

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI

NO. DISDK/- 2602/03

/-Karachi, Dated the 24th October-2012

~~31st~~ 13 NOV. 2012

[Handwritten signature]

To,

✓
The Manager, (Assessment)
Sindh Public Procurement Regularity Authority,
Govt. Of Sindh,
Karachi.

SUB:- NIT REF NO: INF-KRY NO. 2796/ 12.
DATED THE 27TH JUNE-2012.

With reference to your letter No. DIR(A&F) H0255/SPPRA/15-3/11-12/1227, Dated the 19th October-2012 received on 24th October-2012 on the subject cited above:

This Institute Of Skin Diseases Sindh Karachi has already been sent the required documents / papers Vide this Institute Letter No. DISDK/- 2274/75, dated the 20th September-2012 (Photo copies of the same enclosed herewith for ready reference)

[Handwritten signature]
(DR.MRS. MUMTAZ MEMON)
DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

DIRECTOR
Institute of Skin Diseases Sindh Karachi

Copy to:-

01. The Additional Secretary, (P&MI) Cell Health Department, Govt. Of Sindh, Karachi.

Arif/-

mn
3645
13/11


MINUTES OF THE MEETING OF PURCHASE COMMITTEE TO FINALIZE THE
PURCHASE OF REQUIRED ITEMS OF MEDICINE /VASELINE /PETROLIUM
JELLY AND CHEMICAL FOR THE YEAR-2012-13.


A meeting of the Procurement Committee of this Institute Of Skin Diseases Sindh, Karachi was held on 12th September-2012 on the office of the Director, Institute Of Skin Diseases Sindh Karachi to evaluate the rates quoted by the Bidders for items mentioned in subjected noted above.


The Director, Dr. Mrs. Mumtaz Memon, presided the meeting that also attended by the Members of Procurement Committee.


That Fourteen (14) Bidders participated the meeting for the Tender of Medicines / Vaseline / Petroleum Jelly and Chemicals M/s. Pharmic Enterprises participated in Medicine Items dis- qualified due to not submission of Technical Bids.

After examining the samples provided by the Bidders, the items list of the Annexure has approved and finalize the purchase committee on the basis of quality and on lowest also.


01. Dr. Manzoor Hussain Memon,
Chief Medical Officer, (B-19)
Member


2. Dr. Qamar Iqbal Chandio
Senior Medical Officer (B-18)
Member


03. Dr. Kalim Ahmed Shaikh,
Senior Medical Officer (B-18)
Member.


4. Mr. M. Anwar Khokhar,
Section Officer, (PM&I)

Section Officer
(Medical Stores)
Health Department
Government of Sindh
Karachi

(DR. MRS. MUMTAZ MEMON)
DIRECTOR / CHAIRMAN,
INSTITUTE OF SKIN DISEASES SINDH KARACHI.

DIRECTOR
Institute of Skin Diseases Sindh
KARACHI.

To,

The Director, (A&F)
Sindh Public Procurement Reg. Authority,
Govt. Of Sindh,
Karachi

20/9/12 PM
Sindh Public Procurement
Authority
Karachi

Sub:- BID EVALUATION REPORT

I have the honour to forward herewith the Bids Evaluation Report
Of this Institute Of Skin Diseases Sindh Karachi for further necessary action

Kaw
(DR. MRS. MUMTAZ MEMON)
DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
KARACHI

Copy to :-

01. The Additional Secretary, (P&MI Cell) Govt. Of Sindh, Karachi

Arif/-



OFFICE OF THE DIRECTOR
TECHNICAL BIDS OPENING FC

Sr No	Company Name	Original Bid Purchase Re
1	M/s City Traders	Yes
2	M/s G.S.K. Javed Traders	Yes
3	M/s Baba Traders	Yes
4	M/s Maxim International	Yes
5	M/s Popular International	Yes
6	M/s Y.N.Z. Traders	Yes
7	M/s Nexus Enterprises	Yes
8	M/s Medi Tech Pharma	Yes
9	M/S Pacific Traders	Yes
10	M/s Royal International	Yes
11	M/s R.Z. Services	Yes
12	M/s Care & Cure	Yes
13	M/s Shamim & Co.	Yes
14	M/s Medic International	Yes
15	M/s Pharmic Enterprises	No


Dr. Manzoor H. Memon
Chief Medical Officer (BFS-19)
Institute of Skin Diseases Sindh
Karachi
(Member)


Mr. Muhammad Farooq Khokhar
Special Director (P & M)
Government of Sindh
Health Department
Section Officer
(Medical Stores)
Health Department
Government of Sindh.


Bid Evaluation Report

1. Name of procuring Agency: Director Institute of Skin Diseases Sindh, Karachi
2. Tender Reference No: INF - KAY - 2796 (12)
3. Tender Description / Name of work/item: Medicines / Drugs
4. Method of Procurement: Single Stage 2 Envelop Procedure
5. Tender Published: 00119781 (2012-2013 Daily Jang, Aman & Moomal dated 28.06.2012.
Print & Electronic Media (SPPRA ID No & News Papers name with dates).
6. Total Bid documents sold: 22
7. Total Bids Received: 15
8. Technical Bid Opening date: if application) 05.09.2012 (Provide details in separate from)
9. No of Bid technically qualified (if applicable): 14
10. Bid(s) Rejected: 1
11. Financial Bid Opening date: 12.09.2012 Bid Evaluation Report:

S. No	Name of Firm or Bidder	Cost offered by the bidder	Ranking in terms of cost	Comparison with Estimated Cost	Reasons for acceptance / rejection	Remarks
1	2	3	4	5	6	7
COMPARATIVE STATEMENT ATTACHED						



DR. MANZOOR H. MEMON
CHIEF MEDICAL OFFICER (B-19)
MEMBER


DR. KALIM AHMAD SHAIKH
SENIOR MEDICAL OFFICER (B-18)
MEMBER


DR. QAMAR IQBAL CHANDIO
SENIOR MEDICAL OFFICER (B-18)
MEMBER


MR. MUHAMMAD ANWAR KHOKHAR
SECTION OFFICER (PM&I)
HEALTH DEPARTMENT, KARACHI
MEMBER

**Section Officer
(Medical Scores)
Health Department
Government of Sindh.**


DR. MRS MUMTAZ MEMON
CHAIRMAN / DIRECTOR
INSTITUTE OF SKIN DISEASES
SINDH KARACHI

SINDH PUBLIC PROCUREMENT REGULATORY AUTHORITY

CONTRACT EVALUATION FORM

TO BE FILLED IN BY ALL PROCURING AGENCIES FOR PUBLIC CONTRACTS OF WORKS, SERVICES & GOODS

- 1) NAME OF THE ORGANIZATION / DEPTT. Institute of Skin Diseases Sindh wye.
- 2) PROVINCIAL / LOCAL GOVT / OTHER Govt of Sindh
- 3) TITLE OF CONTRACT Purchase of Medicines
- 4) TENDER NUMBER INF-KRY-2796/(12)
- 5) BRIEF DESCRIPTION OF CONTRACT Photocopy enclosed
- 6) FORUM THAT APPROVED THE SCHEME - NIL -
- 7) TENDER ESTIMATED VALUE 1000/-
- 8) ENGINEER'S ESTIMATE (For civil works only) - NIL -
- 9) ESTIMATED COMPLETION PERIOD (AS PER CONTRACT) _____
- 10) TENDER OPENED ON (DATE & TIME) 05-09-2012
- 11) NUMBER OF TENDER DOCUMENTS SOLD (Attach list of buyers) 22
- 12) NUMBER OF BIDS RECEIVED 15
- 13) NUMBER OF BIDDERS PRESENT AT THE TIME OF OPENING OF BIDS 14
- 14) BID EVALUATION REPORT (Enclose a copy) Enclosed
- 15) NAME AND ADDRESS OF THE SUCCESSFUL BIDDER List enclosed
- 16) CONTRACT AWARD PRICE 26400000/- 6551700/- 1st Quarter
- 17) RANKING OF SUCCESSFUL BIDDER IN EVALUATION REPORT (i.e. 1st, 2nd, 3rd EVALUATION BID) List enclosed

18) METHOD OF PROCUREMENT USED: - (Tick one)

- a) SINGLE STAGE - ONE ENVELOPE PROCEDURE

Domestic/Local

- b) SINGLE STAGE - TWO ENVELOPE PROCEDURE

--
- c) TWO STAGE BIDDING PROCEDURE

--
- d) TWO STAGE - TWO ENVELOPE BIDDING PROCEDURE

--

PLEASE SPECIFY IF ANY OTHER METHOD OF PROCUREMENT WAS ADOPTED (i.e. EMERGENCY, DIRECT CONTRACTING ETC) WITH BRIEF REASONS

19) APPROVING AUTHORITY FOR AWARD OF CONTRACT Director Institute of Skin Diseases
Smith Wye

20) WHETHER THE PROCUREMENT WAS INCLUDED IN ANNUAL PROCUREMENT PLAN?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

21) ADVERTISEMENT:

i) SPPRA Website
(If yes, give date and SPPRA Identification No.)

Yes	<input checked="" type="checkbox"/>	00119781 - 0378/2012 - 2013
No	<input type="checkbox"/>	

ii) News Papers
(If yes, give names of newspapers and dates)

Yes	<input checked="" type="checkbox"/>	① Daily Jang 28-6-2012 ② " " Amun 7-7-2012 ③ " " Mowal 28-7-2012
No	<input type="checkbox"/>	

22) NATURE OF CONTRACT

Domestic	<input checked="" type="checkbox"/>	Int.	<input type="checkbox"/>
----------	-------------------------------------	------	--------------------------

23) WHETHER QUALIFICATION CRITERIA
WAS INCLUDED IN BIDDING / TENDER DOCUMENTS?
(If yes, enclose a copy)

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

24) WHETHER BID EVALUATION CRITERIA
WAS INCLUDED IN BIDDING / TENDER DOCUMENTS?
(If yes, enclose a copy)

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

25) WHETHER APPROVAL OF COMPETENT AUTHORITY WAS OBTAINED FOR USING A
METHOD OTHER THAN OPEN COMPETITIVE BIDDING?

Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

26) WAS BID SECURITY OBTAINED FROM ALL THE BIDDERS?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

27) WHETHER THE SUCCESSFUL BID WAS LOWEST EVALUATED
BID / BEST EVALUATED BID (in case of Consultancies)

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

28) WHETHER THE SUCCESSFUL BIDDER WAS TECHNICALLY
COMPLIANT?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

29) WHETHER NAMES OF THE BIDDERS AND THEIR QUOTED PRICES WERE READ OUT AT
THE TIME OF OPENING OF BIDS?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

30) WHETHER EVALUATION REPORT GIVEN TO BIDDERS BEFORE THE AWARD OF
CONTRACT?
(Attach copy of the bid evaluation report)

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

31) ANY COMPLAINTS RECEIVED
(If yes, detail thereof)

Yes	
No	<input checked="" type="checkbox"/>

32) ANY DEVIATION FROM SPECIFICATIONS GIVEN IN THE TENDER NOTICE / DOCUMENTS
(If yes, give details)

Yes	
No	<input checked="" type="checkbox"/>

33) WAS THE EXTENSION MADE IN RESPONSE TIME?
(If yes, give reasons)

Yes	<input checked="" type="checkbox"/> Due to death of Director
No	

34) DEVIATION FROM QUALIFICATION CRITERIA
(If yes, give details and reasons)

Yes	
No	<input checked="" type="checkbox"/>

35) WAS IT ASSURED BY THE PROCURING AGENCY THAT THE SELECTED FIRM IS NOT BLACK LISTED?

Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
-----	--------------------------	----	-------------------------------------

36) WAS A VISIT MADE BY ANY OFFICER/OFFICIAL OF THE PROCURING AGENCY TO THE SUPPLIER'S PREMISES IN CONNECTION WITH THE PROCUREMENT? IF SO, DETAILS TO BE ASCERTAINED REGARDING FINANCING OF VISIT, IF A ROAD:
(If yes, enclose a copy)

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------


37) WERE PROPER SAFEGUARDS PROVIDED ON MOBILIZATION ADVANCE PAYMENT IN THE CONTRACT (BANK GUARANTEE ETC.)?

Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
-----	-------------------------------------	----	--------------------------

38) SPECIAL CONDITIONS, IF ANY
(If yes, give Brief Description)

Yes	
No	<input checked="" type="checkbox"/>

Signature & Official Stamp of
Authorized Officer


DIRECTOR

FOR OFFICE USE ONLY Institute of S. Diseases Slad
KARACHI

SPPRA, Block. No.8, Sindh Secretariat No.4-A, Court Road, Karachi
Tele: 021-9205356; 021-9205369 & Fax: 021-9206291

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI
 NO. DISDSK/ 2329 - Karachi, dated the 28-09-2012

To:

The M/s Meditech Pharma

Karachi

Sub:

SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS	QUANTITY
01	CAP:- Ampicilline + cloxacilline 250mg	20000 Cap
02	CAP:- Ampicilline + cloxacilline 500mg	20000 "
03	CAP:- Dicycline 100mg	20000 "
04	CAP:- Amoxycilline 250mg	20000 "
05	CAP:- Amoxycilline 500mg	20000 "
06	CAP:- Oxytetracycline 250mg	20000 "
07	CAP:- Ampicilline 250mg	20000 "
08	CAP:- Ampicilline 500mg	20000 "
09	CAP:- Fluconazole 150mg	10000 "
10	Clabetasole propionate 0.05% 10gm	10000 Tube
11	Clotrimazole 1% cream 15 gm	5000 "

[Signature]
 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi
02. The Accounts Branch Concern
03. The Store Keeper

DIRECTOR
 Institute of Skin Disease Sindh
KARACHI

Arif/-

To: The M/s Meditech Pharmacy

Karachi

Sub:- SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ therefore it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise the Tender will be cancelled.

S.#	NAME OF THE ITEMS	QUANTITY
01	Permethrin 5% cream	2000 Tube
02	Fucidic Acid 2% cream 15 gm	2000 s
03	Fucidic Acid 2% cream 5 gm	5000 s
04	Benzyl Benzoate emulsion 450ml bottle	5000 Bottle
05		
06		
07		
08		
09		
10		
11		

K. Q.
 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 KARACHI

Copy to:-

01. The Accountant General Sindh Karachi.
02. The Accounts Branch Concern.
03. The Store Keeper.

JINBOTOH
 Institute of Skin Diseases Sindh
 KARACHI.

Arif/-

To: The M/s Meditech Pharma

Karachi


Sub: SUPPLY ORDER

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, this requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise the Tender will be cancelled.

S#	NAME OF THE ITEMS.	QUANTITY
01	Syp :- Erythromycin 125/200mg	15000 Bottle
02	Syp :- Cephalexin 250mg	30000 S
03	Syp :- Chlorpheniramine 4mg	10000 S
04	Syp :- Amoxicillin 125mg	10000 S
05	Syp :- Amoxicillin 250mg	10000 S
06	Syp :- Ampicillin 125mg	5000 S
07	TAB :- Chlorpheniramine 4mg	20 Lacs Tab
08	TAB :- Ciprofloxacin 250mg	20000 S
09	TAB :- Ciprofloxacin 500mg	20000 S
10	TAB :- Erythromycin 250mg	20000 S
11	TAB :- Erythromycin 500mg	50000 S


 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 K A R A C H I

DEPUTY DIRECTOR
 Institute of Skin Diseases Sindh
 KARACHI

Copy to:-

01. The Accountant General Sindh Karachi.
02. The Accounts Branch Concern
03. The Store Keeper

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI.

NO. DISDSK/-

2332

-/-Karachi, dated the

28-09-2012

To,

The M/s. Pacific Traders

Karachi

Sub:-

SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute. further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S #	NAME OF THE ITEMS.	QUANTITY
01	Vaseline (white Petroleum jelly)	5250 kg
02	((
03	((
04	((
05	((
06	((
07	((
08	((
09	((
10	((
11	((


DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi
02. The Accounts Branch Concern
03. The Store Keeper.

DIRECTOR
Institute of Skin Diseases Sindh
KARACHI

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI
NO. DISDSK- 2333 -/Karachi, dated the 28-09-12

To: The M/s Medic International

KARACHI

Sub: SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS	QUANTITY
01	Isocemazole Nitrate Diplocortolone	2000 Tube
02	Valrate Lmg 10gm cream	
03		
04		
05		
06		
07		
08		
09		
10		
11		

KARACHI
DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi.
02. The Accounts Branch Concern
03. The Store Keeper.

DIRECTOR
Institute of Skin Diseases Sindh
KARACHI

Arifi-

To:

The M/s Royal International

Karachi

Sub:-

SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S#	NAME OF THE ITEMS.	QUANTITY
01	Cell Pack	Two
02	Stromatolyzer	Two
03.	((
04.		
05.		
06.		
07.		
08.		
09.		
10.		
11.		

Has
DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

Copy to -

01. The Accountant General Sindh Karachi
02. The Accounts Branch Concern
03. The Store Keeper

Arif/-

DIRECTOR
Institute of Skin Diseases Sindh
KARACHI

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI
 NO. DISDSK/ 2335 Karachi, dated the 28-09-12

To: The M/s Popular International
Karachi


Subj: SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE:-

Tender items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS	QUANTITY
01.	IgE Total (elisa) kit	Two kit
02.	SEPTI kit	Three kit
03.	Alkaline phosphate kit	Three kit
04.	Urea kit	Two kit
05.	VDRL kit	ONE kit
06.	TPHA	ONE
07.	((
08.	((
09.		
10.		
11.		


 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 KARACHI

Copy to:-

01. The Accountant General Sindh Karachi
02. The Accounts Branch Concern
03. The Store Keeper

DIRECTOR
 Institute of Skin Diseases Sindh
 KARACHI

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI.
NO. DJS/DSK/- 2336 -/-Karachi, dated the 28-09-12

To,

The M/s Care & Cure

Karachi.

Sub-

SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS.	QUANTITY
01	Syl :- Cefixime 100mg	3070 Bottle
02		
03		
04		
05		
06		
07		
08		
09		
10		
11		


DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi
02. The Accounts Branch Concern
03. The Store Keeper.

DIRECTOR
Institute of Skin Diseases Sindh
KARACHI

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI.
 NO. DISDSK/ 2337 Karachi, dated the 28.09.12

To, The M/s Nexus Enterprises
Karachi

Subj: SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE:-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS	QUANTITY
01.	Fluocinolone Acetonide 15gm	3000 Tube
02.	Clotrimazole + Betamethasone 15gm	3000 s
03.	Permethrin Lotion	3000 Bottle
04.		
05.		
06.		
07.		
08.		
09.		
10.		
11.		

K. Arif
 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 K A R A C H I

Copy to:-

- 01. The Accountant General Sindh Karachi
- 02. The Accounts Branch Concern
- 03. The Store Keeper

DIRECTOR
 Institute of Skin Diseases Sindh
KARACHI

Arif/-

To,

The M/s Baba Traders

Karachi

Sub:-

SUPPLY ORDER

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS.	QUANTITY.
01	Insuline syring	30720 Nos
02	Disposable syring 10cc	500 Nos
03.		
04.		
05.		
06.		
07.		
08.		
09.		
10.		
11.		

