







Ref:	20170617	02
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CERTIFICATE OF INTRODUCTION

The Consulate Section Royal Embassy of Saudi Arabia Canberra, Australia

On behalf of Canberra Muslim Community Inc. ACT, I/we wish to inform you that							
Mr/Mrs							
No.	Name	Date of Birth	Passport No.	Expiry Date	Relationship		
2							
1 2 3 4							
4							
THIS CERTIFICATE WAS ISSUED UPON THE REQUEST OF THE APPLICANT.							
Secretary/ PO /President Date of Issue:							