

Quotation Advert

Opening Date:	21/09/2018	
Closing Date:	11/10/2018	
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Mosvold hospital	~
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	MOSVOLD hOSPITAL	
Date Submitted	21/09/2018	0
ITEM CATEGORY AND DETAILS		Leave
Quotation Number:	ZNQ: 367 / 2018/ 2019	
Item Category:	Goods	~
Item Description:	SUPPLY ADMISSION , DEATH, AND DICHARGE REGISTER	
Quantity (if supplies)	16 UNIT	
COMPULSORY BRIEFING SESSION		
Select Type:	Not Applicable	~
Date:	нос ирупсави.	
Time:		
Venue:		
QUOTES CAN BE COLLECTED FROM:	MOSVOLD HOSPITAL SCM	
QUOTES SHOULD BE DELIVERED TO:	MISVOLD HOSPITAL TENDER BOX AT MAIN GATE	
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:	
Name:	MISS NONHLAHLA ZIKHALI	
Email:	nonhlanhla.zikhali@kznhealth.gov.za	
Contact Number:	035 591 0122 ext 153	
Finance Manager Name:	MRS N.P MYENI	
Finance Manager Signature:	77 Page quotes will be considered	
No I	ate quotes will be considered	