K. Anwar
DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi
02. The Accounts Branch Concern
03. The Store Keeper.

DIRECTOR
Institute of Skin Diseases Sindh
KARACHI

Arif/-

To: The M/s Shamim & Co
Karachi

Subj: SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

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S. #	NAME OF THE ITEMS.	QUANTITY.
01.	Disposable Syringe 3 c.c.	1000 Nos
02.	Disposable Syringe 5 c.c.	3000 Nos
03.	Cotton wool	2.5 kg
04.	((
05.	((
06.	((
07.	((
08.	((
09.	((
10.	((
11.	((

K. H.
 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 K A R A C H I

DIRECTOR
 Institute of Skin Diseases Sindh
KARACHI

Copy to:-

- 01. The Accountant General Sindh Karachi.
- 02. The Accounts Branch Concern
- 03. The Store Keeper.

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI
 NO. DISDSK/ 2340 Karachi, dated the 28-09-12

To,

The M/s City Traders

Karachi

Sub:-

SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE:-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S#	NAME OF THE ITEMS	QUANTITY
01	Sulphur Powder	1000 kg
02	Calamine powder	1000 kg
03.	((
04.		
05.		
06.		
07.		
08.		
09.		
10.		
11.		

Ma
 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 K A R A C H I

Copy to:-

- 01. The Accountant General Sindh Karachi.
- 02. The Accounts Branch Concern
- 03. The Store Keeper

DIRECTOR
 Institute of Skin Diseases Sindh
KARACHI

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI
 NO. DISDSK/ 2341 Karachi, dated the 28-09-12

To:

The M/s Y N Z Traders

Karachi

Sub:-

SUPPLY ORDER

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore it is requested to please supply the following items immediately in order to meet the requirement of this Institute. further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter. otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS	QUANTITY
01.	Scalple	40 Nos
02.	Distilled Water (For Lab)	5 Canes
03.	Yellow Caps	Two Pkt
04.	Test Tube 12x75	200 Nos
05.	Sprite	10 litre
06.	((
07.		
08.		
09.		
10.		
11.		


 DIRECTOR
 INSTITUTE OF SKIN DISEASES SINDH
 K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi.
02. The Accounts Branch Concern
03. The Store Keeper.

DIRECTOR
 Institute of Skin Diseases Sindh
 KARACHI

Arif/-

To,

The M/s R. Z Services

Karachi.

Sub-


SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS	QUANTITY
01	Wig :- Paraffine 4.5 litre can	20 cans
02	Wig :- Glycerine 4.5 litre can	10 cans
03	Bandage 15 cm	100 doz
04	Adhesive plaster	50 spool/mos
05	((
06		
07		
08		
09		
10		
11		


DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi
02. The Accounts Branch Concern
03. The Store Keeper

ASSTANT
INSTITUTE OF SKIN DISEASES SINDH
KARACHI

Arif/-

To: The M/s Meditech Pharmacy

Karachi

Sub: SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____ Therefore, you are requested to please supply the following items immediately in order to meet the requirement of this Institute. Further supply order will be placed as and when required.

NOTE:-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S.#	NAME OF THE ITEMS.	QUANTITY
01.	Syp: Cephalexin 125mg	3000 Bottle
02.	Syp: Cephalexin 125mg	5000 "
03.	/	/
04.	/	/
05.		
06.		
07.		
08.		
09.		
10.		
11.		


 DIRECTOR,
 INSTITUTE OF SKIN DISEASES SINDH
 K A R A C H I

Copy to:-

- 01. The Accountant General Sindh Karachi.
- 02. The Accounts Branch Concern
- 03. The Store Keeper.

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH KARACHI.

NO. DISDSK/ 2502 - Karachi, dated the 16-10-12

To: The M/s R Z Services

Karachi

Subj: SUPPLY ORDER.

Your Rates are hereby approved by the Purchasing Committee of this Institute Of Skin Diseases Sindh Karachi on _____. Therefore, it is requested to please supply the following items immediately in order to meet the requirement of this Institute, further supply order will be placed as and when required.

NOTE :-

Tender Items must be supplied within 10 days from the date of issue of this Office's Letter, otherwise, the Tender will be cancelled.

S #	NAME OF THE ITEMS.	QUANTITY.
01.	Potassium Per manganate	100g
02.		
03.		
04.		
05.		
06.		
07.		
08.		
09.		
10.		
11.		

[Signature]
DIRECTOR,
INSTITUTE OF SKIN DISEASES SINDH
K A R A C H I

Copy to:-

01. The Accountant General Sindh Karachi.
02. The Accounts Branch Concern
03. The Store Keeper.

Arif/-

OFFICE OF THE DIRECTOR, INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.

RECEIPT.

