

**Govt. Of Maharashtra**  
**Chhatrapati Pramila Raje General Hospital, Kolhapur - 416002.**

Dean Office: (0231) 2641583

cprmedstore@gmail.com

Medical Store : (0231 ) 2641326

**By Regd. A.D / U.P.C**

No. CPRGHK/MS/No/ 11 /2023

Date: 04/05/2023

To,  
M/s -----

**Subject :- Quotation Call for Thyroid and Antithyroid Drugs.**

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

Sr.No.	Name of Drug	Mfg by	MRP	Rate
1	Tab Thyroxine, 25 mcg			
2	Tab Thyroxine, 50 mcg			
3	Tab Thyroxine, 100 mcg			
4	Tab Propylthiouracil, 50 mg			
5	Tab Propranolol (Long Acting), 20 mg			
6	Tab Propranolol (Long Acting), 40 mg			
7	Tab Carbimazole, 10 mg			
8	Tab Calcium Citrate maleate, 500 mg			
9	Cap Vitamin D3, 60K IU			
10	Lugol's Iodine Solution			
11	Saturated solutions of Potassium iodide			

**Terms & Condition as follows:-**

1. Rate should be inclusive of all taxes, inclusive GST.
2. Delivery period should be within 15 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 of respective user department.
5. Attach Xerox copy of PAN, GST & FDA Drug license with attested. For CMP (Treasury Purpose), Submit One Cancelled Cheque, Bank Details, PAN & Aadhar Card.
6. All rights are preserved in favor of The Dean, C.P.R. Hospital, Kolhapur
7. Do not quote other items except above mention. Do not miss serial of above list.
8. Submit printed quotation on own letter head with duly signed and stamped. Hand written & Mailed quotation will be rejected.
9. Organization / distributor require Authorization letter for submission of the quotation.
10. Sealed quotations should reach this office i.e. **CENTRAL MEDICAL STORE, KASARI BUILDING , C.P.R.HOSPITAL , KOLHAPUR,** before date :- 15 / 05 /2023 Upto 3.00 pm.



**Dean,  
C.P.R.General Hospital,  
Kolhapur.**