

CONTRACTORS

MAFIKENG



water & sanitation

Department:
Water and Sanitation
REPUBLIC OF SOUTH AFRICA

W1014 WTE

ATTENDANCE REGISTER

PURPOSE: _____ ORGANIZER: _____ Page no: 1 of 6

DATE: 14/11/2015 START TIME: _____

VENUE: MAFIKENG DURATION: _____

Initials and Surname	Company	Phone number	Fax number	E-mail	Address	Signature
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W1014WTE

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VENUE: MAFIKENG

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Initials and Surname	Company	Phone number	Fax number	E-mail	Address	Signature
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water & sanitation

Department:
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