

## MARIKANA COMMISSION OF INQUIRY

### SUPPLEMENTARY INDEX TO EXHIBIT A2: POSTMORTEM REPORTS

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GW 7/15: Report on a Medico – legal Post – mortem Examination, Death Register No.270/2012  
AFFIDAVIT IN TERMS OF SECTION 212(4) OF ACT 51/1977

REPUBLIC OF SOUTH AFRICA

DEPARTMENT OF HEALTH, NORTH WEST PROVINCE

REPORT ON A MEDICO-LEGAL POSTMORTEM EXAMINATION

Police Station: BETHANIE CR No. 107/2012

To the Magistrate of BRITS

I, Shirley Mashilo, state under oath that I declare the following statement is true to the best of my knowledge and belief, and that I made this statement state in it anything that I know to be false, or which I do not believe to be true Knowing that if it is tendered in evidence that I will be liable to prosecution if I wilfully

I am in the service of the Provincial Department of Health, North West Province, as a Principal Medical Officer at Brits, Bojanala District.

I am registered with the Health Professions Council of South Africa as a Medical Practitioner. [Registration No: MP 0591254]

That at the Brits Forensic Pathology Services Centre, No. 3 Court Street, Brits.

On: **14 AUGUST 2012** at: **09:00**

I examined the body of an: **ADULT BLACK MALE**

This body was identified to me by: N.S MOHULATSI, Forensic Pathology Officer: Brits Forensic Pathology Services Centre, North West Department of Health, No. 3 Court Street, Brits

as being that of: **ADULT BLACK MALE**. Death Register No. 270/2012.

whose reputed age was: **YEARS**.

that the deceased was found dead

- (a) as informed on: **2012- 08 - 13** at **06h00** [Time of death was not established as the body was refrigerated prior to examination].
- (b) **01** day prior to my examination.

**THE CHIEF POSTMORTEM FINDINGS MADE BY ME ON THIS BODY WERE:**

- Multiple stab wounds on the body
- Stab wounds on the liver, spleen, stomach, heart and pericardium and both lungs
- Fracture of the skull

Forensic Pathology Services, Brits, Department of Health, North West Province



000742

GW 7/15: Report on a Medico – legal Post – mortem Examination, Death Register No.270/2012

15. LARGE BLOOD VESSELS: No abnormality detected

ABDOMEN

16. PERITONEAL CAVITY: Blood ± 1000ml

17. STOMACH AND CONTENTS: Stab wound on the stomach

18. INTESTINES AND MESENTERY: Blood on the mesentery

19. LIVER, GALL-BLADDER AND BILIARY PASSAGES: LIVER MASS: ...g. Stab wound on the liver

20. PANCREAS: No abnormality detected

21. SPLEEN: SPLEEN MASS: Stab wound on spleen

22. ADRENALS:

23. KIDNEYS AND URETERS:

RIGHT MASS: ...g. No abnormality detected

LEFT MASS: ...g. No abnormality detected

24. URINARY BLADDER AND URETHRA: No abnormality detected

25. PELVIC WALLS: No abnormality detected

26. GENITAL ORGANS: No abnormality detected

SPINE

27. SPINAL COLUMN: No abnormality detected

28. SPINAL CORD:

SPECIMENS RETAINED

Nature of specimens	Nature of investigation required	Disposal of specimens
Blood	Alcohol level. AM 183430/1	FPO Mohulatsi



000743

GW 7/15: Report on a Medico – legal Post – mortem Examination, Death Register No.270/2012  
ADDITIONAL OBSERVATIONS

1. History of stab wounds as per SAPS 180 form and report from Forensic Pathology Officer who attended the crime scene and collected the body.
2. Dissector: N.S Mohulatsi Forensic Pathology Officer.
3. Organs and body were not weighed as there is no weighing scale in the mortuary.

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Forensic Pathology Services, Britz, Department of Health, North West Province



C00744

GW 7/15: Report on a Medico - legal Post - mortem Examination, Death Register No.270/2012

**PRIMARY MEDICAL CAUSE OF DEATH**

As a result of my observations, I concluded that the cause/causes of death was/were:

**MULTIPLE STAB WOUNDS ON CHEST AND ABDOMEN**

I declare that I know and understand the contents of this statement  
I have no objection to taking the prescribed oath.  
I consider the prescribed oath to be binding on my conscience.  
I swear that this statement is true, so help me God.

Dated at BRITS, on the September 2012

Signature: 

Name: Dr. S. MASHILO

Qualification: BSC / M.B.Ch.B (MEDUNSA)  
DIP FORENSIC MED (SA)  
Designation: Principal Medical Officer

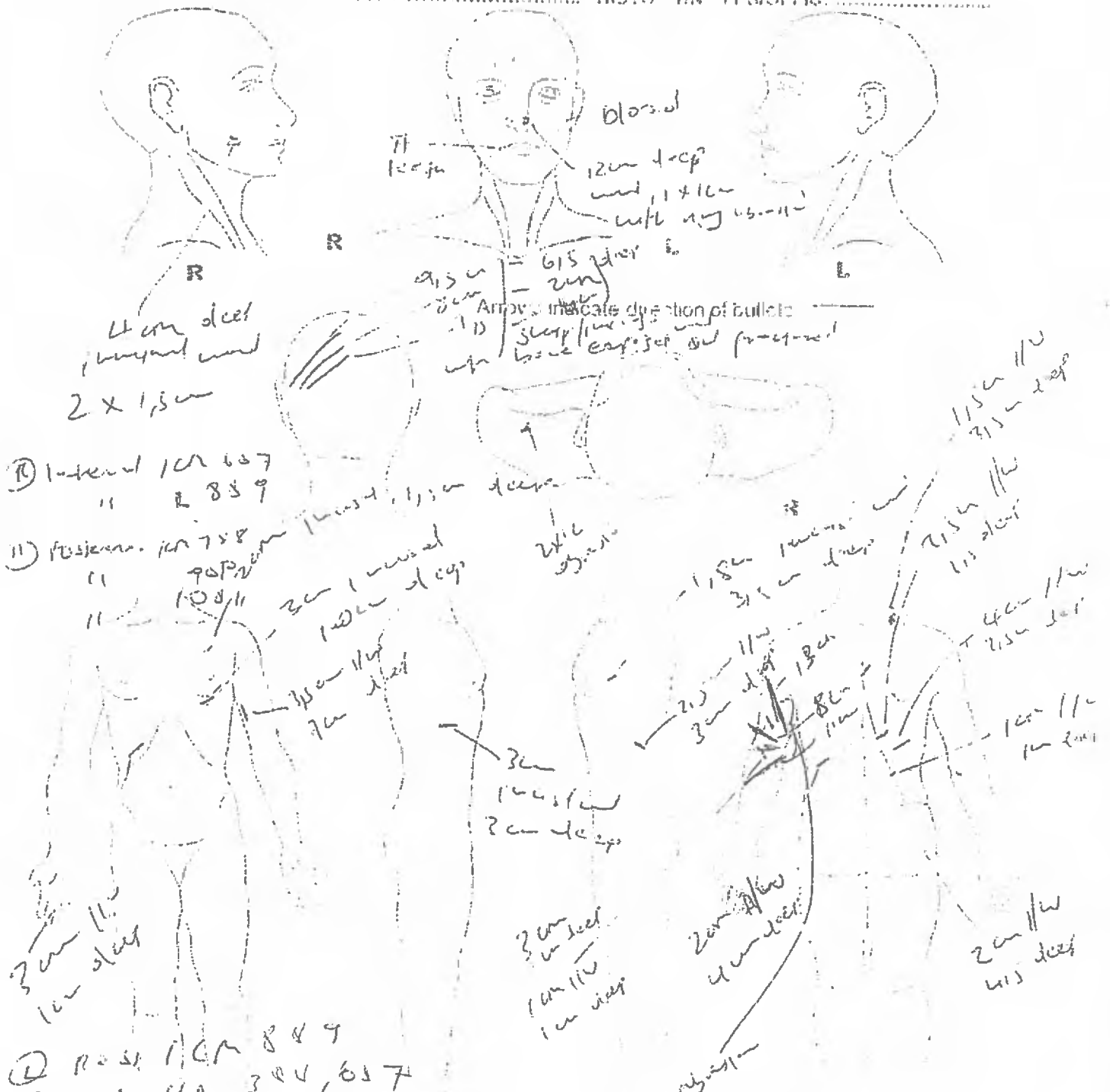
**ADDRESS: PHYSICAL**

FORENSIC PATHOLOGY SERVICES  
DEPARTMENT OF HEALTH, NORTH WEST PROVINCE  
BRITS POLICE STATION  
3 COURT STREET  
BRITS  
0250

TELEPHONE NUMBER: [012] 252 6809  
CELL PHONE NUMBER:  
FAX NUMBER:  
EMAIL:

000746

14/08/12 DISTRICT: ...  
 AGE: B (BALD) (ADULT) ... CHILD  
 DISSECTOR: ... HEIGHT: 1.80 m  
 ALCOHOL: AM 183430/11 WEIGHT: ...  
 TOXI: ... BULLET: Y ... HISTO: YIN FPM/OFIC: ...



