

ANNEXURE B: PORTFOLIO OF CURRENT AND COMPLETED CONTRACTS

The Bidder/s must complete table below with details of supply and delivery of food service units equipment in the limpopo department of health for a period of thirty six months (three years). The bidder must in addition attach proof of references e.g. previous contracts or order. Failure to furnish the particulars of such information in this Annexure in full shall invalidate the bid.

FOL	CLIENT NAME, CONTACT PERSON, CONTACT NUMBER AND EMAIL		CONTRACT NUMBER AND DESCRIPTION OF SERVICE	PLACE (TOWN)	CONTRACT START DATE Day, Month & Year	CONTRACT END DATE Day, Month & Year	CONTRACT AMOUNT/ VALUE OF CONTRACT (R)
1	Name of Client						
	Contact Person						
	Tel						
	eMail						
2	Name of Client						
	Contact Person						
	Tel						
	eMail						
3	Name of Client						
	Contact Person						
	Tel						

FOL	CLIENT NAME, CONTACT PERSON, CONTACT NUMBER AND EMAIL		CONTRACT NUMBER AND DESCRIPTION OF SERVICE	PLACE (TOWN)	CONTRACT START DATE Day, Month & Year	CONTRACT END DATE Day, Month & Year	CONTRACT AMOUNT/ VALUE OF CONTRACT (R)
	eMail						
4	Name of Client						
	Contact Person						
	Tel						
	eMail						
5	Name of Client						
	Contact Person						
	Tel						
	EMail						
6	Name of Client						
	Contact Person						
	Tel						
	eMail						

FOL	CLIENT NAME, CONTACT PERSON, CONTACT NUMBER AND EMAIL		CONTRACT NUMBER AND DESCRIPTION OF SERVICE	PLACE (TOWN)	CONTRACT START DATE Day, Month & Year	CONTRACT END DATE Day, Month & Year	CONTRACT AMOUNT/ VALUE OF CONTRACT (R)
7	Name of Client						
	Contact Person						
	Tel						
	eMail						
8	Name of Client						
	Contact Person						
	Tel						
	eMail						
9	Name of Client						
	Contact Person						
	Tel						
	eMail						

THE END