

महाराष्ट्र शासन

Government Medical College & Hospital, Baramati

Mail ID-medicalstoregmcb@gmail.com

Quotation Form

GMCB / MS / MED /QUOT /

/ 2025

Date: 15/0/2025

Sub: - Quotation for Medicines as given below.

Sir/ Madam

You are requested to furnish your quotation for the following items to the DEAN, GOVERNMENT MEDICAL

Sr.no.	Name of Drug
1	Inj Methylene Blue 1%w/v (10ml Ampoule)
2	Inj Methylergometrine 0.2mg/ml (1 ml Ampoule)
3	Inj Milrinone 1mg/ml (10ml Ampoule)
4	Inj Neostigmine 2mg/ml (1 ml Ampoule)
5	Inj Nitroglycerine 25mg/5ml (5ml Ampule)
6	Inj Octreotide 100mcg/ml (1 ml Ampoule)
7	Inj Octreotide 50mcg/ml (1 ml Ampoule)
8	Inj Oxytocin 10 IU/ml (1 ml Ampoule)
9	Inj Oxytocin 5 IU/ml (1 ml Ampoule)
10	Inj Paracetamol IV/IM 150mg/ml (2ml Ampoule)
11	Inj Pheniramine Maleate 45.5mg/2ml (2ml Ampoule)
12	Inj Potassium Chloride 15%w/v (10ml Ampoule)
13	Inj Succinylcholine 200mg/10ml (10ml Vial)
14	Inj Propofol 1% w/v (10ml Vial)
15	Inj Mephentermine Sulphate 30mg (10ml vial)

TERMS & CONDITIONS

Note:- 1) Rate should be quoted inclusive of all taxes.

- 2) Rates quoted are valid up to SIX months.
- 3) The delivery of the material must be at MEDICAL STORE within Office hour (10.00 am to 5.00 pm)
- 4) The Envelope & Quotation should be addressed by the name of DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI. It should be submitted within stipulated time at Administrative Office.
- 5) It is Mandatory to mention quotation reference no. on the envelope of the quotation
- 6) Rates must be mentioned in figure & only in digital printed form and not hand written.
- 7) Conditional Quotations will not be accepted.
- 8) Right to Accept, Recall or Reject above Quotations lies solely with DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI
- 9) If it is noticed that the mentioned drug is available in local market at the lower rate than the quoted rate, then the claim for the purchase by this quotation will become invalid.
- 10) Right to Purchase Medicines lies with Dean GMC, Baramati.
- 11) Submit following documents with quotation:
 - i)Form 20,20F,21 &intimation letter
 - ii)Non conviction certificate issued from concern FDA.

Last Date to submit Quotation: 22 / 01 / 2025 before 5.00pm

GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI