Opening Date: 2019-05-27 □□ Closing Date: 2019-06-03 □□ Closing Time: 11:00 INSTITUTION DETAILS Institution Name: Manguzi hospital ▼ Province: KwaZulu-Natal Department or Entity: Department of Health Division or section: Central Supply Chain Management Place where goods / services is required Maintenance Date Submitted 2019-05-27 □□ ITEM CATEGORY AND DETAILS Quotation Number: ZNQ: 57/2019-20 Item Description: Services ▼ Item Description: Service ▼ Quantity (if supplies) 60 COMPULSORY BRIEFING SESSION / SITE VISIT Select Type: Not Applicable ▼ Time: Venue: QUOTES CAN BE COLLECTED FROM: SCM MANGUZI HOSPITAL/SEND A REQUEST: and lie_gumede@kr.nhealth.gov.za QUOTES SHOULD BE DELIVERED TO: TENDER BOXXVIA EMAIL: Gabazile. Trivvala@kr.nhealth.gov.za ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO: MANDE: MANDE CITED TO: MANDE DIRECTED TO: MANDE: MANDE CITED TO: MANDE DIRECTED TO: MANDE: MANDE CITED TO: MANDE DIRECTED TO: MANDE: MANDE CITED TO: MANDE: MANDE CITED TO: MANDE CITED TO: MANDE: M	health Department: Health PROVINCE OF KWAZULU-NATAL	uotation Advert	
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	ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:		
MAIN GOMEDE	Name:	MR A N GUMEDE	1

Email:	andile.gumede@kznhealth.gov.za
Contact Number:	0355920150 EXT 212
Finance Manager Name:	MISS T.L VUMASE
Finance Manager Signature:	No late quotes will be considered

UMNYANGO WEZEMPILO KWAZULU NATAL DEPARTMENT OF KWAZULU-NATAL DEPARTMENTAL FINANCE SECTION

27-05-2019

MANGULI HOSPITAL PRIVATE BAG X301 KWANGWANASE 3973