

Contact Number:

Finance Manager Name:

Finance Manager Signature:

Quotation Advert

15/03/2019 1 Closing Date: 22/03/2019 tio. Closing Time: 11:00 INSTITUTION DETAILS Institution Name: Gamalakhe CHC V Province: KwaZulu-Natal Department or Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required GCILIMA CLINIC Date Submitted 08/03/2019 ē ITEM CATEGORY AND DETAILS **Quotation Number:** ZNQ: GCHC 224/1819 Item Category: Goods V Item Description: SUPPLY & INSTALL PEDESTRIAN GATE, SUPPLY & DELIVER HIGH DENSITY FILING CUBINET 6 BAY UNIT, UPGRADE GCILIMA BATHROOM, REPAIR FRONT DOOR ENTRANCE. Quantity (if supplies) COMPULSORY BRIEFING SESSION / SITE VISIT Select Type: Compulsory Briefing Session V Date: 15/03/2019 19 Time: 10h30 Venue: GCILIMA CLINIC QUOTES CAN BE COLLECTED FROM: SITE MEETING QUOTES SHOULD BE DELIVERED TO: **GAMALAKHE CHC** ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: Name: MR P NGUBO Emall:

039 318 1113

MRS BP MTHEMBU

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