

**Opening Date:** 2019-10-23   
**Closing Date:** 2019-10-30   
**Closing Time:** 11:00

## INSTITUTION DETAILS



**Institution Name:** King Cetshwayo district office   
**Province:** KwaZulu-Natal  
**Department or Entity:** Department of Health  
**Division or section:** Central Supply Chain Management  
**Place where goods / services is required** KING CETSHWAYO HEALTH DISTRICT OFFICE  
**Date Submitted** 2019-10-22 

## ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
213/DC28/19-20  
**Item Category:** Goods   
**Item Description:** BROTHER TONER TN-3290/3250 X 10 UNITS  
BROTHER TONER TN-3185 X 10 UNITS  
LEXIMARK INK CARTRIDGE 220XL BLACK X 10 UNITS  
  



Quantity (if supplies)

## COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Not Applicable   
**Date :** 

**Time:**

**Venue:**

**QUOTES CAN BE COLLECTED FROM:** KING CETSHWAYO DISTRICT OFFICE : SCM OFFICE - OFFICE NO. 56 1ST FLOOR, EMPANGENI RAIL, 3910 

**QUOTES SHOULD BE DELIVERED TO:** KING CETSHWAYO DISTRICT OFFICE TENDER BOX (1ST FLOOR), 2ND LOOD AVE, CNR CHROME KULEKA AVE, EMPANGENI RAIL 3910

## ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

**Name:** MISS NW MYAKA  
**Email:** nozipho.myaka@kznhealth.gov.za  
**Contact Number:**

Finance Manager Name:

035 787 6327

MRS SL MSANE

Finance Manager Signature:

A handwritten signature in black ink, appearing to read 'Msane', is written over a horizontal line. The signature is stylized and somewhat illegible.

No late quotes will be considered