Received an amount of Rs. _____ (Rupees

_____ only), on account of Purchase of Tender Inquiry

due _____ From M/S. _____



DIRECTOR
INSTITUTE OF SKIN DISEASES,
SINDH,

o/c KARACHI

OFFICE OF THE DIRECTOR, INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.

RECEIPT.

Received an amount of Rs. _____ only),

on account of Purchase of Tender Inquiry due _____ From

M/S. _____



DIRECTOR
INSTITUTE OF SKIN DISEASE, SINDH,
KARACHI

o/c *10/11/71*

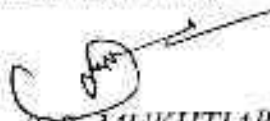
TENDER ENQUIRY MEDICINES, CHEMICAL & WHITE PETROLIUM JELLY ETC.

TENDER PRICE RS. 1000/= NON-REFUNDABLE /TRANSFERABLE.

TENDER FOR INVITATION ON 2012-2013.

Time & Date Issuance of Tender proforma 27th June- 2012 to 5th September 2012
 During Office Hours
 Time & date of receipt of Tender up to:- 5th September 2012 at 11.30 a.m.
 Time & date of opening Tender. 5th September-2012- at 12.30
 Noon

01. Offer shall remain opened for Thirty days from the date of opening the rates will be applicable for the Financial Year-2012-2013
02. The Tender shall quote free delivery to consignee's end at this hospital.
03. Price should be quoted in figures & words clearly. Over-writing would made offer liable to be ignored.
04. (a) Under "Act" means Sindh Public Procurement Act 2009.
 (b) Under "Authority" means the Sindh Public procurement Regulatory Authority established under section 3 of Sindh Public Procurement Act 2009.
05. Delivery period of the consignment will be within fifteen days after supply order which may be given full portion during the Fiscal Year-2012-2013.
06. The Price will be inclusive all Taxes and levies including general Sales Tax liable to be Deducted at sources.
07. The Authority may cancel / delete the item as whole if decrease OR increase the quantity as per need.
08. The Bid be accompanied with 2.5% Rs. _____ (Rupees: _____ only)
 Security Deposit in shape of Pay Order / Bank Draft fixed deposited to be refundable in the name of Director Institute Of Skin Diseases Sindh Karachi.
09. The supplies will have to be delivered at the premises of Institute Of Skin Diseases Sindh Karachi at the supplier's Risk and cost, any breakage of shortage of stock will be recovered.
10. Govt. Notified Black List Firms / Suppliers shall not be entertained.
11. Package / good supplied by the successful bidders should be printed " Property Of Govt. Of Sindh not for sale".


 (DR. MUKHTIAR AHMED KHOWAJA)
 DIRECTOR
 INSTITUTE OF SKIN DISEASES SINDH,
 K A R A C H I.

Efr- wj

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.

AS PER REQUIREMENT

13

STOCK UP

SR. #	PARTICULARS.	QTY.	RATE.	AMOUNT.
01.	SYP. ERYTHROMYCINE 200 MG. PER BOTTLE.	20000 Bottle		
02.	SYP. CLAVULANATED PONTENTIATED + AMOXICYLIN 156 MG. PER BOTTLE.	5000 Bottle		
03.	SYP. CLAVULANATED PONTENTIATED + AMOXICYLIN DS PER BOTTLE.	5000 Bottle		
04.	SYP. CEPHRADINE 125 MG. PER BOTTLE	5000 Bottle		
05.	SYP. CEPHRADINE 250 MG. PER BOTTLE.	10000 Bottle		
06.	SYP. SULPHA DIMIDINE + TRIMETHOPRIM PER BOTTLE.	20000 Bottle		
07.	SYP. SULPHA DIMIDINE + TRIMETHOPRIM DS PER BOTTLE.	20000 Bottle		
08.	SYP. CHLORPHENIRAMINE 450 ML. PER BOTTLE.	20000 Bottle		
09.	SYP. CETIRIZINE 60 / 120 ML. PER BOTTLE.	5000 Bottle		
10.	SYP. IBUPROFEN 120 ML. PER BOTTLE.	5000 Bottle		
11.	SYP. GRISOFULVIN 125 MG. PER BOTTLE.	5000 Bottle		
12.	SYP. AMOXICYLIN 125 MG. PER BOTTLE.	10000 Bottle		
13.	SYP. AMOXICYLIN 250 MG. PER BOTTLE.	10000 Bottle		
14.	SYP. AMPICILIN 125 MG. + CLOXACILLINE 125 MG. PER BOTTLE	10000 Bottle		
15.	SYP AMPICILIN 125 M.G. PER BOTTLE.	10000 Bottle		
16.	SYP. AMPICILIN 250 MG. PER BOTTLE.	10000 Bottle		
17.	SYP. VITIMIN B. COMPLEX 120 ML. PER BOTTLE.	2000 Bottle		
18.	SYP. CEPHALEXINE. 125 MG. PER BOTTLE.	10000 Bottle		
19.	SYP. CEFIXIME SUSPENSION 100 MG / 5 ML. PER BOTTLE.	2000 Bottle		
20.	SYP. CLARITHROMYCIN 125 MG. / 5 ML. / 60 ML PER BOTTLE.	2000 Bottle		



(DR. MUKHTIAR AHMED KHOWAJA)
DIRECTOR
INSTITUTE OF SKIN DISEASES SINDH,
KARACHI

etc wv

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.

