


Opening Date: 2019-09-30
Closing Date: 2019-10-06 07 
Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: St Chads CHC
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required ST CHADS CHC
Date Submitted 2019-09-26

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
341 MTEY,335 GCI,337 SAHL/19-20

Item Category: Goods

Item Description: HPRS REGISTER BOOKLET FOR MALES
QTY= 2033

HPRS REGISTER BOOKLET FOR FEMALES
QTY = 2820

HPRS REGISTER BOOKLET FOR CHILDREN
QTY= 2300

Quantity (if supplies) 7153

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable
Date : N/A
Time: N/A
Venue:

Name: ZOE NGUBANE / ANNALINE SOMARU
Email: zoe.mkhize@kznhealth.gov.za / annaline.somaru@kznhealth.gov.za
Contact Number: 036 637 9600
Finance Manager Name: MISS L.P ZONDI
Finance Manager Signature: CEO DR S.E MHLALI

No late quotes will be considered