




Quotation Advert

Opening Date: 2020-03-10 

Closing Date: 2020-03-20 

Closing Time: 11:00

INSTITUTION DETAILS


Institution Name: Hlengisizwe CHC 

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: HLENGISIZWE CHC

Date Submitted: 2020-03-10 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
607/19/20

Item Category: Goods 

Item Description: ANTI RAPID TEST KIT (SYPHILIS BOX OF 40)

Quantity (if supplies): 300 BOXES

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date : 

Time: 

Venue: 

QUOTES CAN BE COLLECTED FROM: HLENGISIZWE CHC SCM

QUOTES SHOULD BE DELIVERED TO: HLENGISIZWE CHC TENDER BOX

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: MG MAKHAYE

Email: Hlengisizwe.SCM@kznhealth.gov.za

Contact Number:





Finance Manager Name:

013 774 1038/9

Mr MP Khumalo

Finance Manager Signature:

No late quotes will be considered

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