



Memo No.: COMJNMH/Pr/Pur/2019-20/114

Date: 23.07.2019

QUOTATION NOTICE

Quotation in sealed cover is asked for Rate in Rupees from Manufacturers/ Authorized Distributors / Suppliers of *items mentioned below* for College of Medicine & JNM Hospital, WBUHS, Kalyani, Nadia.

Rate should be quoted F.O.R. Door Delivery College of Medicine & JNM Hospital, WBUHS, Kalyani, Nadia exclusive of all Taxes and other charges. Rates should be submitted in a sealed envelope, mentioning the Quotation Reference No. along with all documents and credentials such as **I.T. RETURN, GST, TRADE LICENCE, CREDENTIALS ETC.** Acceptance of the lowest rate is not mandatory.

The last date of submission of Quotation is 30/07/2019 upto 4 pm.

Sl. No.	Name of the Item	Qty.
01.	Test Tube, (10 X 75) mm, 3 ml Capacity	500 Pcs.



K. Mukherjee
Principal 23/7/19
College of Medicine & J.N.M Hospital
WBUHS, Kalyani, Nadia

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Copy to:

1. Hon'ble Zilla Sabhadhipati, Nadia Zilla Parishad, Krishnagar.
2. District Magistrate, Krishnagar, Nadia.
3. S.D.O. Kalyani, Nadia.
4. Medical Superintendent, COMJNMH, Kalyani, Nadia.
5. The Prof. & HOD, Department of **Pathology**, COMJNMH, Kalyani, Nadia.
6. Accounts Officer, COMJNMH, Kalyani, Nadia (College wing).
7. Accounts Officer, COMJNMH, Kalyani, Nadia (Hospital wing).
8. Accounts Officer, Gandhi Memorial Hospital, Kalyani, Nadia.
9. Treasury Officer, Kalyani, Nadia.
10. Station Master, Kalyani, Nadia.
11. Post Master, Kalyani, Nadia.
12. Web Administrator for uploading in the College Website.
13. Notice Board of this College & Hospital.
14. Office Copy.



K. Mukherjee
Principal 23/7/19
College of Medicine & J.N.M Hospital
WBUHS, Kalyani, Nadia