

Name:

Email:

Contact Number:

Finance Manager Name:

Finance Manager Signature:

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Department: Health PROVINCE OF KWAZULU-NATAL	the state of the s	T
ening Date:	2016-06-14	I a
osing Date:	2016-06-27	
	11:00	
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ISTITUTION DETAILS	Estcourt hospital	_
stitution Name:	KwaZulu-Natal	
rovince:	Department of Health	
Department or Entity:	Central Supply Chain Management	
Division or section:	MIANTENENCE DEPT.	*****
Place where goods I services is required	2019-06-12	
Date Submitted	Σ0.19-00-1 5	
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: ZNQ 249 of 2019/2020	
Item Category:	Services RENOVATIONS / REPAIRS AT BRICKHILL ROAD	- CIDB GRADING 2 GB /
Item Description:	OR HIGHER 2 CE OR HIGH	1100
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kay.misrilal@kznhealth.gov.za

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