



ATTENDANCE REGISTER FITNESS SESSION

09 November 2017

Name and Surname	Department/Unit	Designation	Tel	Fax	Cell	Email	Signature
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Margos Jackson	OTF	A.D.	838 234		063 329588		
M. H. Madadie	OTF	M.D.	838 2789		073 213050		
N. S. M. M. M.	OTF	U.A.O.	2634		079 5176115		
Leez Anthony	Fitw	MANAGER	888 2354				
Kame Lebone	OTF	Admin clerk	838 2348		883 871821		



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Name and Surname	Department/Unit	Designation	Tel	Fax	Cell	Email	Signature
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M. Pienaar	OTF	"	X2418				
P. Kimeri	OTF	A-0	X2414				
N. Williams	OTF	Sec	X2456				
A. Nogaala	OTF	Inten	2511				
L. Dirnisaane	OTF	A/O	2640				
T. Mtholo	OTF	Inten	254				
M. Molefi	OTF	C.B.					
P. Nogaali	OTF	Director	2408				



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