₹	uotation Advert
Opening Date:	05/10/2018
Closing Date:	12/10/2018
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Madadeni hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	MADADENI HOSPITAL
Date Submitted	04/10/2018
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: 670/18/19
Item Category:	Goods
Item Description:	SUPPLY AND DILIVER CROSS OVER GROWN -MEDIUM
Quantity (if supplies)	30 UNITS
COMPULSORY BRIEFING SESSION / S Select Type:	
Date :	Select
Time:	
Venue:	
venue.	
QUOTES CAN BE COLLECTED FROM:	MADADENI HOSPITAL (SCM)
QUOTES SHOULD BE DELIVERED TO:	MADADENI HOSPITAL (ADMINISTRATION)
ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:	
Name:	MR MXOLISI MKHULISA
Email:	Mxolisi.Mkhulisa@kznhealth.gov.za
Contact Number:	034 328 8330
Finance Manager Name:	MR M.P MSOMI
Finance Manager Signature:	Att a canaidanad