

Quotation Advert

| | | |
|---|---|-------------------------------------|
| Opening Date: | 18/09/2018 | <input type="checkbox"/> |
| Closing Date: | 25/09/2018 | <input type="checkbox"/> |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | EG & Usher Memorial hospital | <input checked="" type="checkbox"/> |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | EGUMH (SCM) | |
| Date Submitted | 17/09/2018 | <input type="checkbox"/> |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: 310/18/19 | |
| Item Category: | Goods | <input checked="" type="checkbox"/> |
| Item Description: | STEEL, EXECUTIVE FILLING CABINATE & EXECUTIVE OFFICE DISPLAY DESK | |
| Quantity (if supplies) | | |
| COMPULSORY BRIEFING SESSION / SITE VISIT | | |
| Select Type: | Not Applicable | <input checked="" type="checkbox"/> |
| Date : | | <input type="checkbox"/> |
| Time: | | |
| Venue: | | |
| QUOTES CAN BE COLLECTED FROM: | EG & USHER MEMORIAL HOSPITAL STORES | |
| QUOTES SHOULD BE DELIVERED TO: | EG & USHER MEMORIAL HOSPITAL STORES | |
| ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: | | |
| Name: | MS B XHAYA | |
| Email: | Bongeka.Xhaya@kznhealth.gov.za | |
| Contact Number: | | |

039 797 8145





Finance Manager Name:

Ms N Mbana

Finance Manager Signature:



No late quotes will be considered

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Note: