

Contact Number:

## **Quotation Advert**

FROM THE OF MINAPPLEMENT	
Opening Date:	14/09/2018
Closing Date:	19/09/2018
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Itshelejuba hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	ITSHELEJUBA HOSPITAL
Date Submitted	13/09/2018
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: 231/18/19
Item Category:	Goods
Item Description:	Supply and delivery of swabs stirile alcohol 30 x 25 Mm x 200 Boxes.  Somple is required together with quototion
Quantity (if supplies)	
COMPULSORY BRIEFING SESSION / SITE VISIT	
Select Type:	Not Applicable
Date:	ZOLONIES   LOS   LOS
Time:	•
Venue:	
QUOTES CAN BE COLLECTED FROM:	ITSHELEJUBA HOSPITAL ALONG N2 ROUD BETWEEN PONGOLA AND PIET A RETIEF TOWN
QUOTES SHOULD BE DELIVERED TO:	ITSHELEIUBA HOSPITAL ALONG NZ ROUD BETWEEN PONGOŁA AND PIET RETIEF TOWN
ENQUIRIES REGARDING THE ADVERT	MAY BE DIRECTED TO:
Name:	SAMU MAPHISA
Email:	samukelisiwe.maphisa@kznheath.co.za

Finance Manager Name:

MR C. NHLEND

Finance Manager Signature:

No late quotes will be considered

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

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