

Contact Number:

Quotation Advert

HEREIN HORAULUNATAL	Ser a contract of the	
Opening Date:	2019-10-07	
Closing Date:	2019-10-14	 E
Closing Time:	11:00	ائت
INSTITUTION DETAILS		
Institution Name:	Itshelejuba hospital	<u>~</u>
Province:	KwaZulu-Natal	لىتىد
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	ITSHELEJUBA HOSPITAL	
Date Submitted	2019-10-02	proces.
ITEM CATEGORY AND DETAILS		1 1:
Quotation Number:	ZNQ: 146/19/20	
Item Category:	Goods	V
Item Description:	SUPPLY & DELIVERY OF CHAIR BOARDROOM WITHOUT ARMREST	:3
	SPECIFICATION IS ATTACHED ON QUOTATION DOCUMENT	
	~	
Quantity (if supplies)	43	
COMPULSORY BRIEFING SESSION	/ SITE VISIT	
Select Type:	Not Applicable	~
Date:		
Time:		
Venue:		
QUOTES CAN BE COLLECTED FROM:	itshelejuba hospital	
QUOTES SHOULD BE DELIVERED TO:	ITSHELEJUBA HOSPITAL	
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:	
Name:	MW SIKOSANA	
Email:	michael.sikosana@kznhealth.gov.za	

Finance Manager Name:

Finance Manager Signature:



