



## Quotation Advert

**Opening Date:** 2019-09-05

**Closing Date:** 2019-09-12

**Closing Time:** 11:00

### INSTITUTION DETAILS

**Institution Name:** Mseleni hospital

**Province:** KwaZulu-Natal

**Department or Entity:** Department of Health

**Division or section:** Central Supply Chain Management

**Place where goods / services is required** MSELENI HOSPITAL

**Date Submitted** 2019-09-04

### ITEM CATEGORY AND DETAILS

**Quotation Number:** ZNQ:  
287/19/20-C

**Item Category:** Goods

**Item Description:** PRINT AND SUPPLY KZN A4 HEAD COUNT REGISTER BOOKLET

**Quantity (if supplies)** 561

### COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Not Applicable

**Date :**

**Time:**

**Venue:**

**QUOTES CAN BE COLLECTED FROM:** SCM OFFICE / [nozipho.ndlovu@kznhealth.gov.za](mailto:nozipho.ndlovu@kznhealth.gov.za)

**QUOTES SHOULD BE DELIVERED TO:** 035 574 1003 / [mandla.zikhali@kznhealth.gov.za](mailto:mandla.zikhali@kznhealth.gov.za) / TENDER BOX

### ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

**Name:** NOZPIPHO NDLOVU

**Email:** [nozipho.ndlovu@kznhealth.gov.za](mailto:nozipho.ndlovu@kznhealth.gov.za)

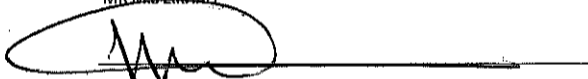
**Contact Number:**

035 574 1004 EXT 251

Finance Manager Name:

MR M.S.ZIKHALI

Finance Manager Signature:

A handwritten signature in black ink, appearing to be 'MR M.S.ZIKHALI', is written over a horizontal line. The signature is enclosed within a hand-drawn oval.

No late quotes will be considered