- (1) lateral 10R 657
- " " 2 859
- (2) posterior 10R 758
- " " 90P2
- " " 108/11

- (3) post 10R 889
- (4) ant 10R 300, 657

- (5) good blood
- (6) good blood

Step count on surfaces  
 (7) lower lobe, (8) upper lobe  
 pericardium and lower  
 lobe, 1.5cm, 1.5cm



Upper body of the body

000747



SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary DE-15 CAS/CR/Serial No. 270/2012

In printing STAN: 21 MADLIZA FURSAWA

Identity number [redacted] Race: White/Black/Asian/Coloured

Sex: male/female residing at [redacted]

On 2012/05/14 State under oath/confirm at the Government Mortuary DE-15

I identified the body of a White/Black/Asian/Coloured male/female to medico legal assistant

ABRIGEN MOKHESU  
as being that of JULIA LINDA

Particulars of deceased:

1. Identity number [redacted] 2. Date of birth 1953/01/27

3. Residential address [redacted]

4. Employed at LUMPKIN BASED PLANTATION MINE

5. Relationship to deponent spouse - son 6. Marital status MARRIED

7. Name and address of residence/employment of deceased's husband/wife/father/mother/brother/sister/other relative

"The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution"

- 1. I know and understand the contents of this declaration.
- 2. I have objection/no objection to taking the prescribed oath.
- 3. I consider the prescribed oath to be binding/not binding on my conscience.

Signature/thumb print/mark

"I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at DE-15 (place) on 2012/05/14 (date) at 10:28 (time).

(Signature) Commissioner of Oaths

Full first names and surname MARICHALE MOKHESU

Business address (Street address of Police Station) NO 03 COXON

Designation (rank) ABRIGEN MOKHESU

South African Police Service

\*This form and annex thereto not applicable



DEPARTMENT OF HEALTH  
FORENSIC PATHOLOGY SERVICES

FORM 380

I, NEHEMIAH SETHI states under oath in English that  
I am an FPO in Brits Government Mortuary and employed as a  
Medical Legal Aide.

On the 2002 10 8 13 at 06:00 in the performance of my official duties there  
or duties in connection therewith the dead body of a BLACK ADULT MALE was  
received and pointed out to me by P/O NAMBHANI from Brits Government  
Mortuary as the body from EASPERI LAHURIA and identified it as of  
BLACK ADULT MALE Body No T 270 1208 D

On the 2002 10 8 14 I pointed out and identified the body to DR S. NASHIRO  
The Government Pathologist responsible for the Post Mortem examination in the body as being  
that of BLACK ADULT MALE Body No T 270 1208 D

On 2002 10 8 14 at DRIS the body No T 270/2002 was  
identified as JULIAS LAHURIA address [REDACTED]  
SIN: MADLISA FUMBANIA to M.D. KARUNIA as per Form 377

While the said body was under my care it sustained no injuries or wounds  
I observed the physical characteristics MULTIPLE STAB WOUNDS

I know and understand the contents of this declaration  
I have no objection in taking the prescribed oath  
I consider the prescribed oath to be binding on my conscience

I certify that the deponent has acknowledged that he/she knows and understands the contents of  
these declaration which was sworn to before me and deponent's signature was placed thereon  
in my presence at Brits on the 2002 10 8 15 at 09:10

[Signature]  
Commissioner of Oaths

NEHEMIAH SETHI  
Full name and Surname

Rank A/DIRECTOR  
Government Mortuary  
03 Court Street  
Brits



Verw No 2702013  
Ref No

000752

STAATSLYKHUIS • GOVERNMENT MORTUARY

LYKSKOUINGSERTIFIKAAT • CERTIFICATE OF POST-MORTEM EXAMINATION

EK VERKLAAR HIERBY dat ek op die 14 dag van August 2013 om  
THIS IS TO CERTIFY THAT ON THE 14 day of August 2013 at

'n lykskouing gehou het op die lyk van 'n Black Adult male  
I held a post-mortem examination on the body of a Black Adult male  
(Ras en geslag • Race and sex)

wat aan my geïdentifiseer is deur P. P. M. M.  
which was identified to me by P. P. M. M.

as die lyk van Brown Adult male  
as being that of Brown Adult male

(Geskatte): Leeftyd Massa Lengte  
(Estimated): Age Mass Height 1.5m

\*Wat oorlede is te/gevind is te Eastern Province  
Who died at/was found at Eastern Province

op die 13 dag van August 2013 om 06:00  
on the 13 day of August 2013 at 06:00

Na my beste wete en oortuiging is die dood toe te skrywe aan:  
The cause of death to the best of my knowledge and belief was:

Multic stab wound

Datum 14/08/2013  
Date

*[Signature]*  
Patoloog • Pathologist  
Distriksgeneesheer • District Surgeon

Die lyk van bogenoemde persoon is aan my geïdentifiseer in die Staatslykhuis deur—  
The body of the above-named person was identified to me at the Government Mortuary by—

Korporaal Anthony Andrew Mphahlele  
(naam • name)

van NO 03 Oost Street  
of (adres • address)

op 14/08/2013  
on (datum • date)

*[Signature]*  
Handtekening van lid • Signature of member

\* Skrap / delete hierdie van toepassing in  
Delete this if not applicable



SOUTH AFRICAN POLICE SERVICE

000753

GOVERNMENT MORTUARY

PRIS

SERIAL No.

270/2012

AFFIDAVIT IN TERMS OF SECTION 212 (4)—ACT 51 OF 1977

I (full names and surname) DR SHIRLEY NASHILO

qualifications

official address 110 03 Louisa Street Brits  
state:

I am in the service of the State as a district surgeon/pathologist at BRITS

On 14/08/2012 the body/corps of a \*White/Black/Asian/Brown (C) male/female bearing number DR 270 12012 was pointed out to me by

and identified as the body of Black Asian male

On (date) 14/08/2012 I conducted a post-mortem examination on the said body and recorded my findings on attached form (GW 7/15), which facts I ascertained by means of an examination requiring skill in \*biology/anatomy/ and pathology.

"I declare that the content of this statement is true to the best of my knowledge and belief. This statement has been made in the knowledge that if it were tendered as evidence in court I would be liable to prosecution if I have wilfully stated in it anything which I know is false or which I do not believe to be true."

- 1. I know and understand the content of this statement.
- 2. I have/have no objection to taking the prescribed oath.
- 3. I consider the prescribed oath to be binding on my conscience.

14/08/2012  
Date

[Signature]  
District Surgeon/Pathologist

I certify that the deponent has acknowledged that \*he/she knows and understands the content of this declaration which was \*sworn to/affirmed before me and the deponent's signature/thumb-print/mark was placed thereon in my presence.

Date 14/08/2012

Place PRIS

[Signature]  
Commissioner of Oaths

Full names and surname (block letters) METABE THOMAS MATHWEA

Business address (block letters) 110 03 Louisa Street Brits

Designation (rank) MORTUARY MANAGER South African Police Service.

\*Delete words not applicable.



000754

3

FORENSIC PATHOLOGY SERVICES

(To be completed in full and in duplicate by the pathologist or make a copy)

This form is to be used to request for the analysis of blood for the presence of ethanol, drugs and/or carboxyhaemoglobin or the analysis of eye-fluid for the presence of drugs or ethanol

Address of mortuary:

Paris FPS  
P.O. Box 84  
Paris  
0250

Police Station: BETHANIE CAS number: 108/12

Reference: DR/PM270/12 or WCI

Contact person: A. T. KIASI  
Contact number: 012 252 6809 Fax number: N/A  
Expiry date of kit: Original seal number of kit: AM 183431

1. A sample container containing a blood/eye fluid sample with identifying marking DR/PM270/12 or WCI and re-sealed with seal number AM 183431 is being handed in at the

Forensic Chemistry Laboratory, Cape Town/Johannesburg/Pretoria by

Forensic Officer A.T. KIASI

2. The sample is to be analysed for the presence of

Ethanol	Carboxyhaemoglobin	Drug (please specify)
	<input checked="" type="checkbox"/>	PM 4 045/12

Signature of Pathologist: DR S. MASHILO

Date: 11/08/12  
DEPT. OF HEALTH  
FORENSIC CHEMISTRY LABORATORY  
2012-08-08

Laborator's reference number

Date received

Handed to



health  
Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr B.R. Ntombela  
Tel: (014) 566 4282  
082 978 6406

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**PHOKENG FORENSIC PATHOLOGY SERVICES**

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**POST MORTEM REPORT OF DR 545/2012**

To the Magistrate of: **Rustenburg**

I, **Boledi Ramadimetsa Ntombela** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **13<sup>th</sup> August, 2012** commencing at **10:15** I examined the body of: **African male**.
- b) That this body was identified to me by: **Mr Tshepo Gaanakgomo of Phokeng Mortuary** as being that of: **Hassan Fundi**.
- c) That death took place-  
  
\*as informed on: **12<sup>th</sup> August 2012 at 10:00**.
- d) That the chief post-mortem findings made by me on this body were the following:
  - **A black adult male with a history of being allegedly assaulted, burned in a car and died. Secondary degree burns involving both lower limbs and left hand and face. Anterior fossa skull fracture. Subdural and subarachnoid haemorrhages and open lower jaw fracture.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Multiple Injuries**

Dated at Phokeng: 16<sup>th</sup> August, 2012

Signature:  .....

Designation: **State Pathologist**  
**Dr Boledi Ramadimetsa Ntombela**  
**M.B.Ch.B. / (UFS), B.SC (UFS)**



Healthy Living for All

## **SCHEDULE OF OBSERVATIONS**

### **GENERAL**

- 1 **height:** 1, 81 m **mass:** 100 kg **physique:** normal: **Nutrition:** normal
- 2 **Special identifying features**
  - ◆ Black adult male. Blue jeans trouser, red jockey, blue jean jacket, blue and white t-shirt and blue. Bullet proof vest. Black boots, all clothing partially- burned.
- 3 **Secondary post mortem features**
  - ◆ Rigor Mortis
- 4 **External appearance of body and condition of limbs**
  - (a) Secondary degree burns involving the lower limbs and lower abdomen and right upper limb only from the wrist and hand with skin slippage of face.
  - (b) No abrasions
  - (c) Lacerations on the left parietal area measuring 4cm, above the left eye
    - 5 cm laceration above the right eye (y shaped)
    - 3 x 4 cm laceration lower lip 10 cm x 5 mm. Left shoulder 6 cm laceration
  - (d) Fractures on the lower jaw – open fracture

### **Head and neck**

- ◆ **Skull:** Examined and had anterior fossa skull fracture.
- ◆ **Intracranial Contents:** Examined and had subarachnoid and subdural haemorrhages.
- ◆ **Orbital, nasal and aural cavities:** Examined and had open jaw fracture.
- ◆ **Mouth, tongue and pharynx:** Examined and had laceration on lower lip 10 cm x 5 mm.
- ◆ **Neck structures:** Examined and no abnormalities detected.



Healthy Living for All

Chest

- ◆ **Thoracic cage and diaphragm** Examined and no abnormalities detected.
- ◆ **Mediastinum and oesophagus**: Examined and had mediasternal haematoma.
- ◆ **Trachea and bronchi**: Examined and had blood in trachea
- ◆ **Both the left and right lungs**: Examined and both side lungs were congested.
- ◆ **Heart and pericardium**: Examined and had contusions.
- ◆ **Large blood vessels**: Examined and no abnormalities detected.

Abdomen

- ◆ **Peritoneal cavity**: Examined and no abnormalities detected.
- ◆ **Stomach and contents**: Examined and no abnormalities detected.
- ◆ **Intestines and mesentery**: Examined and no abnormalities detected.
- ◆ **Liver, gall bladder and biliary passages**: Examined and no abnormalities detected.
- ◆ **Pancreas**: Examined and no abnormalities detected.
- ◆ **Spleen**: Examined and no abnormalities detected.
- ◆ **Both the left and right adrenals**: Examined and no abnormalities detected.
- ◆ **Both the left and right kidneys and ureters**: Examined and no abnormalities detected
- ◆ **Urinary bladder and urethra**: Examined and no abnormalities detected.
- ◆ **Pelvic walls**: Examined and no abnormalities detected.
- ◆ **Genital organs**: Examined and no abnormalities detected.

Spine

- ◆ **Spinal column**: Examined and no abnormalities detected.
- ◆ **Spinal cord**: Examined and no abnormalities detected.

Specimen Retained

Nature of specimen	Investigation required	Specimen handed to

Additional observation

- None





SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary Phokeng CAS/CR/Serial No. DR 545/12

In printing I, Aisha Navy Fundi

Identity number [redacted] an/a adult/minor White/Black/Asian/Coloured

male/female residing at [redacted]

On 2012-08-13 at the Government Mortuary, Phokeng

I identified the body of a White/Black/Asian/Coloured male/female to medico legal assistant

as being that of SPO Gaanakaomo Hassan Fundi

Particulars of deceased:

1. Identity number [redacted] 2. Date of birth 1965-06-11

3. Residential address [redacted]

4. Employed at Louisa

5. Relationship to deponent [redacted] 6. Marital status [redacted]

7. Name and address of residence/employment of deceased's husband/wife/father/mother/brother/sister/other relative

"The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution."

- 1. I know and understand the contents of this declaration.
2. I have objection/no objection to taking the prescribed oath.
3. I consider the prescribed oath to be binding/not binding on my conscience.

A. V. FUNDI

Signature/thumb print/mark

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at Phokeng (place) on 2012-08-13 (date) at [redacted] (time).

[Signature]

(Signature) Commissioner of Oaths

Full first names and surname Joy Anna Daitumelo Mbulwane

Business address (Street address of Police Station) Salema section - Phokeng

Scientific medico legal Service

Designation (rank) A/c South African Police Service

\*Delete and initial words not applicable.



000760



Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr. M.I Siko  
Tel: (014) 566 4282  
083 604 9557

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**PHOKENG FORENSIC PATHOLOGY SERVICES**

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**POST MORTEM REPORT OF DR 546/2012**

To the Magistrate of: **Rustenburg**

I, **Moeti Isaac Siko** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **13<sup>th</sup> August, 2012** commencing at **11:15** I examined the body of: **African male**.
- b) That this body was identified to me by: **Mr Tshepo Gaanakgomo of Phokeng Forensic Facility** as being that of: **Frans Matihomola Mabelane**
- c) That death took place-  
  
\*as informed on: **12<sup>th</sup> August 2012 at 10:00.**
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with history of burns. Third degree 100% burns. Soothe in the trachea.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Burns.**

Dated at Phokeng: **13<sup>th</sup> August, 2012**

Signature:.....

Designation: **State Pathologist**  
**Dr Moeti Isaac Siko**  
**M.B.Ch.B. (MEDUNSA)**



Healthy Living for All

## SCHEDULE OF OBSERVATIONS

### GENERAL

- 1 height: 1, 16 m mass: kg physique: normal: Nutrition: normal
- 2 Special identifying features
  - ◆ Black adult male. 3<sup>rd</sup> degree burns.
- 3 Secondary post mortem features
  - ◆ Heat Rigor
- 4 External appearance of body and condition of limbs
  - (a) 3<sup>rd</sup> degree 100% burns
  - (b) All limbs amputated and fractured

### Head and neck

- ◆ **Skull:** Examined and had multiple skull fractures.
- ◆ **Intracranial Contents:** Examined and had charred brains.
- ◆ **Orbital, nasal and aural cavities:** Examined and had burns.
- ◆ **Mouth, tongue and pharynx:** Examined and had burns.
- ◆ **Neck structures:** Examined and had burns

### Chest

- ◆ **Thoracic cage and diaphragm:** Examined and had burns.
- ◆ **Mediastinum and oesophagus:** Examined and had burns
- ◆ **Trachea and bronchi:** Examined and had soothe in the trachea and burns.
- ◆ **Both the left and right lungs:** Examined and had burns.
- ◆ **Heart and pericardium:** Examined and had burns.
- ◆ **Large blood vessels:** Examined and had burns.



