

REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HOME AFFAIRS

MEDICAL CERTIFICATE

CONDITIONS OF A RECURRENT NATURE

Although the person(s) may be generally in a good state of health and the time of the examination, it would be appreciated if the medical officer/practitioner could furnish details of any disease, condition or defect the person(s) has/have suffered and which might recur.

I hereby certify that I have examined the following person(s):	
1 Nablie May Pickett PEYTON.	5
2	6
3	7
4	8
and find him/her/them –	0
(a) not mentally disordered* or physically defective in any way;	
(b) not suffering from leprosy, veneral disease, trachoma, tuberculosis or other infectious or contagious condition;	
(c) generally in a good state of health;	
except for the following defects observed:	
(Please type or print)	
Name of person(s) Details regarding the disorder, disease or disability, the seriousness thereof and	
the treatment, if any, prescribed/recommended	
Official s	stamp and address of medical doctor/
	practitioner/hospital
	Dr. Patrick-CORREA
Signature of medical officer/practitioner	
101 100	3, Av. des Ambassades
Date	DAKAR SENEGAL Assistanto
	Av des Amba 2071
Int. code * "Mentally disordered" includes the following:	
290–299 All psychoses. 300 Neuroses.	
301 Personality disorders. 303-304 Addictions.	
308 Behaviour disturbances of childhood.	
310-315 All forms of mental retardation. 320-349 Epilepsy and all other forms of degeneration of the central	al narvous system
320-349 Epilepsy and all other forms of degeneration of the central nervous system.	



