



Society for the Prevention of Cruelty to Animals
Dierebeskermingsvereniging

NOTICE TO COMPLY

NAME & SURNAME:

PHYSICAL ADDRESS:

TEL. No.

ID No.

CELL No.

REG No.

You are hereby instructed to:

* Provide your dog Blue with
veterinary treatment for the open
wound. Will recheck after 24hrs for
more information contact Jeffrey on
0828703124

This notice has been issued in terms of the Society for the Prevention of Cruelty to Animals Act No 169
of 1993 and refers to the Animals Protection Act No 71 of 1962

SIGNED & ACCEPTED BY:

PLACE:

REPRESENTATIVE:

TIME:

SPCA: