

Quotation Advert

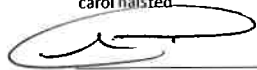
| | | |
|---|---|---------------------------------|
| Opening Date: | 2019-08-05 | <input type="text"/> |
| Closing Date: | 2019-08-15 | <input type="text"/> |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Vryheid hospital | <input checked="" type="text"/> |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | WVRYHEID HOSPITAL | |
| Date Submitted | 2019-08-02 | <input type="text"/> |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: 198 / 2019 / 20 | |
| Item Category: | Goods | <input checked="" type="text"/> |
| Item Description: | DOMESTIC FURNITURE | |
| | | |
| Quantity (if supplies) | once off | |
| COMPULSORY BRIEFING SESSION / SITE VISIT | | |
| Select Type: | Not Applicable | <input checked="" type="text"/> |
| Date : | | <input type="text"/> |
| Time: | | |
| Venue: | | |
| | | |
| QUOTES CAN BE COLLECTED FROM: | TO BE COLLECTED AT VRYHEID HOSPITAL DUE TO SYSTEM FAILER (EMAILS AND TELEPHONES) | <input checked="" type="text"/> |
| QUOTES SHOULD BE DELIVERED TO: | HAND DELIVERY AT THE FRONT ENTRANCE TENDER BOX NEXT TO THE LIFTS | |
| | | |
| ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: | | |
| Name: | Mr S.Zulu | |
| Email: | non | |
| Contact Number: | | |

Finance Manager Name:

non

carol halsted

Finance Manager Signature:



A handwritten signature in black ink, appearing to read 'Carol Halsted', is written over a horizontal line. The signature is stylized with a large loop at the end.

No late quotes will be considered