**Abdomen**

- ◆ **Peritoneal cavity**: Examined and had burns.
- ◆ **Stomach and contents**: Examined and had burns.
- ◆ **Intestines and mesentery**: Examined and had burns.
- ◆ **Liver, gall bladder and biliary passages**: Examined and had burns.
- ◆ **Pancreas**: Examined and had burns.
- ◆ **Spleen**: Examined and had burns.
- ◆ **Both the left and right adrenals**: Examined and had burns
- ◆ **Both the left and right kidneys and ureters**: Examined and had burns.
- ◆ **Urinary bladder and urethra**: Examined and had burns.
- ◆ **Pelvic walls**: Examined and had burns.
- ◆ **Genital organs**: Examined and had burns.

**Spine**

- ◆ **Spinal column**: Examined and had burns.
- ◆ **Spinal cord**: Examined and had burns.

**Specimen Retained**

Nature of specimen	Investigation required	Specimen handed to

**Additional observation**

- None





SAPS 377  
000763

SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary PHUKENGA CAS/CR/Serial No. 546/12

In printing JOSEPH KYABI MABELAYE

Identity number [redacted] an/a adult/minor White/Black/Asian/Coloured

male/female residing at [redacted]

On 2012-08-13 State under oath/confirm at the Government Mortuary, PHUKENGA

I identified the body of a White/Black/Asian/Coloured male/female to medico legal assistant

as being that of FRANS MATLAMOLA MABELAYE

Particulars of deceased:

- 1. Identity number [redacted]
- 2. Date of birth 1964/11/06
- 3. Residential address [redacted]
- 4. Employed at LONMINA MINE
- 5. Relationship to deponent FATHER
- 6. Marital status MARRIED
- 7. Name and address of residence/employment of deceased's husband/wife/father/mother/brother/sister/other relative AS ABOVE

"The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution."

- 1. I know and understand the contents of this declaration.
- 2. I have objection/no objection to taking the prescribed oath.
- 3. I consider the prescribed oath to be binding/not binding on my conscience.

[Signature]  
Signature/thumb print/mark

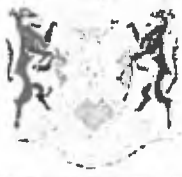
I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at PHUKENGA (place) on 2012/08/13 (date) at 16:30 (time).

[Signature]  
(Signature) Commissioner of Oaths

Full first names and surname POPO ANDRIE SENOYWAAYATE  
Business address (Street address of Police Station) 30 SALEM SECTION PHUKENGA 0235

Designation (rank) S.F.P.O. South African Police Service

P.K. MABELAYE



Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr. M.I Siko  
Tel. (014) 566 4282  
083 604 9557

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**PHOKENG FORENSIC PATHOLOGY SERVICES**

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**POST MORTEM REPORT OF DR 550/2012**

To the Magistrate of: **Rustenburg**

I, **Moeti Isaac Siko** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **13<sup>th</sup> August, 2012** commencing at **11:45** I examined the body of: **African male.**
- b) That this body was identified to me by: **Mr Thabo Nkabinde of Phokeng Forensic Facility** as being that of: **Thapelo Eric Mabebe**
- c) That death took place-  
  
\*as informed on: **12<sup>th</sup> August 2012 at 23:00.**
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with history of multiple stabs. Skull fracture left parieto occipital with brain extrusion and intracranial haemorrhages.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Head Injury.**

Dated at Phokeng: **13<sup>th</sup> August, 2012**

Signature:.....  


Designation: **State Pathologist**  
**Dr Moeti Isaac Siko**  
**M.B.Ch.B. (MEDUNSA)**





**Abdomen**

- ◆ **Peritoneal cavity**: Examined and no abnormalities detected.
- ◆ **Stomach and contents**: Examined and no abnormalities detected.
- ◆ **Intestines and mesentery**: Examined and no abnormalities detected.
- ◆ **Liver, gall bladder and biliary passages**: Examined and no abnormalities detected.
- ◆ **Pancreas**: Examined and no abnormalities detected.
- ◆ **Spleen**: Examined and no abnormalities detected.
- ◆ **Both the left and right adrenals**: Examined and no abnormalities detected.
- ◆ **Both the left and right kidneys and ureters**: Examined and no abnormalities detected.
- ◆ **Urinary bladder and urethra**: Examined and no abnormalities detected.
- ◆ **Pelvic walls**: Examined and no abnormalities detected.
- ◆ **Genital organs**: Examined and no abnormalities detected.

**Spine**

- ◆ **Spinal column**: Examined and no abnormalities detected.
- ◆ **Spinal cord**: Examined and no abnormalities detected.

**Specimen Retained**

<b>Nature of specimen</b>	<b>Investigation required</b>	<b>Specimen handed to</b>

**Additional observation**

- None





SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary phokeng CAS/CR/Serial No. 550/12

In printing Kabela Kenneth Mabebe

Identity number [redacted] an/a adult/minor White/Black/Asian/Coloured

male/female residing at [redacted]

On 2012-08-13 State under oath/confirm at the Government Mortuary, phokeng

I identified the body of a White/Black/Asian/Coloured male/female to medico legal assistant

as being that of Mr. Nkabinde  
Thapelo Eric Mabebe

Particulars of deceased:

1. Identity number [redacted] 2. Date of birth 1975-06-09

3. Residential address [redacted]

4. Employed at Lawmin

5. Relationship to deponent Brother 6. Marital status Single

7. Name and address of residence/employment of deceased's husband/wife/father/mother/brother/sister/other relative Tauing

"The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution."

- 1. I know and understand the contents of this declaration.
- 2. I have objection/no objection to taking the prescribed oath.
- 3. I consider the prescribed oath to be binding/not binding on my conscience.

[Signature]

Signature/thumb print/mark

"I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at phokeng (place) on 13-08-2012 (date) at ..... (time).

[Signature]

(Signature) Commissioner of Oaths

Full first names and surname Joy Anna Botumelo Mbulwane

Business address (Street address of Police Station) Salema Section - phokeng  
Forensic Medico legal service

Designation (rank) A/C South African Police Service

\*Delete and initial words not applicable





health

Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr. S.A. NKOSI  
Tel. (014) 565 4282  
drnkosi@vodamail.co.za

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**PHOKENG FORENSIC PATHOLOGY SERVICES**

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**POST MORTEM REPORT OF DR 553/2012**

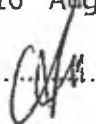
To the Magistrate of: **Rustenburg**

I, **Sobantu Andrew Nkosi** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **16<sup>th</sup> August, 2012** commencing at **10:30** I examined the body of: **African adult male**.
- b) That this body was identified to me by: **Mr Tshepo Gaanakgomo of Phokeng Mortuary** as being that of: **Tembelakhe Mati**.
- c) That death took place-  
  
\*as informed on: **13<sup>th</sup> August 2012 at 14:30**.
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with a history of gunshot injuries. Stab wound of right lower buttock. Stab wound of right femoral artery and vein.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Stab Wound of Right Femoral Vessels**

Dated at Phokeng: 16<sup>th</sup> August, 2012

Signature:..........

Designation: **State Pathologist**  
**Dr Sobantu Andrew Nkosi**  
**M.B.Ch.B. / (Natal), Dip For Med (CMSA), CML (UNISA/UP)**  
**Personal Fax Number: 086 611 697**



Healthy Living for All

## **SCHEDULE OF OBSERVATIONS**

### **GENERAL**

- 1 **height: 1, 72 m mass: 90 kg physique: normal: Nutrition: normal**
- 2 **Special identifying features**
  - ◆ Black adult male.
- 3 **Secondary post mortem features**
  - ◆ Refrigerated body
- 4 **External appearance of body and condition of limbs**
  - (a) Wounds
    - (i) Right lower buttock deep penetrating wound by 20 mm x 20 mm and by 330 mm from right popliteal region and by 100 mm from buttock furrow
    - (ii) Superficial wound left cheek by 30 mm x 5 mm
    - (iii) Left eyebrow superficial wound by 20 mm x 5 mm
    - (iv) Abrasion on the right elbow
  - (b) Stab wound of right femoral artery and vein

### **Head and neck**

- ◆ **Skull:** Examined and no abnormalities detected.
- ◆ **Intracranial Contents:** Examined and no abnormalities detected.
- ◆ **Orbital, nasal and aural cavities:** Examined and no abnormalities detected.
- ◆ **Mouth, tongue and pharynx:** Examined and no abnormalities detected.
- ◆ **Neck structures:** Examined and no abnormalities detected.

