




Quotation Advert

Opening Date: 2019-09-04 

Closing Date: 2019-09-11 

Closing Time: 11:00

INSTITUTION DETAILS


Institution Name: Pholela CHC 

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required Pholela CHC

Date Submitted 2019-09-02 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
141/19/20PCHC


Item Category: Goods 

Item Description: Blinds

Quantity (if supplies) 60

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date : 

Time:

Venue:

QUOTES CAN BE COLLECTED FROM:

QUOTES SHOULD BE DELIVERED TO:

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Hlengiwe Mkhize

Email: hlengiwe.mkhize@kznhealth.gov.za

Contact Number:

Finance Manager Name:

039 8329491

T.Q Zulu

Finance Manager Signature:

A handwritten signature in black ink, appearing to be 'T.Q Zulu', written over a horizontal line. The signature is stylized with a large loop and a vertical stroke.

No late quotes will be considered