

**Contact Number:** 

## **Quotation Advert**

| PROVINCE OF KWAZULU-NATAL                |   |            |
|--|---|------------|
| Opening Date:                            | 12/12/2018                                      | 10         |
| Closing Date:                            | 18/12/2018                                      | ⊞ <b>D</b> |
| Closing Time:                            | 11:00   |            |
| INSTITUTION DETAILS                      |   |            |
| Institution Name:                        | King Dinuzulu hospital complex                  | •          |
| Province:                                | KwaZulu-Natal                                   |            |
| Department or Entity:                    | Department of Health                            |            |
| Division or section:                     | Central Supply Chain Management                 |            |
| Place where goods / services is required | King dinizulu Hospital Complex                  |            |
| Date Submitted                           | 11/12/2018                                      | 0          |
| ITEM CATEGORY AND DETAILS                |   |            |
| Quotation it annotes                     | ZNQ:<br>942/18-19                               |            |
| Item Category:                           | Goods   | <b>Y</b>   |
|  | ECG PAPER 210 MMM X295 MM X 100 SHEETS PER PACK |            |
| Quantity (if supplies)                   | 100 REAMS                                       |            |
| COMPULSORY BRIEFING SESSION / S          | ITE VISIT                                       |            |
| Select Type:                             | Select  | <b>Y</b> , |
| Date :                                   |   | HO         |
| Time:                                    |   |            |
| Venue:                                   |   |            |
| QUOTES CAN BE COLLECTED FROM:            | king dinuzulu hospital SCm                      |            |
| QUOTES SHOULD BE DELIVERED TO:           | king dinuzulu hospiatl tender boc- foyer        |            |
| ENQUIRIES REGARDING THE ADVERT           | MAY BE DIRECTED TO:                             |            |
| Name:                                    | phakanyisiwe Sikhosana                          |            |
| Email:                                   | phakanyisiwe.sikhosana@kznhealth.gov.za         |            |

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|                            | 031 2711 1250                     |  |
|----------------------------|-----------------------------------|--|
| Finance Manager Name:      | Reddy Sathie                      |  |
| Finance Manager Signature: | pp Steddy                         |  |
|                            | No late quotes will be considered |  |

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