### **Chest**

- ◆ **Thoracic cage and diaphragm** Examined and had adhesions.
- ◆ **Mediastinum and oesophagus:** Examined and no abnormalities detected.
- ◆ **Trachea and bronchi:** Examined and no abnormalities detected.
- ◆ **Both the left and right lungs:** Examined and no abnormalities detected.
- ◆ **Heart and pericardium:** Examined and no abnormalities detected.
- ◆ **Large blood vessels:** Examined and no abnormalities detected.



Healthy Living for All

**Abdomen**

- ◆ **Peritoneal cavity** Examined and were pale.
- ◆ **Stomach and contents:** Examined and were pale.
- ◆ **Intestines and mesentery:** Examined and were pale.
- ◆ **Liver, gall bladder and biliary passages:** Examined and were pale.
- ◆ **Pancreas:** Examined and were pale.
- ◆ **Spleen:** Examined and was shrunken.
- ◆ **Both the left and right adrenals:** Examined and were pale.
- ◆ **Both the left and right kidneys and ureters:** Examined and were pale.
- ◆ **Urinary bladder and urethra:** Examined and were pale.
- ◆ **Pelvic walls:** Examined and no abnormalities detected.
- ◆ **Genital organs:** Examined and no abnormalities detected.

**Spine**

- ◆ **Spinal column:** Examined and no abnormalities detected.
- ◆ **Spinal cord:** Examined and no abnormalities detected.

**Specimen Retained**

Nature of specimen	Investigation required	Specimen handed to

**Additional observation**

- None



Healthy Living for All



SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary... phokeng CAS/CR/Serial No DRSS3/12

In printing i. Kadefuhwa Mshisazwe

Identity number [redacted] an/a adult/minor White/Black/Asian/Coloured

male/female residing at [redacted] State under oath/confirm

On 2012-03-16 at the Government Mortuary, phokeng

I identified the body of a White/Black/Asian/Coloured male/female to medico legal assistant

as being that of S/o Saanokgomo Tembake mabi

Particulars of deceased:

- 1. Identity number [redacted] 2. Date of birth 1963-10-10
3. Residential address [redacted]
4. Employed at Lomlun
5. Relationship to deponent Family friend 6. Marital status married
7. Name and address of residence/employment of deceased's husband/wife/father/mother/brother/sister/other relative Foster care.

The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution.

- 1. I know and understand the contents of this declaration.
2. I have objection/no objection to taking the prescribed oath.
3. I consider the prescribed oath to be binding/not binding on my conscience.

[Signature] Signature/thumb print/mark

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at phokeng (place) on 2012-03-16 (date) at (time).

[Signature] (Signature) Commissioner of Oaths

Full first names and surname Joy Anna Mbulwane
Business address (Street address of Police Station) Salema Section - phokeng
Forensic medico legal Service
Designation (rank) A/C South African Police Service



health

Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Sulema Section  
Phokeng, 0335

Dr. S.A. NKOSI  
Tel: (014) 566 4282  
drnkos@vodamail.co.za

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**PHOKENG FORENSIC PATHOLOGY SERVICES**

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**POST MORTEM REPORT OF DR 554/2012**

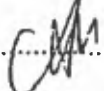
To the Magistrate of: **Rustenburg**

I, **Sobantu Andrew Nkosi** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **16<sup>th</sup> August, 2012** commencing at **09:15** I examined the body of: **African adult male.**
- b) That this body was identified to me by: **Mr Tshepo Gaanakgomo of Phokeng Mortuary** as being that of: **DR 554/12.**
- c) That death took place-  
  
\*as informed on: **13<sup>th</sup> August 2012 at 14:30.**
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with a history of gunshot injuries. Lumbar spinal column and cord injuries. Gunshot mesenteric and intestinal injuries. Subdural, sub- arachnoid and intraventricular haemorrhages. Fracture left humerus.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Gunshot – Multiple Injuries**

Dated at Phokeng: 16<sup>th</sup> August, 2012

Signature:.....

Designation: **State Pathologist**  
**Dr Sobantu Andrew Nkosi**  
**M.B.Ch.B. / (Natal), Dip For Med (CMSA), CML (UNISA/UP)**  
**Personal Fax Number: 086 611 697**



Healthy Living for All

## SCHEDULE OF OBSERVATIONS

### GENERAL

- 1 **height:** 1, 66 m **mass:** 70 kg **physique:** normal: **Nutrition:** normal
- 2 **Special identifying features**
  - ◆ Black adult male. Green t- shirt, grey trouser, brown shirt
- 3 **Secondary post mortem features**
  - ◆ Early signs of decomposition
- 4 **External appearance of body and condition of limbs**
  - (a) GUNSHOT WOUNDS
    - (i) Left upper axilla by 10 mm x 10 mm
    - (ii) Right iliac fossa by 10 mm x 10 mm and by 90 mm from right iliac crest
  - (b) EXIT wound
    - (i) Left posterior shoulder by 10 mm x 20 mm
  - (c) Laceration on the left axilla by 50 mm x 20 mm
  - (d) Fracture on the left humerus
  - (e) Bullet lodged in lumbar on the region and retrieved

### Head and neck

- ◆ **Skull:** Examined and had left sub – aponeurotic haemorrhages.
- ◆ **Intracranial Contents:** Examined and had subdural, sub – arachnoid and intra – ventricular haemorrhages.
- ◆ **Orbital, nasal and aural cavities:** Examined and no abnormalities detected.
- ◆ **Mouth, tongue and pharynx:** Examined and no abnormalities detected.
- ◆ **Neck structures:** Examined and no abnormalities detected.

### Chest

- ◆ **Thoracic cage and diaphragm** Examined and no abnormalities detected.
- ◆ **Mediastinum and oesophagus:** Examined and no abnormalities detected.
- ◆ **Trachea and bronchi:** Examined and no abnormalities detected.
- ◆ **Both the left and right lungs:** Examined and no abnormalities detected.
- ◆ **Heart and pericardium:** Examined and no abnormalities detected.
- ◆ **Large blood vessels:** Examined and no abnormalities detected.



Healthy Living for All

## Abdomen

- ◆ **Peritoneal cavity** Examined and no abnormalities detected.
- ◆ **Stomach and contents**: Examined and had gunshot mesenteric lacerations.
- ◆ **Intestines and mesentery**: Examined and no abnormalities detected.
- ◆ **Liver, gall bladder and biliary passages**: Examined and no abnormalities detected.
- ◆ **Pancreas**: Examined and no abnormalities detected.
- ◆ **Spleen**: Examined and no abnormalities detected.
- ◆ **Both the left and right adrenals**: Examined and no abnormalities detected.
- ◆ **Both the left and right kidneys and ureters**: Examined and no abnormalities detected.
- ◆ **Urinary bladder and urethra**: Examined and no abnormalities detected.
- ◆ **Pelvic walls**: Examined and had gunshot pelvic injuries.
- ◆ **Genital organs**: Examined and no abnormalities detected.

## Spine

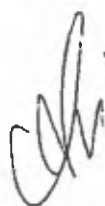
- ◆ **Spinal column**: Examined and had gunshot lumbar spine injuries.
- ◆ **Spinal cord**: Examined and had gunshot lumbar spinal cord injuries.

## Specimen Retained

<b>Nature of specimen</b>	<b>Investigation required</b>	<b>Specimen handed to</b>
Bullet	Ballistic	Lieutenant Colonel Botha

## Additional observation

- None



Healthy Living for All



MINISTRY OF AFRICAN POLICE SERVICE

CERTIFICATION OF BORN

Ministry of African Police Service, MOKISSI, 23/08/2012

Name: Uwama Mziwenkosi Jekansi

Place of Birth: [Redacted]

Date of Birth: 23/08/2012 at the Government Workings: MOKISSI

Relationship to the Applicant: Semi Jekansi

Place of Birth of Applicant: [Redacted] Date of Birth: 1982/12/25

Relationship to the Applicant: Wife Name: MINE

Relationship to the Applicant: SON Marital Status: Single

Address of the Applicant: [Redacted]

- I hereby certify that the above information is true to the best of my knowledge and belief.
- I have no objection to the above information being used for the purpose of the application.
- I am not an applicant for citizenship of the Republic of Botswana.
  - I have no objection to the above information being used for the purpose of the application.
  - I consent to the processing of my personal information for the purpose of the application.

