ADRESVERAND-
ERING, wat
in die identiteitsdokument is gebruik
word om die
a meld en moet dit freedien word by of
sake- of sakenkantoor van die DEPARTE-
MENT VAN

ISS
UNIT
Age

REGISTERED RESIDENTIAL AND POSTAL ADDRESS

1. Keep the proof of your REGISTERED RESIDENTIAL AND POSTAL ADDRESS in this pocket

2. "If you have changed your address, or if particulars of your present address, e.g. name of street and/or street number, have been changed, the NOTICE OF CHANGE OF ADDRESS must be placed in the pocket at the back of the Identity Document. It must be used for the change and it must be lodged in, or posted to, the regional district office of the DEPARTMENT OF HOME AFFAIRS."

1
I.D. No. 930115 5177 08 5



S.A. -BURGER/S.A. CITIZEN

VAN/SURNAME

UIJS

VOORNAME/FORENAMES

DIRK CORNELIS

GEBOORTEDISTRIK-OF-LAND/
DISTRICT OR COUNTRY OF BIRTH

SUID-AFRIKA

GEBOORTEDATUM/
DATE OF BIRTH

1993-01-15

DATUM UITGEREIK
DATE ISSUED

2009-08-04

UITGEBEN OP ORDE VAN DIE
DIREKTEUR-GENERAAL:
SINNELANDSE SAKE

ISSUED BY AUTHORITY OF THE
DIRECTOR-GENERAL:
HOME AFFAIRS



COMMISSIONER OF OATHS (RSA)
CHARL JOHANNES VILJOEN CA (SA)
Unit A3, The Beach Head
10 Niblick Way
Somerset West

2019-03-14

CERTIFIED A TRUE COPY
OF THE ORIGINAL



FNB

NOTIFICATION OF PAYMENT

Dear: Payment Notification

First National Bank hereby confirms that the following payment instruction has been received:

Date Actioned : 2020/11/05
Time Actioned : 16:16:58
Trace ID : GHZQGWXG

Payer Details

Payment From : JONELLE
Cur/Amount : ZAR1242.00

Payee Details

Recipient/Account no : ..191358
Name : SA Studbook
Bank : STANDARD BANK OF S.A.
Branch Code : 051001
Reference : DC UIJS

END OF NOTIFICATION

To authenticate this Payment Notification, please visit the First National Bank website at fnb.co.za, select the "Verify Payments" link and follow the on-screen instructions

Our customer (the payer) has requested First National Bank Limited to send this notification of payment to you. Should you have any queries regarding the contents of this notice, please contact the payer. First National Bank Limited does not guarantee or warrant the accuracy and integrity of the information and data transmitted electronically and we accept no liability whatsoever for any loss, expense, claim or damage, whether direct, indirect or consequential, arising from the transmission of the information and data.

Disclaimer:

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UMILK GOATS FARM

NUWE DEELNEMER

1. DEELNEMER NO. 10619161319191
2. ONTVANG OP 1111111121012101
3. BETALING ONTVANG ✓

KONTROLE LYS	/ /	Voorbereiding	/ /	Boek (skryf)
	/ /	Lidnommer	/ /	Briewe
			/ /	Padkaart Iris
			/ /	Skandeer Ontvangs
			/ /	Diere saam aansoek
			/ /	Prestasie toetsing aktief
				Melk, Vleis, Kleinvee
				melk
				SESSIE

IRIS / ✓ / Skep lid / 000 / TOG & SMG

Voltooi / ✓ / Skep lid / RAS /

Voltooi adres & inligting (maint) / 000 /

/ ✓ / Voltooi adres & inligting (maint) / RAS /

/ ✓ / Dist (SMU) (user group)

/ ✓ / MMNM -(MEM, NON-MEM, ISP,)

/ ✓ / PERF -(STUD)

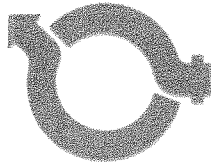
/ ✓ / MTYP -(01, 02, 03,)

Extentions

/ ✓ / Skep voorvoegsel (UMILK)

/ ✓ / KKM (UI) DATUM AKTIEF 1011111121012101

.....



SA STAMBOEK
SA STUDBOOK

Suid-Afrikaanse Stamboek- en Diereverbeteringsvereniging
(Geregistreer in terme van Wet 62 van 1998)
South African Stud Book and Animal Improvement Association
(Registered in terms of Act 62 of 1998)

Adres/Address:
Telefoon/Telephone:
Faks/Fax:
e-Pos/Mail:
Internet:

Posbus / PO Box 270 • BLOEMFONTEIN • 9300
(051) 4100900
(051) 447 3964
info@studbook.co.za
<http://www.studbook.co.za>



CERTIFICATE
OF QUALITY
Valid until 31 Dec 2024

Lid van die Internasionale Komitee vir Diereverbetering
Member of the International Committee for Animal Recording

Verw./Ref.: 0696399 (16/11)
Datum/Date: 2020-11-16

UMILK GOATS FARM
MR. D.C. UIJS
1 BOSPATRYS
MALULA ESTATE
LEPHALE
0555

Geagte Meneer

AANSOEK OM DEELNAME

Ons wil u graag by SA Stamboek as stoetteler en as 'n lid van die SA Melkboktelersgenootskap verwelkom vir die ras Saanen, Togenbergers, British Alpine en Bunte Deutsche Edelziege. Dankie vir u deelname aan die verbetering van Suid-Afrika se diere. Ons vertrou dat die Internasionaal erkende aantekeningstelsel, waarop u data aangeteken en verwerk word, vir u van groot waarde sal wees in u poging om u diere te verbeter.

Die volgende deelnemernommer, voorvoegsel en kuddekenmerkletters is aan u toegeken:

Deelnemernommer:	0696399 SMG, TOG
Voorvoegsel:	UMILK
Kuddekenmerkletters:	UI
Effektiewe datum:	01-11-2020

U word versoek om altyd u unieke deelnemernommer in al u korrespondensie aan ons te meld. U kan staatmaak op die volle ondersteuning van hierdie Vereniging met enige hulp wat u mag verlang. Moet asseblief nie huiwer om ons te skakel indien u enige navrae het of hulp benodig nie.

Ons wens u sukses toe met die teel van u diere en vertrou dat u groot bevrediging sal put uit u pogings om u diere te verbeter.

Vriendelike groete,
PHILNA MOELICH
Pp
HOOFBESTUURDER