

Hill Main Street
Mentioner
PS Sic St.
Metabolic, 47(3)
Seb 939, 257 31(3)
Fee: HIS PS7 31(3)

## **REQUEST FOR QUOTATION**

SUPPLIER NAME		TEL.
DATE:-	ATT:	FAX:

## Dear Sir / Madam

Kindly furnish the Matatiele Local Municipality with a written quotation for the supply of the services as detailed below. The quotation must be submitted on the letterhead of your business and can either be faxed or delivered by hand in a sealed envelope and returned to the Supply Chain Office by no later than: **12:00** hours on **29 FEBRUARY 2025** 

## The following conditions will apply:

- No Late Submissions will be entertained.
- Prices must be inclusive of VAT and be firm for 30 days
- A firm delivery period must be indicated

Failure to comply with these conditions may invalidate your offer.

DESCRIPTION / SPECIFICATIONS	QTY	UNIT PRICE		PRICE EXCL VAT	
		R	С	R	С
SUPPLY AND DELIVER TWENTY (20) VOUCHERS WITH THE VALUE OF R500.00 EACH FROM THREE REPUTABLE HEALTH CARE, GROCERIES, SPORT AND FITNESS RETAIL OUTLETS FOR THE PARTICIPANTS IN WELLNESS DAY EVENT OF 20 MARCH 2024 AT NORTH END STADIUM	20				

VAT	
TOTAL INCLUSIVE	

SUPPLIERS REPRESENTATIVE / AUTHORISED SIGNATORY SUPPLIERS STAMP