Signature of Applicant: [Signature]

Signature of Officer: Mokosi Date: 23/08/2012

Signature of Officer: [Signature] Member of Staff

Signature of Officer: [Signature] Section

Signature of Officer: [Signature]





health

Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr S.A NKOSI  
Tel (014) 566 4282  
drnkosi@vodamail.co.za

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**PHOKENG FORENSIC PATHOLOGY SERVICES**

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**POST MORTEM REPORT OF DR 555/2012**

To the Magistrate of: **Rustenburg**

I, **Sobantu Andrew Nkosi** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **16<sup>th</sup> August, 2012** commencing at **08:15** I examined the body of: **African adult male**.
- b) That this body was identified to me by: **Mr Tshepo Gaanakgomo of Phokeng Mortuary** as being that of: **Pumzile Sokanyile**.
- c) That death took place-  
  
\*as informed on: **13<sup>th</sup> August 2012 at 14:30**.
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with a history of gunshot injuries. Gunshot wound left cheek entrance wound. Gunshot exit wound left neck. Gunshot neck spinal cord injuries.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Gunshot neck Injuries.**

Dated at Phokeng: 16<sup>th</sup> August, 2012

Signature:.....

Designation: **State Pathologist**

**Dr Sobantu Andrew Nkosi**

**M.B.Ch.B. / (Natal), Dip For Med (CMSA), CML (UNISA/UP)**

**Personal Fax Number: 086 611 697**



Healthy Living for All

## SCHEDULE OF OBSERVATIONS

### GENERAL

- 1 .Height: 1, 55 m.  
Mass: 65 kg.  
Physique: Normal.  
Nutrition: Normal.
- 2 **Special identifying features**
  - ◆ Black male male – white overall.
- 3 **Secondary post mortem features**
  - Refrigerated body.
- 4 **External appearance of body and condition of limbs**
  - i. **Gunshot entrance wound** – Left cheek of 15 mm x 10 mm and 35 mm from left earlobe and 140 mm from the left clavicle.
  - ii. **Gunshot exit wound** – Nape of the right neck, of 5 mm x 5 mm and 100 mm from left earlobe, 80 mm from the shoulder.
  - iii. Abrasions on the left forehead.

#### **Head and neck**

- ◆ **Skull**: Examined and no abnormalities noted.
- ◆ **Intracranial Contents**: Examined and had cerebellar haemorrhage.
- ◆ **Orbital, nasal and aural cavities**: Examined and no abnormalities noted.
- ◆ **Mouth, tongue and pharynx**: Examined and no abnormalities noted.
- ◆ **Neck structures**: Examined and had neck cord gunshot.

#### **Chest**

- ◆ **Thoracic cage and diaphragm**: Examined and no abnormalities noted.
- ◆ **Mediastinum and oesophagus**: Examined and no abnormalities noted.
- ◆ **Trachea and bronchi**: Examined and no abnormalities noted.
- ◆ **Both the left and right lungs**: Examined and no abnormalities noted.
- ◆ **Heart and pericardium**: Examined and no abnormalities noted.
- ◆ **Large blood vessels**: Examined and no abnormalities noted.

**Abdomen**

- ◆ **Peritoneal cavity** Examined and no abnormalities detected.
- ◆ **Stomach and contents:** Examined and no abnormalities detected.
- ◆ **Intestines and mesentery:** Examined and no abnormalities detected.
- ◆ **Liver, gall bladder and biliary passages:** Examined and no abnormalities detected.
- ◆ **Pancreas:** Examined and no abnormalities detected.
- ◆ **Spleen:** Examined and no abnormalities detected.
- ◆ **Both the left and right adrenals:** Examined and no abnormalities detected.
- ◆ **Both the left and right kidneys and ureters:** Examined and no abnormalities detected.
- ◆ **Urinary bladder and urethra:** Examined and no abnormalities detected.
- ◆ **Pelvic walls:** Examined and no abnormalities detected.
- ◆ **Genital organs:** Examined and no abnormalities detected.

**Spine**

- ◆ **Spinal column:** Examined and had gunshot spinal column of neck.
- ◆ **Spinal cord:** Examined and had gunshot spinal cord.

**Specimen Retained**

<b>Nature of specimen</b>	<b>Investigation required</b>	<b>Specimen handed to</b>

**Additional observation**

- None



Healthy Living for All



SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary Phokeng CAS/CR/Serial No. D205/12

in printing Mfaniseni Sokhangile

Identity number [redacted] \*an/a \*adult/ \*minor \*White/Black/Asian/Coloured

\*male/female residing at [redacted]

On 15/08/12 \*State under oath/confirm at the Government Mortuary, Phokeng

I identified the body of a \*White/Black/Asian/Coloured \*male/female to \*medico legal assistant

as being that of Gaangone Pungile Sokhangile

Particulars of deceased:

1. Identity number [redacted] 2. Date of birth 1964-05-21

3. Residential address [redacted]

4. Employed at Karee Mine - k3# - R.d.O

5. Relationship to deponent Brother 6. Marital status Married - Custom

7. Name and address of \*residence/employment of deceased's \*husband/wife/father/mother/brother/sister/other relative E. Cape - Nxeleni

"The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution."

- 1. I know and understand the contents of this declaration.
- 2. I have objection/no objection to taking the prescribed oath.
- 3. I consider the prescribed oath to be binding/not binding on my conscience.

*[Handwritten signature]*

*[Handwritten signature: X RTP]*



Signature/thumb print/mark

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at Phokeng (place) on 15/08/12 (date)

at 11 (time) 0:00 (hrs).

(Signature) Commissioner of Oaths

Full first names and surname Ernest Matthew Thage

Business address (Street address of Police Station) 31 Salama Section Phokeng Medico Legal Services

Designation (rank) A/C South African Police Service

\*Delete and initial words not applicable.



000770



health  
Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr S.A. NKOSI  
Tel: (014) 566 4282  
drnkosi@vodamail.co.za

**PHOKENG FORENSIC PATHOLOGY SERVICES**

**POST MORTEM REPORT OF DR 556/2012**

To the Magistrate of: **Rustenburg**

I, **Sobantu Andrew Nkosi** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **16<sup>th</sup> August, 2012** commencing at **08:30** I examined the body of: **African adult male**.
- b) That this body was identified to me by: **Mr Tshepo Gaanakgomo of Phokeng Mortuary** as being that of: **Hendrick Tsietsi Monene**.
- c) That death took place-  
  
\*as informed on: **13<sup>th</sup> August 2012 at 14:30**.
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with a history of stab wounds and gunshot wounds. Gunshot neck and chest wounds. Scalp lacerations. Fractured skull. Cerebral multiple haemorrhages.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Head Injuries.**

Dated at Phokeng: 16<sup>th</sup> August, 2012

Signature:.....  


Designation: **State Pathologist**  
**Dr Sobantu Andrew Nkosi**  
**M.B.Ch.B. / (Natal), Dip For Med (CMSA), CML (UNISA/UP)**  
**Personal Fax Number: 086 611 697**



Healthy Living for All

## SCHEDULE OF OBSERVATIONS

### GENERAL

1 **height:** 1, 72 m **mass:** 85 kg **physique:** normal: **Nutrition:** normal

2 **Special identifying features**

- ◆ Black adult male. Full police uniform - bloodstained.

3 **Secondary post mortem features**

- ◆ Refrigerated body

4 **External appearance of body and condition of limbs**

#### GUNSHOT INJURIES

(a) Entrance wound

- (i) Right neck posterior by 10 mm x 10 mm and by 90 mm from right ear
- (ii) Left sub – clavicular region by 20 mm x 10 mm with abrasion ring

(b) EXIT wounds

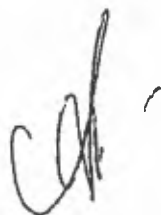
- (i) Left lower jaw region – star shaped by 25 mm x 10 mm
- (ii) Left posterior shoulder by 10 mm and 130 mm from spine and 80 mm from spine

(c) Lacerations

- (i) Left occiput by 60 mm
- (ii) Right occiput by 90 mm
- (iii) Right parietal by 90 mm x40 mm (T- shaped)
- (iv) Right parietal – star shaped by 50 mm x40 mm
- (v) Left medial knee

### Head and neck

- ◆ **Skull:** Examined and had scalp laceration. Fracture on the right temporo – parietal region.
- ◆ **Intracranial Contents:** Examined and had subdural, sub – arachnoid haemorrhages and cerebral oedema.
- ◆ **Orbital, nasal and aural cavities:** Examined and no abnormalities detected.
- ◆ **Mouth, tongue and pharynx:** Examined and no abnormalities detected.
- ◆ **Neck structures:** Examined and had gunshot – neck injuries.




