

**Contact Number:** 

## **Quotation** Advert

| PROVINCE OF KWAZULU-NATAL                |  |                         |
|--|--|-------------------------|
| Opening Date:                            | 2019-06-05                                 | , 0                     |
| Closing Date:                            | 2019-06-12                                 | 110                     |
| Closing Time:                            | 11:00                                      | 1                       |
| INSTITUTION DETAILS                      |  |                         |
| Institution Name:                        | Ngwelezane hospital                        | [✓]                     |
| Province:                                | KwaZulu-Natal                              |                         |
| Department or Entity:                    | Department of Health                       |                         |
| Division or section:                     | Central Supply Chain Management            |                         |
| Place where goods / services is required | NGWELEZANE HOSPITAL                        |                         |
| Date Submitted                           | 2019-06-04                                 | II O                    |
| ITEM CATEGORY AND DETAILS                |  | then)                   |
| Quotation Number:                        | ZNQ:<br>A281/18-19                         |                         |
| Item Category:                           | Goods                                      | $\overline{\mathbf{v}}$ |
| Item Description:                        | KATENA CATARACT SETS                       |                         |
|  |  |                         |
| Quantity (if supplies)                   | O2 SETS                                    |                         |
| COMPULSORY BRIEFING SESSION              | SITE VISIT                                 |                         |
| Select Type:                             | Not Applicable                             | $\nabla$                |
| Date:                                    | Andrew Andrews                             |                         |
| Time:                                    |  |                         |
| Venue:                                   |  |                         |
| QUOTES CAN BE COLLECTED FROM:            | NGWELEZANE HOSPITAL STORES                 |                         |
| QUOTES SHOULD BE DELIVERED TO:           | NGWELEZANE HOSPITAL TENDER BOX NEXT TO OPD |                         |
| ENQUIRIES REGARDING THE ADVER            |  |                         |
|  | N.S MNGOMEZULU/N.Z DLADLA                  |                         |
| Email:                                   | nomathandare magamenti @bankeelth severe   |                         |

nomathandazo.mngomeulu@kznhealth.gov.za

Finance Manager Name:

Finance Manager Signature:

035 901 7228/7180 No late quotes will be godsidered

MR L SHANDU

