| health Department: Health Provides of KNAZOLUHATAL | Quotation Advert | *** |
|----------------------------------------------------|----------------------------------------------------------------|--------------|
| Opening Date: | 2019-06-26 | o |
| Closing Date: | 2019-07-03 | le p |
| Closing Time: | 11:00 | Fitts |
| 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 | NGWELEZANA HOSPITAL | |
| Date Submitted | 2019-06-25 | mo. |
| ITEM CATEGORY AND DETAILS | | CO-LO |
| Quotation Number: | ZNQ: A93/19-20 | |
| Item Category: | Goods | abla |
| Item Description: | ADULT MALE PATIENT HEALTH RECORD PRIMARY HEALTH CAUNITS | ARE - 1000 |
| | ADULT FEMALE PATIENT HEALTH RECORD PRIMARY HEALTH UNITS | CARE -1000 |
| | CHILD PATIENT HEALTH RECORD PRIMARY HEALTH CARE BIR 5000 UNITS | TH 15 YEARS- |
| Quantity (if supplies) | 25 000 UNITS | |
| COMPULSORY BRIEFING SESSION | SITE VISIT | |
| Select Type: | Not Applicable | |
| Date : | | |
| Time: | | [1177 |
| Venue: | | |
| QUOTES CAN BE COLLECTED FROM: | NGWELEZANA HOSPITAL SCM DEPT | |
| QUOTES SHOULD BE DELIVERED TO: | NGWELEZANA HOSPITAL TENDER BOX NEXT TO OPD | |
| ENQUIRIES REGARDING THE ADVER | RT MAY BE DIRECTED TO: | |
| Name: | N.S MNGOMEZULU/ R.T MKHUMBUZI | |
| Email: | | |
| | nomathandazo.mngomezulu@kznhelath.gov.za | |
| Contact Number: | nomathandazo.mngomezulu@kznhelath.gov.za | |
| Contact Number: Finance Manager Name: | | |

No late quotes will be considered