

ANNEXURE 'B' MASTERS' PRESCRIBED FEE FOR INTER VIVOS TRUSTS

For use by Masters' Offices	
Receipt No / Bank Deposit Ref	
Amount received:	
Cianatura	
Signature:	
Date:	
Date.	

MASTERS' PRESCRIBED FEE FOR INTER VIVOS TRUSTS

MASTER OF THE HIGH COURT.	(NAME OF OFFICE)
WASTER OF THE HIGH COURT:	(NAIVIE OF OFFICE)
TRUST NAME:	
DONOR'S NAME:	
DONOR'S ID NUMBER, REGISTRATION NUMBER OR	CK NUMBER:
AMOUNT PAYABLE: R100,00	
* THE PRESCRIBED FEE IS PAYABLE IN TERMS NO. 57 OF 1988.	S OF SECTION 4(1) OF THE TRUST PROPERTY CONTROL ACT
* PROOF OF PAYMENT OF THE PRESCRIBED F THE TRUST DEED WHEN APPLICATION IS M.	FEE MUST BE SUBMITTED TO THE MASTER TOGETHER WITH ADE FOR REGISTRATION OF THE TRUST
DATE	FOUNDER

The details of our bank account are as follows:

NAME OF ACCOUNT: Dept. of Justice & Constitutional Development

BANK: ABSA ACCOUNT NUMBER: 4077507497

BRANCH CODE:

REFERENCE: Type of Service required and Master's Office:

e.g.

632005

MOH PTA TRUST (for Trusts at Pretoria Office),

MOH PTA + Estate number (for deceased and insolvent estates at Pretoria Office)

and MOH PTA COPIES (for copies of documents from Pretoria office).