



## CERTIFICATE OF ACCREDITATION AS A HEALTH CARE BROKER

*THIS SERVES TO CONFIRM THAT*

*Full Names:* **LEON MAREE STEENKAMP**

*Accreditation Number:* **BR 23568**

*Identity Number:* **5510235011080**

*Accreditation Date:* **2023-09-26**

*Expiry Date:* **2025-09-26**

**HAS BEEN ACCREDITED AS A HEALTH CARE BROKER  
IN TERMS OF SECTION 65(4) OF THE MEDICAL  
SCHEMES ACT, ACT 131 OF 1998.**



A handwritten signature, appearing to read 'Leon Steenkamp', is placed next to the digital seal.

Official CMS Digital Seal  
14/11/2023 09:59:29(UTC+00:00)  
I Accept

2023-11-14

Registrar of Medical Schemes

Date

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