

## **Quotation Advert**

Opening Date:	01/11/2018
Closing Date:	16/11/2018
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Gamalakhe CHC
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	Gamalakhe CHC
Date Submitted	31/10/2018
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: GCHC132/1819
Item Category:	Goods
Item Description:	SUPPLY AND DELIVER: ASPIRATORS DENTAL (MOBILE & PORTABLE HIGH VOLUME EVACUATOR)
Quantity (if supplies)	1 UNIT
COMPULSORY BRIEFING SESSION	SITE VISIT
Select Type:	Not Applicable
Date :	
Time:	
Venue:	
QUOTES CAN BE COLLECTED FROM:	OFF RAY NKONYENI ROAD CORNER MICHEAL NSIMBI & REV SITHOLE OR NOAD GAMALAKHE
QUOTES SHOULD BE DELIVERED TO:	OFF RAY NKONYENI ROAD CORNER MICHEAL MICHEAL NSIMBI & REV SITHOLE ROAD - TENDER BOX
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:
Name:	Mr. Fani Mbali
Email:	mbali.fani@kznhealth.gov.za
Contact Number:	039 318 1113
Finance Manager Name:	Mrs. BP Mthembu
Finance Manager Signature:	- Herester

No late quotes will be considered