Healthy Living for All

**Chest**

- ◆ **Thoracic cage and diaphragm** Examined and no abnormalities detected.
- ◆ **Mediastinum and oesophagus:** Examined and no abnormalities detected.
- ◆ **Trachea and bronchi:** Examined and had blood in trachea.
- ◆ **Both the left and right lungs:** Examined and no abnormalities detected.
- ◆ **Heart and pericardium:** Examined and no abnormalities detected.
- ◆ **Large blood vessels:** Examined and no abnormalities detected.

**Abdomen**

- ◆ **Peritoneal cavity** Examined and no abnormalities detected.
- ◆ **Stomach and contents:** Examined and no abnormalities detected.
- ◆ **Intestines and mesentery:** Examined and no abnormalities detected.
- ◆ **Liver, gall bladder and biliary passages:** Examined and no abnormalities detected.
- ◆ **Pancreas:** Examined and no abnormalities detected.
- ◆ **Spleen:** Examined and no abnormalities detected.
- ◆ **Both the left and right adrenals:** Examined and no abnormalities detected.
- ◆ **Both the left and right kidneys and ureters:** Examined and no abnormalities detected.
- ◆ **Urinary bladder and urethra:** Examined and no abnormalities detected.
- ◆ **Pelvic walls:** Examined and no abnormalities detected.
- ◆ **Genital organs:** Examined and no abnormalities detected.

**Spine**

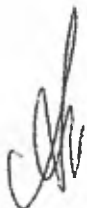
- ◆ **Spinal column:** Examined and no abnormalities detected.
- ◆ **Spinal cord:** Examined and no abnormalities detected.

**Specimen Retained**

Nature of specimen	Investigation required	Specimen handed to

**Additional observation**

- None




Healthy Living for All

000773

SAPS 377



SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary... PHOLENGE ... CAS/CR/Serial No. DR55672

In printing I, Jehannah Pholeli Monehe.

Identity number [redacted] an/a adult/minor White/Black/Asian/Coloured male/female residing at [redacted]

On 2012/08/16 at the Government Mortuary, Pholeng.

I identified the body of a White/Black/Asian/Coloured male/female to medico legal assistant FPO Mkgqisi.

as being that of Hendrick Tshezi Monehe.

Particulars of deceased:

- 1. Identity number [redacted] 2. Date of birth 1965/01/01
3. Residential address [redacted]
4. Employed at Police Officer.
5. Relationship to deponent Wife 6. Marital status Married
7. Name and address of residence/employment of deceased's husband/wife/father/mother/brother/sister/other relative

The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution.

- 1. I know and understand the contents of this declaration.
2. I have objection/no objection to taking the prescribed oath.
3. I consider the prescribed oath to be binding/not binding on my conscience.

[Signature]
Signature/thumb print/mark

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at Pholeng (place) on 2012/08/16 (date) at (time).

[Signature]
(Signatu...) Commissioner of Oaths

Full first name and surname: Bontumelo Anna Joy Mfulwane
Business address (Street address of Police Station): 31 Salema Section
Pholeng Forensic Pathology Services
Designation (rank): AIC South African Police Service

Handwritten vertical note: 1-D Monehe





health

Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr. S.A. NKOSI  
Tel. (014) 566 4282  
drnkosi@vodamail.co.za

**PHOKENG FORENSIC PATHOLOGY SERVICES**

**POST MORTEM REPORT OF DR 558/2012**

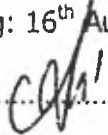
To the Magistrate of: **Rustenburg**

I, **Sobantu Andrew Nkosi** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **16<sup>th</sup> August, 2012** commencing at **09:00** I examined the body of: **African adult male**.
- b) That this body was identified to me by: **Mr Oupa Lesolang of Phokeng Mortuary** as being that of: **Sello Ronnie Lepaaka**.
- c) That death took place-  
  
\*as informed on: **13<sup>th</sup> August 2012**.
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with a history of multiple stab wounds. Scalp laceration. Fractured skull. Subdural and sub - arachnoid haemorrhages.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Head Injuries.**

Dated at Phokeng: 16<sup>th</sup> August, 2012

Signature:.....

Designation: **State Pathologist**  
**Dr Sobantu Andrew Nkosi**  
**M.B.Ch.B. / (Natal), Dip For Med (CMSA), CML (UNISA/UP)**  
**Personal Fax Number: 086 611 697**



Healthy Living for All

## SCHEDULE OF OBSERVATIONS

### GENERAL

- 1 **height:** 1, 61 m **mass:** 75 kg **physique:** normal: **Nutrition:** normal
- 2 **Special identifying features**
  - ◆ Black adult male. Police blue shirt - bloodstained.
- 3 **Secondary post mortem features**
  - ◆ Refrigerated body
- 4 **External appearance of body and condition of limbs**
  - (a) Refer to D 28
  - (b) (i) Right and left cubital IVI line
  - (ii) ECG stickers
  - (c) Stab wounds
    - (i) Left parietal by 100 mm
    - (ii) Centre of head by 130 mm
    - (iii) Left groin by 30 mm x 20 mm
    - (iv) Left medial thigh by 80 mm x 15 mm
    - (v) Right medial thigh by 75 mm x 5 mm
    - (vi) Right sheen by 55 mm x 5 mm
    - (vii) Left hand defense wounds
    - (viii) Right hand dorsum defense wounds
  - (d) Right abdomen head
  - (e) Abrasion on the left shoulder

### Head and neck

- ◆ **Skull:** Examined and had fracture left parietal region.
- ◆ **Intracranial Contents:** Examined and had basal subdural and sub – arachnoid haemorrhages and cerebral oedema.
- ◆ **Orbital, nasal and aural cavities:** Examined and no abnormalities detected.
- ◆ **Mouth, tongue and pharynx:** Examined and no abnormalities detected.
- ◆ **Neck structures:** Examined and no abnormalities detected.




Healthy Living for All

**Chest**

- ◆ **Thoracic cage and diaphragm** Examined and no abnormalities detected.
- ◆ **Mediastinum and oesophagus**: Examined and no abnormalities detected.
- ◆ **Trachea and bronchi**: Examined and no abnormalities detected.
- ◆ **Both the left and right lungs**: Examined and both lungs had pneumonia.
- ◆ **Heart and pericardium**: Examined and no abnormalities detected.
- ◆ **Large blood vessels**: Examined and no abnormalities detected.

**Abdomen**

- ◆ **Peritoneal cavity** Examined and no abnormalities detected.
- ◆ **Stomach and contents**: Examined and no abnormalities detected.
- ◆ **Intestines and mesentery**: Examined and no abnormalities detected.
- ◆ **Liver, gall bladder and biliary passages**: Examined and no abnormalities detected.
- ◆ **Pancreas**: Examined and no abnormalities detected.
- ◆ **Spleen**: Examined and no abnormalities detected.
- ◆ **Both the left and right adrenals**: Examined and no abnormalities detected.
- ◆ **Both the left and right kidneys and ureters**: Examined and no abnormalities detected.
- ◆ **Urinary bladder and urethra**: Examined and no abnormalities detected.
- ◆ **Pelvic walls**: Examined and no abnormalities detected.
- ◆ **Genital organs**: Examined and no abnormalities detected.

**Spine**

- ◆ **Spinal column**: Examined and no abnormalities detected.
- ◆ **Spinal cord**: Examined and no abnormalities detected.

