

Contact Number:

Quotation Advert

| LUANING OF KINGOLUMAN | | |
|--|---|-------------------------|
| Opening Date: | 03/10/2018 | |
| Closing Date: | 10/10/2018 | |
| Closing Time: | 11:00 | innet |
| INSTITUTION DETAILS | | |
| Institution Name: | Ngwelezane hospital | $\overline{\mathbf{v}}$ |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | NGWELEZANA HOSPITAL, THANDUYISE ROAD EMPANGEN | 11 381 |
| Date Submitted | 02/10/2018 | gjaj |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: B326/17-18 | |
| Item Category: | Goods | ∇ |
| Item Description: | EZ-10 INTRA-OSSEOUS INFUSION DEVISE ADULT AND PAEDIATRIC. BATTERY POWERED DEVICE AND BEVELED, HOLLOW DRILL TIPPED NEI SET | EDLE |
| Quantity (if supplies) | ON LINET | |
| COMPULSORY BRIEFING SESSION / | 01 UNIT | |
| Select Type: | | P8 |
| Date : | Not Applicable | <u>\</u> |
| Time: | | i i |
| Venue: | | |
| | | |
| QUOTES CAN BE COLLECTED FROM: | NGWELEZANA HOSPITAL SCM DEPT | |
| QUOTES SHOULD BE DELIVERED TO: | NGWELEZANA HOSPITAL TENDER BOX NEXT TO OPD | |
| ENQUIRIES REGARDING THE ADVERT | MAY BE DIRECTED TO: | |
| Name: | N.C. MANCONACTIVILLA DE TRANSPORTA | |
| | N.S MNGOMEZULU/R.T MKHUMBUZI | |

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Finance Manager Signature:

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Chain Management - AdvertQuote

No late quotes will be considered

Print this page

e completed Quotation Advert must be printed and signed by the Finance manager.