AS PER REQUIREMENT
FOR THE YEAR 2012-2013
LIST OF THE TABLET.

SR. #	PARTICULARS.	QUANTITY.	RATE.	AMOUNT.
01.	TAB. B.COMPLEX PER 1000 TAB.	200000 Tab		
02.	TAB. CHLORPHENIRAMINE 4.MG. PER 1000 .	800000 Tab		
03.	TAB. CLAVULANATED PONTENTIATED AMOXYCILINE 375. MG. PER 6. TAB.	10000 Tab		
04.	TAB. CLAVULANATED PONTENTIATED AMOXYCILINE 625 MG. PER 6. TAB.	10000 Tab		
05.	TAB. CALCIUM LACTATE PER 1000 TAB.	10000 Tab		
06.	TAB. CIPROFLOXACIN 250 MG. PER 10 TAB.	50000 Tab		
07.	TAB. CIPROFLOXACIN 500 M.G. PER 10 TAB.	20000 Tab.		
08.	TAB. ERYTHROMYCINE 250 MG. PER 100 TAB.	100000 Tab		
09.	TAB. ERYTHROMYCINE 500 M.G. PER 100 TAB.	50000 Tab.		
10.	TAB. DELTA CORTRIL 5.MG. PER 1000 TAB.	20000 Tab		
11.	TAB. FOLIC ACID PER 1000 TAB.	30000 Tab		
12.	TAB. CETIRIZINE 10.MG. PER 10 TAB.	50000 Tab		
13.	TAB. FERROUS SULPHATE PER 1000 TAB.	20000 Tab		
14.	TAB. HYOCIN COMPOUND PER 1000 TAB.	5000 Tab		
15.	TAB. MEFENAMIC ACID 250 MG. PER 1000 TAB.	50000 Tab		
16.	Tab. IMURAN PER 100 TAB	5000 Tab		
17.	TAB. IBUPROFEN 200 MG. PER 250 TAB.	20000 Tab		
18.	Tab. LorataDine 10 MG PER 10 TAB.	50000 Tab		
19.	TAB. PARACETAMOL PER 1000 TAB.	50000 Tab		
20.	TAB. GRISOFULVIN 500.MG. PER 20. TAB.	200000 Tab		
21.	TAB. METHOTREXATE 2.5 MG PER 100 TAB.	5000 Tab		
22.	TAB. AZOITHIOPRIM 50 MG. PER 10 TAB.	5000 Tab		
23.	TAB. DOXYCYCLINE 100 MG. PER 100 TAB.	10000 Tab		
24.	TAB. OFLOXACIN 200 MG. PER 100 TAB.	10000 Tab		
25.	TAB. SULPHA DIMIDINE + TRIMETHOPRIM PER 100 TAB.	100000 Tab		
26.	TAB. SULPHA DIMIDINE + TRIMETHOPRIM DS PER 100 TAB.	50000 Tab		
27.	TAB. AZITHROMYCINE 250 .MG. PER 10. TAB.	5000 Tab		

(DR. MUKHTIAR AHMED KHOWAJA)

DIRECTOR

INSTITUTE OF SKIN DISEASES SINDH,
K A R A C H I.

ofc

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.

FOR THE YEAR 2012-2013
LIST OF THE CAPSULE.

SR. #	PARTICULARS.	QTY.	RATE.	AMOUNT.
01.	CAP. AMPICILIN 125.MG + CLOXACILLINE 125.MG PER 100 CAP.	50000 Cap		
02.	CAP. AMPICILIN 250.MG. + CLOXACILLINE 250 MG. PER 100 CAP	50000 Cap		
03.	CAP. LINCOMYCIN 500 MG. PER 12 CAP.	24000 Cap		
04.	CAP. DOXYCYCLIN 100 MG. PER 100 CAP.	300000 Cap		
05.	CAP. AMOXYCILIN 250 MG. PER 100 CAP.	50000 Cap		
06.	CAP. AMOXYCILIN 500 MG. PER 100 CAP.	50000 Cap		
07.	CAP. CEPHRADINE 250 MG. PER 100 CAP.	25000 Cap		
08.	CAP. CEPHRADINE 500 MG. PER 100 CAP.	25000 Cap		
09.	CAP. OXYTETRACYCLINE 250 MG PER 1000 CAP.	600000 Cap		
10.	CAP. AMPICILIN 250. MG. PER 100 CAP. 00	30000 Cap		
11.	CAP. AMPICILIN 500 MG. PER 100 CAP.	30000 Cap		
12.	CAP. FLUCONAZOLE 150 MG. PER CAP.	10000 Cap		
13.	CAP. CEFIXIME 400 MG. PER 10 CAP.	5000 Cap		



