



## Quotation Advert

Opening Date: 26/02/2019

Closing Date: 04/03/2019

Closing Time: 11:00

## INSTITUTION DETAILS

Institution Name: Gamalakhe CHC

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: GAMALAKHE CHC

Date Submitted

## ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:  
GCHC 189/1819

Item Category: Select...

Item Description: LAB TO PROVIDE GLASSES TO PATIENT ( PRESCRIPTION GLASSES) 12 MONTHS CONTRACT

Quantity (if supplies)

## COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Select...

Date :

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: OFF RAY NKONYENI ROAD , CORNER OF REV SITHOLE & MICHEAL NSIMBI GAMALAKHE SCM

QUOTES SHOULD BE DELIVERED TO: OFF RAY NKONYENI ROAD , CORNER OF REV SITHOLE & MICHEAL NSIMBI ROAD GAMALAKHE TENDER BOX

## ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

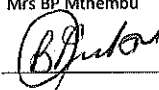
Name: MR F. MBALI

Email: Mbalif.Fani@kznhealth.gov.za

Contact Number: 0393181113

Finance Manager Name: Mrs BP Mthembu

Finance Manager Signature:

  
No late quotes will be considered