

## **Quotation Advert**

Opening Date:	06/07/2018
Closing Date:	10/07/2018
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Greytown hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	OPD
Date Submitted	05/07/2018
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ:
	04/07/2018
Item Category:	Goods
Item Description:	Supply and deliver buddi filing system
Quantity (if supplies)	03 units
COMPULSORY BRIEFING SESSION / S	SITE VISIT
Select Type:	Not Applicable
Date:	
Time:	
Venue:	
QUOTES CAN BE COLLECTED FROM:	Greytown Hospitla (SCM) 7:30am to 16:00pm Weekdays
QUOTES SHOULD BE DELIVERED TO:	Greytown Hosp.,Bell street ext,Deposit in a tender box next to the main gate or fax to 033 4132 809. No late or emailed quote will be accepted
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:
Name:	Mr S. Sosibo or Mr. S. Mzolo
Email:	siyabonga.mzolo@kznhealth.gov.za
Contact Number:	033 4139 431 Ext:291
Finance Manager Name:	Mr. R. Hannif
Finance Manager Signature:	J()

No late quotes will be considered