




Opening Date: 2019-10-15 

Closing Date: 2019-10-22 

Closing Time: 11:00

INSTITUTION DETAILS


Institution Name: Niemeyer Memorial hospital 

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: Niemeyer Memorial Hospital

Date Submitted: 2019-10-14 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
308/19 NIEM

Item Category: Goods 

Item Description: PUMP, ENTERAL FEEDING

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date: 

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: NIEMEYER HOSPITAL (NO: 31 KANTOOR STREET UTRECHT)

QUOTES SHOULD BE DELIVERED TO: NIEMEYER HOSPITAL (NO: 31 KANTOOR STREET UTRECHT)

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Mr. SM Zulu

Email: Sphiwe.Zulu2@kznhealth.gov.za

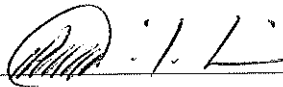
Contact Number:

034 331 2369

Finance Manager Name:

Mr. PMX Vilakazi

Finance Manager Signature:



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

No late quotes will be considered