| a file. | health |
|---------|--|
| 102 | Department: Health PROVINCE OF KINAZULIS-MATAL |

| Department: Health PROVINCE OF KMAZULIS-NATAL | Quotation Advert | |
|---|--|-------------------------|
| Opening Date: | 2019-05-27 | |
| Closing Date: | 2019-05-31 | |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Phoenix CHC | $\overline{\mathbf{v}}$ |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | PHOENIX COMMUNITY HEALTH CENTRE | |
| Date Submitted | 2019-05-24 | |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: 23/2019 | |
| Item Category: | Services | ∇ |
| Item Description: | REPAIRS TO CENTRAL DRS COOLING SYSTEM FOR PHARMACY | ت |
| | | |
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| | | |
| | | |
| | | |
| | | |
| Quantity (if supplies) | 01 | ú 1 |
| COMPULSORY BRIEFING SESSION | N / SITE VISIT | |
| Select Type: | Both | ∇ |
| Date: | 2019-05-28 | 119 |
| Time: | 11:30 AM | 1 |
| Venue: | PHOENIX CHC STORES | |
| | | |
| QUOTES CAN BE COLLECTED FROM: | PHOENIX COMMUNITY HEALTH CENTRE | |
| QUOTES SHOULD BE DELIVERED TO: | PHOENIX COMMUNITY HEALTH CENTRE | 994 |
| ENQUIRIES REGARDING THE ADV | ERT MAY BE DIRECTED TO: | |
| Name: | SILONDIWE GUMEDE | 1 |
| Email: | silondiwe.gumede@kznhealth.gov.za | |
| Contact Number: | 0315380877 | |
| Finance Manager Name: | TEES GOVENDER | |
| Finance Manager Signature: | • | |
| | | _ |

No late quotes will be considered