

**INTEGRITY COMMISSION
REGISTER OF INTERESTS**

Request to Inspect Register of Interests

Name: _____

Address: _____

ID.No: _____

Documents Requested: _____

Time In: _____ Time Out: _____

Date: _____ Signature: _____

FOR OFFICIAL USE ONLY

Officer Supervising the Inspection: _____

Records Provided:

Signature: _____ Date: _____