

Quotation Advert

Opening Date:

~~2019-07-02~~

2019/07/03

Closing Date:

2019-07-11

Closing Time:

11:00

INSTITUTION DETAILS

Institution Name:

Itshelejuba hospital

Province:

KwaZulu-Natal

Department or Entity:

Department of Health

Division or section:

Central Supply Chain Management

Place where goods / services is required

ITSHELEJUBA HOSPITAL

Date Submitted

~~2019-06-28~~

2019/07/02

ITEM CATEGORY AND DETAILS

Quotation Number:

ZNQ:
160/19/20

Item Category:

Goods

Item Description:

SUPPLY AND DELIVERY OF THREE QUARTER (3/4) BED X10
DOUBLE BED X10

SPECIFICATION IS ATTACHED ON QUOTATION DOCUMENT

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type:

Not Applicable

Date :

Time:

Venue:

QUOTES CAN BE COLLECTED FROM:

ITSHELEJUBA HOSPITAL

QUOTES SHOULD BE DELIVERED TO:

ITSHELEJUBA HOSPITAL

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name:

MW SIKOSANA

Email:

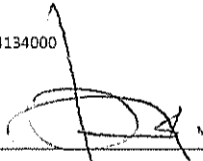
samukelisiwe.maphisa@kznhealth.gov.za

Contact Number:

Finance Manager Name:

0344134000

Finance Manager Signature:



A handwritten signature in black ink is written over a horizontal line. The signature is somewhat stylized and partially obscured by a vertical line that extends from the top of the page down through the signature.

No late quotes will be considered