



महाराष्ट्र शासन

Government Medical College & Hospital, Baramati  
Mail ID-medicalstoregmc@gmail.com

Quotation Form

GMCB / MS / MED / QUOT / / 2024

Date: 27/06/2024

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 COLLEGE & HOSPITAL, BARAMATI

| Sr.no. | Name of Drug                           |
|--------|--|
| 1      | Tab Methotrexate 5mg                   |
| 2      | Tab Metoprolol 25 mg                   |
| 3      | Tab Metronidazole 400mg                |
| 4      | Tab Olanzapine 5mg                     |
| 5      | Tab Ondansetron 4mg                    |
| 6      | Tab Pantoprazole 40mg (Enteric Coated) |
| 7      | Tab Paracetamol 500mg                  |
| 8      | Tab Phenytoin 100mg                    |
| 9      | Tab Pirfenidone 200mg                  |
| 10     | Tab Quetiapine 50mg                    |
| 11     | Tab Sertraline 50mg                    |
| 12     | Tab Sodium Valproate 200mg             |
| 13     | Tab Telmisartan 40mg                   |
| 14     | Tab Thyroxine 50mcg                    |
| 15     | Tab Tramadol 50mg                      |
| 16     | Tab Trypsin-Chymotrypsin               |
| 17     | Tab Zinc Sulphate 20mg                 |
| 18     | Tab Thyroxine 25mcg                    |

TERMS & CONDITIONS

- Note :- 1) Rate should be quoted inclusive of all Taxes & valid up to SIX months  
2) The delivery of the material must be at MEDICAL STORE.at Office Time (10.00 am to 5.00 pm)  
3) The Envelop & Quotation should be addressed by the name of DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI  
(Attention Medical Store) & it should be submitted stipulated time at Administrative Office before 5.00 pm  
4) Delivery period 24 hours from the date of receipt of the order.  
5) It is Mandatory to mention quotation reference no. on the envelope of the quotation  
DEAN, GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI and it should be submitted within stipulated time  
at Administrative Office. Inward Clark on same day  
6) Rates must be mentioned in figure & only digital printed form( 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 lower rate than that quoted then the claim for the  
Purchase by this quotation will become invalid.  
10) Right to Purchase Medicines lies with Dean GMC, Baramati.

Last Date of Submission for Quotation: 04/07 /2024 before 5.00pm

  
Dean

GOVERNMENT MEDICAL COLLEGE & HOSPITAL, BARAMATI