

Quotation Advert

Opening Date:	18/06/2018
Closing Date:	21/06/2018
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	KwaDabeka CHC
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	KwaDabeka Community Health Centre
Date Submitted	14/06/2018
ITEM CATEGORY AND DETAILS	The state of the s
Quotation Number:	ZNQ: 214/18
Item Category:	Goods
Item Description:	MEMORANDUM FORMS A4
Quantity (if supplies)	60 UNITS
COMPULSORY BRIEFING SESSION /	SITE VISIT
Select Type:	Select
Date :	
Time:	
Venue:	
QUOTES CAN BE COLLECTED FROM:	04 KHULULEKA ROAD, KWADABEKA TOWNSHIP
QUOTES SHOULD BE DELIVERED TO:	04 KHULULEKA ROAD, KWADABEKA TOWNSHIP
ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:	
Name:	SIMPHIWE MTHIYANE
Email:	Simphiwe.Mthiyane@kznhealth.gov.za
Contact Number:	031.714.3762
Finance Manager Name:	MRS ZONDI
Finance Manager Signature:	AN

No late quotes will be considered