



GFI Securities Holdings (Pty) Ltd and subsidiaries

Information (PAIA) Manual

**Prepared in accordance with section 51 of the Promotion of
Access to Information Act, (PAIA), 2000 (Act no. 2 of 2000)**

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1. Company Information

Name:

GFI Securities Holdings (Pty) Ltd, including subsidiaries:

GFI South Africa (Pty) Ltd

GFI International and Capital Market Brokers (Pty) Ltd

GFI African Money Brokers (Pty) Ltd

Managing Director:

Daniel Pienaar

Information Officer:

Ian Mackinnon, email: Ian.Mackinnon@gfisecurities.co.za

Physical Address:

Equity House , 18 Bompas Road ; Dunkeld West; Randburg; Gauteng; South Africa; 2196

Postal Address:

PostNet Suite #034, Private Bag X16, Craighall, 2024

Gauteng; South Africa

Telephone:

+2711 076 3800

Website:

www.gfigroup.com

2. Introduction

This manual is published in accordance with Section 51 of the Promotion of Access to Information Act, 2000 (“PAIA”). PAIA gives effect to the public’s constitutional right to have access to information that is required for the exercise or protection of any rights.

GFI is an inter-dealer broker facilitating deals in financial instruments between regulated entities on a matched principal or name give-up basis. GFI Securities Holdings (Pty) Ltd is exempt from the FAIS Act in respect of certain clients according to FSCA FAIS Notice 84 of 2019. GFI South Africa (Pty) Ltd and GFI International and Capital Market Brokers (Pty) Ltd are members of the Johannesburg Stock Exchange.

3. Availability of the Manual

This manual can be accessed at the physical address stated above or by emailing the Information Officer at Ian.Mackinnon@gfisecurities.co.za

It is also available on our website www.gfigroup.com

4. The Act

The ACT grants a requester access to records of a private body, if the record is required for the exercise or protection of any rights. If a public body lodges a request, the public body must be acting in the public interest.

Requests in terms of the ACT shall be made in accordance with the prescribed procedures, at the rates provided. The forms and tariff are dealt with in paragraphs 6 and 7 of the Act.

Requesters are referred to the Guide in terms of Section 10 which has been compiled by the South African Human Rights Commission, which will contain information for the purposes of exercising Constitutional Rights. The Guide is available from the SAHRC.

The contact details of the Commission are:

Postal Address: Private Bag 2700, Houghton, 2041

Telephone Number: +27-11-877 3600

Fax Number: +27-11-403 0625

Website: www.sahrc.org.za

5. Records Kept in terms of other legislation.

The Firm has records available in terms of various laws, including:

- Companies Act, 71 of 2008
- Consumer Protection Act, 68 of 2008
- Financial Intelligence Centre Act, 2017 (As amended.)
- Financial Markets Act No. 19 of 2012
- Income Tax Act, 58 of 1962
- JSE Interest Rate Derivatives Rules and Directives
- Prevention of Organised Crime Act, 121 of 1998
- Promotion of Access to Information Act, 2 of 2000
- Protection of Personal Information Act No. 4 of 2013
- Skills Development Act No. 97 of 1998
- Skills Development Levies Act No. 9 of 1999
- Unemployment Insurance Act No. 63 of 2001
- Unemployment Contributions Act No.4 of 2002
- Value Added Tax Act No. 89 of 1991

6. Form of Request

(as required in terms of Section 51(1)(e))

To facilitate the processing of your request, kindly follow the steps as set out below: a) Use the prescribed form (Form C), 'Appendix 1' in the manual. The prescribed form is also available on the website of the SAHRC at www.sahrc.org.za.

Address your request to the Information officer. c) Provide sufficient details to enable LFM to identify:

- The record(s) requested.
- The requester (and if an agent is lodging the request, proof of capacity)
- The form of access required.
- (i) The postal address or fax number of the requester in the Republic; (ii) If the requester wishes to be informed of the decision in any manner (in addition to written), the manner and particulars thereof.
- The right which the requester is seeking to exercise or protect, with an explanation of the reason the record is required to exercise or protect the right.

FORM C: REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY

D. Particulars of record

- (a) Provide full particulars of the record to which access is requested, including the reference number if that is known to you, to enable the record to be located.
- (b) If the provided space is inadequate, please continue on a separate folio and attach it to this form. The requester must sign all the additional folios.

1. Description of record or relevant part of the record:

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2. Reference number, if available:

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3. Any further particulars of record:

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E. Fees

- (a) A request for access to a record, other than a record containing personal information about yourself, will be processed only after a request fee has been paid.
- (b) You will be notified of the amount required to be paid as the request fee.
- (c) The fee payable for access to a record depends on the form in which access is required and the reasonable time required to search for and prepare a record.
- (d) If you qualify for exemption of the payment of any fee, please state the reason for exemption.

Reason for exemption from payment of fees:

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FORM C: REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY

F. Form of access to record

If you are prevented by a disability to read, view or listen to the record in the form of access provided for in 1 to 4 below, state your disability and indicate in which form the record is required.

Disability: <input style="width: 90%;" type="text"/>	Form in which record is required: <input style="width: 90%;" type="text"/>
Mark the appropriate box with an X .	
NOTES:	
(a) Compliance with your request for access in the specified form may depend on the form in which the record is available.	
(b) Access in the form requested may be refused in certain circumstances. In such a case you will be informed if access will be granted in another form.	
(c) The fee payable for access to the record, if any, will be determined partly by the form in which access is requested.	

1. If the record is in written or printed form:				
<input type="checkbox"/>	copy of record*	<input type="checkbox"/>	inspection of record	
2. If record consists of visual images - (this includes photographs, slides, video recordings, computer-generated images, sketches, etc.):				
<input type="checkbox"/>	view the images	<input type="checkbox"/>	copy of the images*	<input type="checkbox"/>
			transcription of the images*	
3. If record consists of recorded words or information which can be reproduced in sound:				
<input type="checkbox"/>	listen to the soundtrack (audio cassette)	<input type="checkbox"/>	transcription of soundtrack* (written or printed document)	
4. If record is held on computer or in an electronic or machine-readable form:				
<input type="checkbox"/>	printed copy of record*	<input type="checkbox"/>	printed copy of information derived from the record*	<input type="checkbox"/>
			copy in computer readable form* (stiffy or compact disc)	

*If you requested a copy or transcription of a record (above), do you wish the copy or transcription to be posted to you? Postage is payable.	YES <input type="checkbox"/>	NO <input type="checkbox"/>
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G. Particulars of right to be exercised or protected

If the provided space is inadequate, please continue on a separate folio and attach it to this form.
The requester must sign all the additional folios.

1. Indicate which right is to be exercised or protected:

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2. Explain why the record requested is required for the exercise or protection of the aforementioned right:

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FORM C: REQUEST FOR ACCESS TO RECORD OF PRIVATE BODY

H. Notice of decision regarding request for access

You will be notified in writing whether your request has been approved / denied. If you wish to be informed in another manner, please specify the manner and provide the necessary particulars to enable compliance with your request.

How would you prefer to be informed of the decision regarding your request for access to the record?

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Signed at this day of year

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SIGNATURE OF REQUESTER /
PERSON ON WHOSE BEHALF REQUEST IS MADE