

## **Quotation Advert**

| Closing Date: 24/10/2018  Closing Time: 11:00  INSTITUTION DETAILS Institution Name: Zululand district office Province: KwaZulu-Natal Department or Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required Date Submitted 19/10/2018  ITEM CATEGORY AND DETAILS Quotation Number: ZNO: STORE STAMSEYS - 1X2 TEETH STRAIGHT, DURA MATER STRIPP FORCEPS - CURVED ANGLED AND SCAPEL LONG NO.4  COMPULSORY BRIEFING SESSION / SITE VISIT Select Type: Select  Date: Time: Venue:  QUOTES CAN BE COLLECTED FROM: ZULULAND HEALTH DISTRICT OFFICE  QUOTES SHOULD BE DELIVERED TO: ZULULAND HEALTH DISTRICT OFFICE  |              |
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| Closing Time:  INSTITUTION DETAILS Institution Name:  Province:  Evaluation Name:  Department or Entity:  Department or Section:  Central Supply Chain Management  Zululand Health District Office  19/10/2018  ITEM CATEGORY AND DETAILS  Quotation Number:  ZNO:  Sylvaria  Goods  Item Category:  Item Category:  Item Description:  Goods  Goods  Quantity (if supplies)  O6 UNITS  COMPULSORY BRIEFING SESSION / SITE VISIT  Select Type:  Select  Date:  Time:  Venue:  QUOTES CAN BE COLLECTED FROM:  ZULULAND HEALTH DISTRICT OFFICE  QUOTES SHOULD BE DELIVERED TO:  ZULULAND HEALTH DISTRICT OFFICE  | 1.10         |
| INSTITUTION DETAILS Institution Name:  Province:  Department or Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required Date Submitted  TEM CATEGORY AND DETAILS Quotation Number:  Item Category: Item Description:  FORCEPS RAMSEY'S - 1X2 TEETH STRAIGHT, DURA MATER STRIPP FORCEPS - CURVED ANGLED AND SCAPEL LONG NO.4  Goods  Quantity (if supplies)  OF UNITS  COMPULSORY BRIEFING SESSION / SITE VISIT Select Type: Date:  Time: Venue:  QUOTES CAN BE COLLECTED FROM:  ZULULAND HEALTH DISTRICT OFFICE   |              |
| Institution Name:  Province:  KwaZulu-Natal  Department or Entity:  Department of Health  Division or section:  Place where goods / services is required Date Submitted  Date Submitted  TEM CATEGORY AND DETAILS  Quotation Number:  Item Category:  Item Description:  TORCEPS RAMSEY'S - 1X2 TEETH STRAIGHT, DURA MATER STRIPP FORCEPS - CURVED ANGLED AND SCAPEL LONG NO.4  Quantity (if supplies)  O6 UNITS  COMPULSORY BRIEFING SESSION / SITE VISIT  Select Type: Date :  Date :  Date SUDUTES CAN BE COLLECTED FROM:  ZULULAND HEALTH DISTRICT OFFICE  | <b>5</b>     |
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| Department or Entity: Department of Health Division or section: Central Supply Chain Management  Zululand Health District Office 19/10/2018  ITEM CATEGORY AND DETAILS Quotation Number: ZNO: Goods Item Description: Central Supply Chain Management Zululand Health District Office 19/10/2018  ZNO: SAME SHOULD BE DELIVERED TO: ZNO: SOND SUNITS COMPULSORY BRIEFING SESSION / SITE VISIT Select  ZULULAND HEALTH DISTRICT OFFICE  ZULULAND HEALTH DISTRICT OFFICE   |              |
| Division or section:  Central Supply Chain Management  Central Supply Chain Management  Zululand Health District Office  19/10/2018  ITEM CATEGORY AND DETAILS  Quotation Number:  Item Category:  Item Category:  Item Description:  Conceps Ramsey's - 1x2 TEETH STRAIGHT, DURA MATER STRIPP FORCEPS - CURVED ANGLED AND SCAPEL LONG NO.4  Quantity (if supplies)  O6 UNITS  COMPULSORY BRIEFING SESSION / SITE VISIT  Select Type:  Date:  Time:  Venue:  QUOTES CAN BE COLLECTED FROM:  ZULULAND HEALTH DISTRICT OFFICE  QUOTES SHOULD BE DELIVERED TO:  ZULULAND HEALTH DISTRICT OFFICE   | $\mathbf{v}$ |
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| Zululand Health District Office  2   |              |
| Date Submitted  19/10/2018  ITEM CATEGORY AND DETAILS Quotation Number:  Item Category: Item Description:  PORCEPS RAMSEY'S - 1X2 TEETH STRAIGHT, DURA MATER STRIPP FORCEPS - CURVED ANGLED AND SCAPEL LONG NO.4  Quantity (if supplies)  O6 UNITS  COMPULSORY BRIEFING SESSION / SITE VISIT  Select Type:  Date:  Time:  Venue:  QUOTES CAN BE COLLECTED FROM:  ZULULAND HEALTH DISTRICT OFFICE   |              |
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| NQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:  |              |
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| mail:  |              |
| thabisile.madela@kznhealth.gov.za  Ontact Number:  |              |
| 0358240681<br>nance Manager Name:  |              |

No late quotes will be considered

Finance Manager Signature: