




## Quotation Advert

**Opening Date:** 30/10/2018   
**Closing Date:** 05/11/2018   
**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 / services is required** ITSHELEJUBA HOSPITAL  
**Date Submitted** 29/10/2018 

### ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
262/18/19  
**Item Category:** Goods 


**Item Description:**

ULTRA SOUND GEL (AQUASONIC) 5L X 10 UNITS

**Quantity (if supplies)**

### COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Not Applicable   
**Date :**   
**Time:**  
**Venue:**

**QUOTES CAN BE COLLECTED FROM:** ITSHELEJUBA HOSPITAL -A LONG N2 ROAD BETWEEN PONGOLA & PIET RETIEF TOWN 

**QUOTES SHOULD BE DELIVERED TO:** ITSHELEJUBA HOSPITAL - ALONG N2 ROAD BETWEEN PONGOLA & PIET RETIEF TOWN

**ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:**

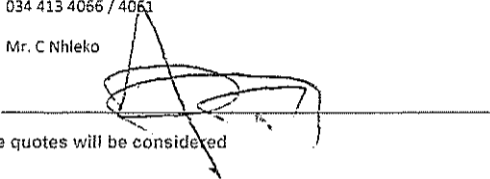
**Name:** SAMU MAPHISA  
**Email:** samukelisiwe.maphisa@kznhealth.gov.za  
**Contact Number:**

034 413 4066 / 4061

Finance Manager Name:

Mr. C Nhleko

Finance Manager Signature:



No late quotes will be considered

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