

**INSTITUTION DETAILS** 

Opening Date:

Closing Date:

**Closing Time:** 

Institution Name:

## **Quotation Advert**

11/10/2018

19/10/2018

Uthukela district office

11:00

Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	UTHUKELA HEALTH DISTRICT OFFICE
Date Submitted	12/10/2018
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: 51/18-19
Item Category:	Goods
Item Description:	03 ELECTRONIC TIME STAMP
Quantity (if supplies)	43 UNITO
	03 UNITS
COMPULSORY BRIEFING SESSION / S Select Type:	Select
Date :	Select
Time:	·
Venue:	
acting.	
QUOTES CAN BE COLLECTED FROM:	32 LYELL STREET, LADYSMITH 3370
QUOTES SHOULD BE DELIVERED TO:	32 LYELL STREET, LADYSMITH 3370
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:

Email:

Contact Number:

Finance Manager Name:

Finance Manager Signature:

Ms L.C Sithole

lindelwa.sithole@kznhealth.gov.za

036,631 2202

Mrs A.S Mnengela

No late quotes will be considered