**Specimen Retained**

Nature of specimen	Investigation required	Specimen handed to

**Additional observation**

- None




Healthy Living for All

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SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

Station/Government Mortuary Phokeng CAS/CR/Serial No. Dr 558/12

In printing Petunia Lepaaku

Identity number [redacted] an/a adult/minor White/Black/Asian/Coloured

male/female residing at [redacted]

On 14/08/2012 State under oath/confirm at the Government Mortuary, Phokeng

I identified the body of a White/Black/Asian/Coloured male/female to medico legal assistant

Ernest Thage

as being that of Sello Ronnie Lepaaku

Particulars of deceased:

1. Identity number [redacted] 2. Date of birth 1967-01-23

3. Residential address [redacted]

4. Employed at Klipgat Police Station - Warrant officer

5. Relationship to deponent Husband 6. Marital status Married - Civil

7. Name and address of residence/employment of deceased's husband/wife/father/mother/brother/sister/other relative Ma Sebe n Mpumaleya

Petunia Lepaaku

"The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution."

- 1. I know and understand the contents of this declaration.
- 2. I have objection/no objection to taking the prescribed oath.
- 3. I consider the prescribed oath to be binding/not binding on my conscience.

Pepaaku  
Signature/thumb print/mark

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at Phokeng (place) on 14/08/12 (date) at 14:47 (time).

[Signature]  
(Signature) Commissioner of Oaths

Full first names and surname Ernest Matthews Thage

Business address (Street address of Police Station) 31 Selima Section Phokeng Medico legal Service

Designation (rank) AIC South African Police Service

\*Delete and initial words not applicable.

000780



health  
Department of  
Health  
North West Province  
REPUBLIC OF SOUTH AFRICA

Phokeng Government  
Mortuary  
30 Salema Section  
Phokeng, 0335

Dr S.A. NKOSI  
Tel. (014) 566 4282  
drnkosi@vodamail.co.za

**PHOKENG FORENSIC PATHOLOGY SERVICES**

**POST MORTEM REPORT OF DR 561/2012**

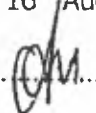
To the Magistrate of: **Rustenburg**

I, **Sobantu Andrew Nkosi** do hereby certify:

- a) That at: **Phokeng Government Mortuary** on the **16<sup>th</sup> August, 2012** commencing at **10:45** I examined the body of: **African adult male.**
- b) That this body was identified to me by: **Mr Oupa Lesolang of Phokeng Mortuary** as being that of: **Isaiah Twala.**
- c) That death took place-  
  
\*as informed on: **14<sup>th</sup> August 2012 at 16:10.**
- d) That the chief post-mortem findings made by me on this body were the following:
  - **Black adult male with a history of stab wound and fire – arm injuries. Multiple body stab wounds. Peri – nephric haemorrhages. Haemothorax and haemoperitoneum. Intestinal and spleen stab wounds.**
- e) That, as a result of my observation a schedule of which follows, I conclude that the Cause/causes of death was/were:

**Multiple Stab Wound Injuries.**

Dated at Phokeng: 16<sup>th</sup> August, 2012

Signature:..........

Designation: **State Pathologist**  
**Dr Sobantu Andrew Nkosi**  
**M.B.Ch.B. / (Natal), Dip For Med (CMSA), CML (UNISA/UP)**  
**Personal Fax Number: 086 611 697**



Healthy Living for All

## SCHEDULE OF OBSERVATIONS

### GENERAL

1 **height:** 1, 76 m **mass:** 100 kg **physique:** normal **Nutrition:** normal

2 **Special identifying features**

- ◆ Black adult male. Grey trouser, check shirt.

3 **Secondary post mortem features**

- ◆ Refrigerated body

4 **External appearance of body and condition of limbs**

#### STAB WOUNDS

- (i) Left lumbar region by 10 mm x 10 mm and by 130 mm from buttock and 80 mm from spine
- (ii) Left lumbar region by 20 mm x 13 mm and by 70 mm from buttock and by 70 mm from spine
- (iii) Left lateral abdomen by 18 mm x 10 mm and by 100 mm from left buttock
- (iv) Right epigastric region by 15 mm x 10 mm and by 100 mm from umbilicus
- (v) Left epigastric region by 10 mm x 10 mm and by 80 mm from umbilicus
- (vi) Centre of abdomen by 10 mm x 10 mm and by 40 mm from umbilicus
- (vii) Left lower abdomen by 10 mm x 10 mm and by 30 mm from umbilicus
- (viii) Right iliac fossa by 10 mm x 10 mm and by 60 mm from umbilicus
- (ix) Left hypogastric region by 200 mm x 10 mm and by 120 mm from umbilicus
- (x) Left lateral abdomen by 10 mm x 10 mm and by 15 mm from umbilicus
- (xi) Left lateral abdomen by 10 mm x 10 mm and by 90 mm from umbilicus
- (xii) Right cheek by 120 mm x 20 mm
- (xiii) Upper neck by 60 mm x 20 mm

### Head and neck

- ◆ **Skull:** Examined and no abnormalities detected.
- ◆ **Intracranial Contents:** Examined and no abnormalities detected.
- ◆ **Orbital, nasal and aural cavities:** Examined and no abnormalities detected.
- ◆ **Mouth, tongue and pharynx:** Examined and no abnormalities detected.
- ◆ **Neck structures:** Examined and no abnormalities detected.



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**Chest**

- ◆ **Thoracic cage and diaphragm** Examined and had 500 ml haemothorax.
- ◆ **Mediastinum and oesophagus:** Examined and no abnormalities detected.
- ◆ **Trachea and bronchi:** Examined and no abnormalities detected.
- ◆ **Both the left and right lungs:** Examined and no abnormalities detected.
- ◆ **Heart and pericardium:** Examined and no abnormalities detected.
- ◆ **Large blood vessels:** Examined and no abnormalities detected.

**Abdomen**

- ◆ **Peritoneal cavity** Examined and had haemoperitoneum.
- ◆ **Stomach and contents:** Examined and no abnormalities detected.
- ◆ **Intestines and mesentery:** Examined and had mesenteric laceration.
- ◆ **Liver, gall bladder and biliary passages:** Examined and no abnormalities detected.
- ◆ **Pancreas:** Examined and no abnormalities detected.
- ◆ **Spleen:** Examined and had shrunken spleen and stab wounds.
- ◆ **Both the left and right adrenals:** Examined and no abnormalities detected.
- ◆ **Both the left and right kidneys and ureters:** Examined and both side had perinephric haemorrhages.
- ◆ **Urinary bladder and urethra:** Examined and no abnormalities detected.
- ◆ **Pelvic walls:** Examined and no abnormalities detected.
- ◆ **Genital organs:** Examined and had haemorrhages.

**Spine**

- ◆ **Spinal column:** Examined and no abnormalities detected.
- ◆ **Spinal cord:** Examined and no abnormalities detected.

**Specimen Retained**

Nature of specimen	Investigation required	Specimen handed to

**Additional observation**

- None




Healthy Living for All



SOUTH AFRICAN POLICE SERVICE

IDENTIFICATION OF BODY

\*Station/Government Mortuary Phokeng CAS/CR/Serial No. 561/12

In printing Wellington Bonani Tswala

Identity number [redacted] an/a \*adult/minor White/Black/Asian/Coloured

\*male/female residing at [redacted]

On 2012-08-17 at the Government Mortuary, Phokeng

I identified the body of a White/Black/Asian/Coloured \*male/female to \*medico legal assistant

as being that of PPO Lesolang Isalah Tswala

Particulars of deceased:

- 1. Identity number [redacted]
- 2. Date of birth 1961-01-18
- 3. Residential address Wonderkop
- 4. Employed at Lonmin
- 5. Relationship to deponent Sabney
- 6. Marital status widowed
- 7. Name and address of \*residence/employment of deceased's \*husband/wife/father/mother/brother/sister/other relative Berjville

"The content of this declaration is true to the best of my knowledge and belief.

I am aware that should it be submitted as evidence and I know that something appears therein which I know to be false or believe not to be true, I could be liable to prosecution."

- 1. I know and understand the contents of this declaration.
- 2. I have objection/no objection to taking the prescribed oath.
- 3. I consider the prescribed oath to be binding/not binding on my conscience.

[Signature]  
Signature/thumb print/mark

I certify that the deponent has acknowledged that he/she knows and understands the contents of this declaration which was sworn to/affirmed before me and that the deponent's signature/thumb print/mark was placed thereon in my presence, at Phokeng (place) on 2012-08-17 (date) at [redacted] (initials).

[Signature]  
(Signature) Commiss: \*ner of Oaths

Full first names and surname: Joy Anna Beitemelo Mphahane  
Business address (Street address of Police Station): Salerna Section - Phokeng  
Forensic Medico legal Service

Designation (rank): A/C South African Police Service

\*Delete and initial words not applicable.

