| | health Department Health PROVINCE OF KI | WAZUEU | NATAL |
|---------|--|--------|-------|
| Opening | Date: | | |

Quotation Advert

| PROVINCE OF KWAZULU-HATAL | | |
|--|--|------------------|
| Opening Date: | 2020-04-29 | (migras |
| Closing Date: | 2020-05-12 | (SEC) |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Charles Johnson Memorial hospital | c TT |
| Province: | KwaZulu-Natal | \triangleright |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | | |
| Date Submitted | 2020-04-28 | Premi |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: 0014/2020-21 | |
| Item Category: | Services | a n |
| Item Description: | SUPPLY AND DELIVER BODY BAGS | Y |
| Quantity (if supplies) | | |
| COMPULSORY BRIEFING SESSION | / SITE VISIT | |
| Select Type: | Not Applicable | \mathbf{Y} |
| Date : | | |
| Time: | | iii) |
| Venue: | | |
| QUOTES CAN BE COLLECTED FROM: | CHARLES JOHNSON MEMORIAL HOSPITAL SCM | |
| QUOTES SHOULD BE DELIVERED TO: | CHARLES JOHNSON MEMORIAL HOSPITAL TENDER BOX NEXT TO OPD GATE AT LOT 92 HLUBI STREET NQUTU 3135 | |
| ENQUIRIES REGARDING THE ADVE | | |
| Name: | B. MABASO | |
| Email: | vusumuzi.mabaso@kznhealth.gov.za | |
| Contact Number: | 034 - 271 6 <u>4</u> 47 | |
| inance Manager Name: | E.M. MAHLINZA | |
| inance Manager Signature: | AL T | |

No late quotés will be considered