

## **Quotation Advert**

Opening Date:	2019-09-19
Closing Date:	2019-09-27
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Greytown hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	SCM
Date Submitted	2019-09-19
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ:
W	06/06/2019
Item Category: Item Description:	Goods
	SUPLLY AND DELIVER WHITE LABELS PHARMACY (70X37/24UP) 24 PER PAGE OF 100 SHEET
Quantity (if supplies)	100 BOXES
COMPULSORY BRIEFING SESSION /	SITE VISIT
Select Type:	Not Applicable
Date :	
Time:	
Venue:	
QUOTES CAN BE COLLECTED FROM:	GREYTOWN HOSPITAL (SCM) FROM 7:30 TO 16:00 WEEKDAYS
QUOTES SHOULD BE DELIVERED TO:	Greytown Hosp bell street ext-must be deposited in a tender box next to the gate or email to bongukwanda.dlamini@kznhealth.gov.za
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:
Name:	Ms. P.N Khanyile or Mrs T.R. Jali
Email:	siyabonga.mzolo@kznhealth.gov.za
Contact Number:	033 4139 431 Ext:291
Finance Manager Name:	MR R. Haniff
Finance Manager Signature:	

No late quotes will be considered