

INSTITUTION DETAILS

Opening Date:
Closing Date:
Closing Time:

## **Quotation Advert**

19/10/2018

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	18/10/2018
ITEM CATEGORY AND DETAILS	.   .
Quotation Number:	ZNQ: 674/18/19
Item Category:	Goods
Item Description:	LAMINATED NASAL DRESSING
Quantity (if supplies)	40 UNITS
COMPULSORY BRIEFING SESSION / S	ITE VISIT
Select Type:	Not Applicable
Date:	
Time:	
Venue:	
QUOTES CAN BE COLLECTED FROM:	MADADENI HOSPITAL SCM OFFICES
QUOTES SHOULD BE DELIVERED TO:	MADADENI HOSPITAL ADMIN TENDER BOX
ENQUIRIES REGARDING THE ADVERT	
	MR LG KHUMALO
Email: Contact Number:	Ntombi.Sikhakhane@kznhealth.gov.za
Finance Manager Name:	034 328 8073
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Finance Manager Signature:	CAT (
No late quotes will be considered	