

Contact Number:

Quotation Advert

Opening Date:	03/09/2018	1
Closing Date:	10/09/2018	腱
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	EG & Usher Memorial hospital	V
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	E.G & USHER MEMORIAL HOSPITAL SUPPLY CHAIN	
Date Submitted	31/08/2018	HE.
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: 279/18/19	
Item Category:	Goods	V
Item Description:	28L POLISH APPLICATOR	
Quantity (if supplies)		
COMPULSORY BRIEFING SESSION / S Select Type:		.
Date:	Not Applicable	V
Time:		
Venue:		
venue.		
QUOTES CAN BE COLLECTED FROM:	E.G & USHER MEMORIAL HOSPITAL	
QUOTES SHOULD BE DELIVERED TO:	E.G & USHER MEMORIAL HOSPITAL	
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	MS B XHAYA	1
Email:	Bongeka Xhaya@kanhealth goy za	:

Bongeka.Xhaya@kznhealth.gov.za

Finance Manager Signature:

Finance Manager Name: MS N MBANA

No late quotes will be considered

:039 797 8145

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