



4110324

N.W. M4

B : Payment Copy REPRINT

## REPRINT ORDER REPRINT

Page 01

Supplier Code

305318829

Order Number

030195958P000000

Requisition Number

TSOC0001

GTK INDUSTRIES  
02 marais  
1etsop location  
666026001

2610

Official Stamp must be added X500  
Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
03 SEP 2025

SUPPLY CHAIN MANAGEMENT  
North West Province  
Porfessor M. S. S. Pophirima  
PROVINCE WIDE INTEGRATION

Subject to the conditions on the back hereof, please supply the under mentioned goods / services for which purpose a rail warrant is attached.

## DEPARTMENT OF HEALTH

Deliver to	Rail Warrant Number	
Invoice to	F.O.R.	
Postal Address	Order Date	20250903
Rail Destination	Delivery Date	20250903
Telephone Number	CONTRACT #	NWDCHC1/10

Item No.	Description / Allocation	Quantity	Units	Unit Price (Inc. VAT)	Total Line Amount
001	SUPPLY,DELIVERY AND INSTALLATION OF PAVEMENT AT KOPELA CLINIC. LOC:030077830033104700575003050084830009	*****.****		*****.**	*****935,400.00
* * E N D O F O R D E R * *					

*Signature*

\*\*\*\*\*935,400.00

Cheque Number

Cheque Date

Signature

Total of Order

I certify that on \_\_\_\_\_, the above mentioned order has in every respect been properly executed, that the goods are correct according to specifications and that they have been received in good condition.

I certify that the above order is in agreement with the invoices, that the charges are according to contract agreement or tariff fair and reasonable and that payment can be made.

Signature

Designation

Date

Signature

Designation

Date