



Opening Date: 05/02/2019 
Closing Date: 12/02/2019 
Closing Time: 11:00

INSTITUTION DETAILS



Institution Name: Grey's hospital 
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required Grey's Hospital
Date Submitted 01/02/2019 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
4577/11/18
Item Category: Goods 
Item Description: Cell saver apparatus

Quantity (if supplies) 1

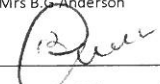
COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 
Date : 
Time:
Venue:

QUOTES CAN BE COLLECTED FROM: Grey's Hospital -Supply Chain Department

QUOTES SHOULD BE DELIVERED TO: Grey's Hospital

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Nomfundo Ngubane
Email: nomfundo.shelembe@kznhealth.gov.za
Contact Number: 033 897 3481
Finance Manager Name: Mrs B.G Anderson
Finance Manager Signature: 

No late quotes will be considered