

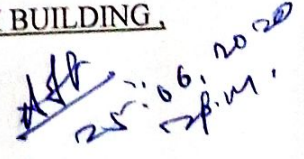
To,
-----**Subject :- Quotation Call for Tablet for Corona Virus Infection Control Programme.**

Please arrange to give your lowest possible rate for the items mentioned below.

Sr. No.	Name of Drug	Pack Size	MRP	Rate
1	Tab Faropenem Sodium 200mg	1x6 Tab		
2	Tab Torsemide 10mg	1x10 Tab		
3	Tab Ursodeoxycholic Acid 300mg	1x10 Tab		
4	Tab Folic acid, Pyridoxine, Cynocobalmine	1x10 Tab		
5	Tab Cilostozol 50mg	1x15 Tab		
6	Tab Cilostozol 100mg	1x15 Tab		
7	Tab Pentoxifyline 400mg	1x10 Tab		
8	Tab Vitmin E 400mg	1x10 Tab		
9	Tab Liv-52	100 Tab		
10	Tab Sodium Bicarbonate	1000 Tab		
11	Tab Lactic acid bacillus	1x10 Tab		
12	Tab Sitagliptin phosphate 100mg	1x10 Tab		
13	Tab Zinc sulphate	1x10 Tab		
14	Tab Carvedilol 3.125mg	1x10 Tab		
15	Tab Favipiravir 200mg (Fabiflue)	1x34 Tab		
16	Tab Ascorbic Acid 500mg (Vitamin C)	1x10 Tab		

Terms & Condition as follows:-

1. Rate should be inclusive of all taxes, Inclusive with GST.
2. Delivery period should be within 3 days from the date of confirm order otherwise the order should be Treated as cancelled.
3. Material in good condition as per the specification required by the respective department.
4. Inspection – By HOD CVTC / Cathlab/ Respective User Department.
5. Attach Xerox copy of PAN, GST & FDA Drug License with attested
6. All rights are preserve in favor of The Dean, C.P.R. Hospital, Kolhapur
7. Don't Quotate Rates of other items except above mention .Don't miss serial of above list.
8. Submit printed quotation on own letter head with duly signed and stamped. Hand written quotation will be rejected.
9. Packing or Before Date: - **30 / 06 / 2020** Upto 3.00 pm positively forwarding freight should be
10. Sealed Quotations should reach this office i.e. CENTRAL MEDICAL STORE, KASARI BUILDING, C.P.R.HOSPITAL, KOLHAPUR on/before Dt.:- **30 / 06 / 2020**, Upto 3.00 pm.


 25.06.2020
 7 p.m.
 Dean
 C.P.R. General Hospital,
 Kolhapur.