SASSOON GENERAL HOSPITAL PUNE-1

QUOTATION

Sr. No.  Quotation No.: 800  Dt.: 25/07/19

31. Inj.  Fentanyl Citrate 50 mg/ml/2ml amp
32. Inj.  Hepatitis B Immunoglobulin 0.5 ml 100 I.U
33. Inj.  Hepatitis B Immunoglobulin 0.5 ml 200 I.U
34. Inj.  INJ. ANTI RABIES PCEC RABIES 0.5ML VACCINE
35. Inj.  INJ. ANTI RABIES PCEC RABIES 1ML VACCINE
36. TAB.  Artemether 80mg+Lumifantrine 480 mg
37. TAB.  Calcium Lactate 300 mg (STRIP PACKING)
38. TAB.  Hydroxy Chloroquine 200 mg
39. TAB.  Ferrrous sulphate 200 mg
40. TAB.  Diclofenac Sodium 50 mg (STRIP PACKING)

Terms & Conditions

1. Rate Should be quoted inclusive of All Tax & rates Valid Upto six Months
2. Strength of Drug, MRP, Cost & Mfg Company, Packing must be mentioned
3. Delivery Of the Material must be at Medical Store at Office Time
4. The Envelop & Quotation should be addressed on name Of DEAN SASSOON GENERAL HOSPITAL PUNE-1 (Attention Medical Store) & Administrative Office before 5:00 P.M.
5. Delivery Period 24 Hours From the Date Of Receipt of the Order
6. The Quotation envelop should mention Qtn. Ref No. along with Generic Name & Strength of drug
7. Rates must be mentioned in figure as well as in words
8. Rates should be quoted as per official PHARMACOPEAL STANDARDS.
9. Conditional Quotations will not be accepted
10. Right to Accept, Recall, Or Reject above quotations lies solely with DEAN, SASSOON GENERAL HOSPITALS, PUNE
11. Rates For Tablets should Be quoted for Strip packing Only
   If it is Noticed that the mentioned drug is available in local Market at lower price than that of quoted rate then the claim for the purchase by this qtn. Will become invalid

LAST DATE OF SUBMISSION OF QUOTATION 31/8/19 BEFORE 5:00 P.M.

Your's Faithfully

DEAN

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