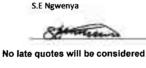


Contact Number:

Quotation Advert

| Opening Date: | 17/10/2018 | 10 |
|--|--|--|
| Closing Date: | 24/10/2018 | |
| Closing Time: | 11:00 | |
| 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 | THANDUYISE RD, NGWELEZANA T/SHIP EMPANGENI | 100 |
| Date Submitted | 15/10/2018 | |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: B365/18-19 | and the second s |
| Item Category: | Goods | Y |
| Item Description: | FOG FREE SURGICAL MASK. | 1 |
| | | |
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| | | |
| | | and the second |
| | | İ |
| Quantity (if supplies) | 12 BOXES OF 50 | |
| COMPULSORY BRIEFING SESSION / SITE VISIT | | |
| Select Type: | Not Applicable | $\overline{\mathbf{v}}$ |
| Date: | | 112 |
| Time: | | |
| Venue: | | ą. |
| | | ī |
| QUOTES CAN BE COLLECTED FROM: | NGWELEZANE HOSPITAL, THANDUYISE ROAD, SCM DEPARTMENT | - |
| QUOTES SHOULD BE DELIVERED TO: | NGWELEZANE HOSPITAL, TENDERBOX NEXT TO OPD | į |
| ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: | | |
| Name: | NS MNGOMEZULU/ RT MKHUMBUZI | |
| Email: | nomathandazo.mngomezulu@kznhealth.gov.za | |





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