



Quotation Advert

Opening Date: 12/02/2019
Closing Date: 20/02/2019
Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Murchison hospital
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required: Main Harding Road Murchison Hospital
Date Submitted: 08/02/2019

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
H361/18/19
Item Category: Goods
Item Description: COMPLETE VACUUM DELIVERY SYSTEM

Quantity (if supplies) 20

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date :

Time:

Venue:

QUOTES CAN BE COLLECTED FROM:

QUOTES SHOULD BE DELIVERED TO:

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: SIBONISO
Email: scm.murchisonhospital@kznhealth.gov.za
Contact Number: 039 687 7311 ext. 170
Finance Manager Name: Mr. C.B. Xolo

Finance Manager Signature:


No late quotes will be considered