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	W.		Department: Health PROVINCE OF KWAZULU-HATAL
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Department: Health PROVINCE OF KWAZULU-HATAL	Quotation Advert	
Opening Date:	17/09/2018	(ie)
Closing Date:	28/09/2018	
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Umzimkhulu hospital	<b>\</b>
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is requ	ıíred uMzimkhulu Hospital	
Date Submitted	13/09/2018	genetics [
ITEM CATEGORY AND DETAIL	s	
Quotation Number:	ZNQ: ZNQ165/18-19	
Item Category:	Services	$oldsymbol{\Sigma}$
Item Description:	INFARED TESTING SERVICE	
Quantity (if supplies)	30 DBs	

20/09/2018

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Select Type: Compulsory Briefing Session

Time: 11H00

UMZIMKHULU HOSPITAL Venue:

UMZIMKHULU HOSPITAL SCM QUOTES CAN BE COLLECTED FROM:

UMZIMKHULU HOSPITAL TENDER BOX

QUOTES SHOULD BE DELIVERED TO:

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: PALESA or BRENDA

Email: philani.mkhize@kznhealth.gov.za

**Contact Number:** 

Date:

0392590310 EXT. 156/130/155

Page 2 of

No late quotes will be considered

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Finance Manager Name:

Finance Manager Signature:

te:

the Finance manager