

Date : 28/11/23

**To,
Medical Officer,
Health Centre,
Dr. Babasaheb Ambedkar Marathwada University,
Aurangabad.**

Subject :- Submission of quotations for supply of medicines for the Health Centre, Dr.B.A.M. University, A'bad, PIN - 431004 (to reach before 02/12/23).

List of medicines required for the Health Centre :-

Sr.No.	Name of Medicine	Quantity required (tablets / capsules etc.)	Estimated Cost/ Rate (Rs. - per strip of 10 tab. etc.)	G.S.T. % applicable
01.	T. Aspisol 150 mg	30 x 10		
02.	T. Amlokind AT	15 x 40		
03.	T. Aztor ASP	10 x 24		
04.	T. Bisohheart 5 mg	10 x 24		
05.	T. Bigomet 500 mg	10 x 48		
06.	T. Bigomet SR	10 x 80		
07.	T. Clopitab 75 mg	15 x 08		
08.	T. Cardivas 12.5 mg	10 x 24		
09.	T. CTD 6.25 mg	15 x 08		
10.	T. CTD – O	10 x 15		
11.	T. Cilamet XL 25 mg	20 x 15		
12.	T. Cilacar 10 mg	15 x 16		
13.	T. Cilacar T	10 x 15		
14.	T. Cilacar TM 25	10 x 15		
15.	T. Dytor 10	15 x 16		
16.	T. Delpizin 10 mg	10 x 15		
17.	T. Flexon	15 x 300		
18.	T. Gemer 1 mg	15 x 15		
19.	T. Gemer 2 mg	15 x 40		
20.	T. Glador 2 mg	15 x 15		
21.	T. Glucored Forte	10 x 15		

Sr.No.	Name of Medicine	Quantity required (tablets / capsules etc.)	Estimated Cost/ Rate (Rs. - per strip of 10 tab. etc.)	G.S.T. % applicable
22.	T. Glimisave M 1	15 x 24		
23.	T. Gluconorm G 1 Forte	15 x 08		
24.	T. Gluconorm PG 2	15 x 15		
25.	T. Ignalis M 50/500	10 x 15		
26.	T. Met XL AM 25/5	20 x 08		
27.	T. Met XL Trio	10 x 15		
28.	T. Met XL 3D 25/12.5	10 x 15		
29.	T. Met XL 3D 50/12.5	15 x 10		
30.	T. Metfirst T 50	10 x 12		
31.	T. Olmin 20 mg	10 x 15		
32.	T. Olmin 40 mg	10 x 15		
33.	T. Olmin Trio	10 x 24		
34.	T. Omen CDP 20	10 x 15		
35.	T. Primodil 5 mg	10 x 48		
36.	T. Piomed 15 mg	10 x 48		
37.	T. Rosvin 10 mg	10 x 48		
38.	T. Revolol XL 25 mg	10 x 15		
39.	T. Revolol AM 25/2.5	15 x 10		
40.	C. Rosavel A	10 x 45		
41.	T. Telvas 20 mg	15 x 48		
42.	T. Telvas 40 mg	15 x 170		
43.	T. Telvas H 40/12.5	10 x 122		
44.	T. Telvas 3D	10 x 72		
45.	T. Telvas AM	10 x 15		
46.	T. Telpres CT 40/6.25	15 x 16		
47.	T. Telpres CT 40/12.5	15 x 16		
48.	T. Tonact ASP 75	15 x 08		
49.	T. Tendia 20 mg	15 x 08		
50.	T. Tendia M	15 x 28		
51.	T. Volibo R	10 x 15		
52.	T. Vogli GM 1	10 x 36		
53.	T. Vogli GM 2	10 x 100		
54.	T. Verifica M 50/500	15 x 16		
55.	T. X tor 20 mg	10 x 32		
56.	T. Zomelis 50 mg	15 x 32		

Note : Following documents are required to be submitted with the quotations in two sealed envelopes (to be sent by speedpost) as follows :-

- A) First Envelope :- containing following documents :
- 1) Copy of the Shop Act/ Udyam (M.S.M.E.) Certificate

- 2) Copy of the Drug Licence
- 3) Copy of the Pan Card
- 4) Copy of G.S.T. Registration Certificate

B) Second Envelope :- containing estimated rates of the medicines and the G.S.T. applicable

Signature :-

Name of Agency :-

Address :-