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	Department
	PROVINCE OF KWAZULU-NATAL

Quotation Advert

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Opening Date:	11/06/2018
Closing Date:	14/05/2018
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Itshelejuba hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods I services is required	ITSHELEJUBA HOSPITAL- ALONG N2 ROAD BETWEEN PONGOL
Date Submitted	11/06/2018
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ:
	087/18/19
Item Category:	Goods
Item Description:	COOLER BOX 28LITRE X 01 UNIT. HARD PLASTIC BLUIE IN COLOUR
	COOLER BOX BLITRE X 01 UNIT. HARD PLASTIC BLUE IN COLOUR
	MICROWAVE X 01 UNIT-FULL SPEC AVAILABLE ON REQUEST
Our matter (16 mountains)	
Quantity (if supplies)	
COMPULSORY BRIEFING SESSION / S	SITE VISIT
Select Type:	Not Applicable
Date:	
Time:	
Venue:	
Venue:	
Venue: QUOTES CAN BE COLLECTED FROM:	ITSHELEJUBA HOSPITAL- ALONG N2 ROAD BETWEEN PONGOLA TOWN & A PIET RETIEF TOWN
QUOTES CAN BE COLLECTED FROM:	PIET RETIEF TOWN
QUOTES CAN BE COLLECTED FROM:	PIET RETIEF TOWN ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA TOWN & PIET RETIEF TOWN
QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO:	PIET RETIEF TOWN ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA TOWN & PIET RETIEF TOWN
QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER	PIET RETIEF TOWN TISHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA TOWN & PIET RETIEF TOWN T MAY BE DIRECTED TO:
QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER Name:	PIET RETIEF TOWN ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA TOWN & PIET RETIEF TOWN T MAY BE DIRECTED TO: SAMU MAPHISA
QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER Name: Email:	PIET RETIEF TOWN ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA TOWN & PIET RETIEF TOWN T MAY BE DIRECTED TO: SAMU MAPHISA samukelisiwe.maphisa@kznhealth.gov.za
QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER Name: Email: Contact Number: Finance Manager Name:	PIET RETIEF TOWN ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA TOWN & PIET RETIEF TOWN T MAY BE DIRECTED TO: SAMU MAPHISA samukelisiwe.maphisa@kznhealth.gov.za 034 413 4066 /4061
QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER Name: Email: Contact Number: Finance Manager Name:	PIET RETIEF TOWN ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA TOWN & PIET RETIEF TOWN T MAY BE DIRECTED TO: SAMU MAPHISA samukelisiwe.maphisa@kznhealth.gov.za 034 413 4066 /4061