Department. Health Performent or Konszulu-HAZAL	Quotation Advert	
Opening Date:	2020-07-29	10
Closing Date:	2020-08-04	
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	PMB Assessment & Therapy Centre	$\overline{\mathbf{v}}$
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	PMB ASSESSMENT AND THERAPY CENTRE	
Date Submitted	2020-07-28	i i
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ:	
	10/20-21	[2]
Item Category: Item Description:	Goods SIDE POSITIONER, PRONE WEDGES, SIZE: MEDIUM (BLUE)	\Box
Quantity (if supplies)	1 UNIT	
COMPULSORY BRIEFING SESSIO	N / SITE VISIT	r
Select Type:	Select	\succeq
Date :		10
Time:		
Venue:		
QUOTES CAN BE COLLECTED FROM:	PMB ASSESSMENT AND THERAPY CENTRE	1
QUOTES SHOULD BE DELIVERED TO:	PMB ASSESSMENT AND THERAPY CENTRE	
ENQUIRIES REGARDING THE AD	VERT MAY BE DIRECTED TO:	
Name:	FANA C MIYA	
Email: ,	fana.miya@kznhealth.gov.za	
Contact Number:	033 397 0382	
Finance Manager Name:	LYNETTE NAIDOO	
Finance Manager Signature:	&_	

No late quotes will be considered