



NO. MSO/Pur/2023/

17474

Date:-

18/8/23

IT Cell

BFUHS, Faidkot (For uploading on university website)

Sub:- Quotations for Printing of Blood Grouping Report Forms.

Sealed quotations are invited for purchase of following items on the terms & conditions mentioned below:-

Sr. No.	Name of the item	Qty	Specifications
1	Blood Grouping Report Forms	250 Booklets (100 forms per booklets)	- On ½ page of A4 Size paper approx or on paper sheet of 1/8 size of the inches x 22 inches (Single color & Single side printing) GSM- 75 GSM - With Logo of BFUHS must be printed in Light Color on the middle of the Performa. - Glue Binding/Pasting of 100 sheets per pad.

COPY OF SAMPLE (ORIGINAL) ENCLOSED

Terms & Conditions:

Payment : The payment of the material shall be released through RTGS/Cheque after satisfactory inspection report of the material by the Institution Inspection Committee.

F.O.R : General Store, GGSMH, Faridkot.

Rate : 1. Taxes (as applicable), if any, be mentioned separately in the quotation.
2. The rates of taxes, be charged as per prevailing Govt. Notified Schedule.

Quantity/Item : Quantity may increase or decrease.

Others : 1. The firm should have PAN No, GST No and Bank Account No.
2. The material should be as per mentioned specifications only.
3. The final decision of branded item would be reserved to consumer/concerned deptt.

Expiry : The material shall have maximum shelf life, where ever applicable.

Warranty/guaranty: Warranty/Guaranty of the item should be specified separately by the company if any.

Bank Details : Bank details/RTGS details shall clearly be mentioned.

Note: Quotations received after due date will not be entertained and no communication in this regard will be done.

Quotation should be submitted on the Letter Head of the company duly dated/signed and stamped.

You are therefore requested to quote your lowest rates of above items and submit Quotations addressed to "The Medical Superintendent, Guru Gobind Singh Medical Hospital, Faridkot (Punjab)". The words "Quotations for Printing of Investigation Register" may please be inscribed on top of the envelope.

The Medical Superintendent reserves the right to reject the quotations without assigning any reason.

The sealed quotations should reach this office on or before 29/08/2023 by 5.00 PM through Registered/Speed Post/Traceable Courier only.

1. Notice Board.


Medical Superintendent

GURU GOBIND SINGH MEDICAL COLLEGE & HOSPITAL, FARIDKOT (BFUHS)

Department of IHBT (~~Blood Bank~~) Blood Grouping Report

Blood centre

S.No.....

Name.....Age/Sex.....S/D/W/o.....

IP No./OPD No.....Hosp.....Ward.....

Dated.....

Cell Grouping			Serum Grouping		
Anti-A	Anti-B	Anti-D	A-Cell	B-Cell	O-Cell

Blood Group : ABO Type.....Rh Type.....

Signature of Technologist.....

Name of Technologist.....