

Quotation Advert

| PROVINCE OF KNINZULU-HATAL | | |
|--|---------------------------------|--------------|
| Opening Date: | 2019-10-08 | T o |
| Closing Date: | 2019-10-18 | = |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Umphumulo hospital | ☑ |
| Province: | KwaZulu-Natal | _ |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | | |
| Date Submitted | 2019-10-08 | |
| ITEM CATEGORY AND DETAILS | | in. |
| Quotation Number: | ZNQ: | |
| | C283/19/20 | |
| Item Category: | Goods | $oxed{oxed}$ |
| Item Description: | BLOOD WARMER (E195) | |
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| | | |
| | | i |
| Quantity (if supplies) | 01 | |
| COMPULSORY BRIEFING SESSION | SITE VISIT | |
| Select Type: | Not Applicable | \vee |
| Date : | | 210 |
| Time: | | |
| Venue: | | |

R 74 GREYTOWN ROAD MAPHUMULO 4470 STORES

R74 GREYTOWN ROAD MAPHUMULO 4470 (SECURITY MAIN GATE)

QUOTES SHOULD BE DELIVERED TO:

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

SIBONELO SITHOLE

SIBONELO.SITHOLE@KZNHEALTH.GOV.ZA

Contact Number:

Name:

Email:

QUOTES CAN BE COLLECTED FROM:

Finance Manager Name:

Finance Manager Signature:

MRS NM SELEPE

032 481 4181 /03

No late quotes will be considered

