

Opening Date: 22/10/2018
Closing Date: 26/10/2018
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 CHC
Date Submitted 18/10/2018

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
452/18
Item Category: Goods
Item Description: DAILY RECEPTION HEADCOUNT REGISTER (VERSION 1.0 OF 2016)
PAGES FROM 1 TO 300
AS PER ATTACHED SPECIFICATION

Quantity (If supplies) 80 UNITS

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Select...
Date :
Time:
Venue:

QUOTES CAN BE COLLECTED FROM: 04 KHULULEKA DRIVE, KWADABEKA TOWNSHIP - STORE DEPARTMENT

QUOTES SHOULD BE DELIVERED TO: 04 KHULULEKA DRIVE, KWADABEKA TOWNSHIP - TENDER BOX

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: 