

INSTITUTION DETAILS

Opening Date:
Closing Date:
Closing Time:

Institution Name:

## **Quotation Advert**

19/10/2018 26/10/2018

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	18/10/5018
ITEM CATEGORY AND DETAILS	1 1
Quotation Number:	ZNQ: 776/18/19
Item Category:	Goods
Item Description:	OXYGEN SENSOR
Quantity (if supplies)	04 UNITS
COMPULSORY BRIEFING SESSION / SITE 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 MAY BE DIRECTED TO:	
Name:	MR LG KHUMALO
Email:	Ntombi.Sikhakhane@kznhealth.gov.za
Contact Number:	034 328 8073
Finance Manager Name:	MP MOOM
	NO.
Finance Manager Signature:	
No late quotes will be considered	