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health Opportunit House House Province Of House Page 1	uotation Advert	
Opening Date:	2020-07-29	
Closing Date:	2020-08-04	
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	PMB Assessment & Therapy Centre	\checkmark
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	Į.
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ:	
	11/20-21	
Item Category:	Goods	$\overline{\mathbf{v}}$
Quantity (if supplies)	1 UNIT	
COMPULSORY BRIEFING SESSION	SITE VISIT	
Select Type:	Select	$\overline{\mathbf{v}}$
Date :		II o
Time:	,	ı
Venue:	1	
QUOTES CAN BE COLLECTED FROM:	PMB ASSESSMENT AND THERAPY CENTRE	
QUOTES SHOULD BE DELIVERED TO:	PMB ASSESSMENT AND THERAPY CENTRE	
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:	
Name:	FANA C MIYA	
Email:	fana.miya@kznhealth.gov.za	
Contact Number:	033 397 0382	
Finance Manager Name:	LYNETTE NAIDOO	m
Finance Manager Signature:		

No late quotes will be considered