

ANNEXURE D: NOTICE OF INTERNAL APPEAL

A. Particulars of Vodacom

The Head of Vodacom				
082 Vodacom Boulevard				
Vodacom Valley				
Midrand				
1685				
or				
Private bag x 9904				
Sandton				
2146				
Telephone number: 087 289 6450 / 087 289 3501				
Email: accesslea@vodacom.co.za				
B. Particulars of the Complainant/Appellant				
(a) Details of the complainant or person who lodges the internal appeal must be given below.(b) Proof of the capacity in which the complaint/appeal is lodged, if applicable, must be attached.(c) If the complainant/appellant is a third party and not a person who originally requested the information, the particulars of the requestor must be given in paragraph C below.				
Full names and surname:				

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Postal Address:



elephone n	umber: Cellphone number:					
Fax: E-mail Address:						
. Par	ticulars of the Requestor					
	on must be completed ONLY if a third party (other than the requestor) lodged the					
Full names and surname:						
Identity number:						
). The	decision against which the complaint/internal appeal is lodged					
	decision against which the appeal is lodged with an X in the appropriate box					
	Refusal of request for access					
	Decision regarding fees prescribed in terms of section 54 of the PAIA Act					
	Decision regarding the extention of the period within which the request must be dealt wit					
	section 57(1) of the PAIA Act					
	Decision to grant request for access					
	Other					
. Gro	unds for complaint/appeal					
F						
If the prov	rided space is inadequate, please continue on a separate page and attach it to this form. Yo					

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State the ground on which the complaint/	appeal is based:			
State any other information that may be re	elevant in consid	ering the appeal:		
F. Notice of decision on complaint/	/appeal			
You will be notified in writing of the deci- in another manner, please specify the m with your request				
State the manner:				
Particulars of the manner:				
Signed at	this	day of	20	
_				

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Signature of the complainant/appellant

FOR INTERNAL USE ONLY						
Appeal received on	_ (date) by					
(Name and Surname of the person receiving the complaint/appeal)						
Outcome of the complaint/Appeal						
New Decision:						
DATE	SIGNATURE OF THE HEAD OF VODACOM					