| health Department: Health PROVINCE OF KHAZULU-NATAL | Quotation Advert | |
|---|--|----------|
| Opening Date: | 1019-06-26 | G |
| Closing Date: | 2019-07-03 | 20 |
| Closing Time: | 11:00 | 6.15 |
| INSTITUTION DETAILS | | |
| Institution Name: | Ngwelezane hospital | V |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | NGWELEZANA HOSPITAL | |
| Date Submitted | 2019-06-25 | ## |
| ITEM CATEGORY AND DETAILS | | tem |
| Quotation Number: | ZNQ: A86/19-20 | |
| Item Category: | Goods | ☑ |
| Item Description: | 12 MONTHS CONTRACT FOR PAPER STERI SHEET 1000X1400 | _ |
| | î. | |
| | | |
| Quantity (if supplies) | 720 BALES OF 100 |] |
| COMPULSORY BRIEFING SESSION | | - P |
| Select Type: | Not Applicable | ∇ |
| Date: | | |
| Time: | | 1012 |
| Venue: | | |

| Not Applicable | V |
|--|---|
| | |
| | |
| | |
| NGWELEZANA HOSPITAL SCM DEPT | |
| NGWELETANA UCCOTAL TENDED DOVING TO AND | |
| HOWELLESNING HOSPITAL TENDER BOX NEXT TO OPD | |
| | |

| ENQUIRIES REGARDING THE | ADVERT MAY BE DIRECTED TO: | |
|----------------------------|--|--|
| Name: | N.S MNGOMEZULU/ R.T MKHUMBUZI | |
| Email: | nomathandazo.mngomezulu@kznhelath.gov.za | |
| Contact Number: | 035 901 7228/7180 | |
| Finance Manager Name: | MR L SHANDU | |
| Finance Manager Signature: | 2 Bru | |

No late quotes will be considered