(DR. MUKHTIAR AHMED KHOWAJA)
DIRECTOR
INSTITUTE OF SKIN DISEASES SINDH,
K A R A C H I

O/c W ✓

OFFICE OF THE DIRECTOR, INSTITUTE OF SKIN DISEASES, SINDH, KARACHI

DRUGS/CHEMICAL AS PER REQUIREMENT FOR YEAR-2012-2013

LIST OF THE CHEMICAL.

SR. #	PARTICULARS,	QUANTITY	RATE	AMOUNT.
01.	SULPHUR POWDER. PER KG.	2000 Kg		
02.	CALAMINA POWDER PER K.G.	3000 Kg		
03.	ZINC OXIDE POWDER PER KG.	1000 Kg		
04.	SODIUM THIO SULPHATE PER K.G.	500 Kg		
05.	CAMPHER POWDER PER K.G.	100 Kg		
06.	POTASIUM PERMANGNATE PER K.G.	25 Kg		
07.	STARCH POWDER. PER K.G.	300 Kg		
08.	SALICYLIC ACID PER K.G.	200 Kg		
09.	BENZOIC ACID PER K.G.	300 Kg		
10.	LIQUIR PICIS CARB 450.ML. PER BOTTLE.	500 Kg		
11.	LIQUID PARAFFIN 4.5 LTR. PER CANE.	50 Cane		
12.	LIQUID GLYCERIN 4.5 LTR. /KG PER CANE.	15 Cane		
13.	PYODINE SOLUTION 4.5 ML. PER BOTTLE.	10 Bottle		
14.	DETTOL LIQUID 4.5 LTR PER CANE.	10 Cane		



(DR. MUKHTIAR AHMED KHOWAJA)

DIRECTOR

INSTITUTE OF SKIN DISEASES SINDH,

KARACHI.

o/c us

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI

DRUGS/MEDICINES AS PER REQUIREMENT FOR THE YEAR-2012-2013.

AS PER REQUIREMENT
LIST OF THE INJECTION.

SR. #	PARTICULARS.	QUANTITY	RATE.	AMOUNT.
01.	INJ. BENZYL PENCILLIN 5 LAC PER EACH.	20000 Vial		
02.	INJ. BENZYL PENCILLIN 10.LAC PER EACH.	10000 vial		
03.	INJ. XYLOCAINE 2% 10.ML. AMP. PER 100.AMP.	500 Amp		
04.	INJ. XYLOCAINE WITH ADERNALINE 10.ML. AMP. PER 100 AMP.	500 Amp		
05	INJ. GLUCONTIME (1500 MG) PER AMP.	500 Amp		
06	INJ. AVIL 2.ML. PER AMP	1000 Amp		
07.	INJ. HYDROCORTISONE 100 M.G. PER VIAL.	500 Amp		
08.	INJ. DEXAMETHASONE PER AMP.	500 Amp		
09.	INJ. DISTILLED WATER 5.ML AMP. PER 100. AMP.	500 Amp		
10	INJ DECADRON 4 MG / 8 MG PER AMP	500 Amp		

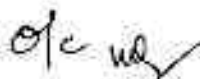


(DR. MUKHTIAR AHMED KHOWAJA)

DIRECTOR

INSTITUTE OF SKIN DISEASES SINDH,

KARACHI.



OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.

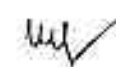
DRUGS / MEDICINES AS PER REQUIREMENT FOR THE YEAR 2012-13

LIST OF THE SYRINGES / LOTION / SUNDRIS / VASELINE AS PER REQUIREMENT.

SR. #	PARTICULARS.	QUANTITY	RATE.	AMOUNT.
	SYRINGES.			
01.	DISPOSABLE SYRINGE 3.CC PER 100 NO.	3000 Nos		
02.	DISPOSABLE SYRINGE 5.CC PER 100 NO.	10000 No		
03.	INSULINE SYRINGE PER 100 NO.	1000 No		
04.	DISPOSABLE SYRINGE 10 CC PER 100 NOS	1000 No		
	LOTION.			
01.	BENZYL BENZOATE EMULSION 450 ML. PER BOTTLE.	10000 Bottle		
02.	PERMETHRIN 5% LOTION PER BOTTLE.	10000 Bottle		
	VASELINE			
01.	WHITE PETROLIUM JELLY 175.K.G DRUM. PER K.G.	70000 Kg		
	SUNDRIES			
01	BANDAGE 15 CM P/ DOZ	200 Doz		
02	BANDAGE 5 CM P/DOZ	200 Doz		
03	ADHASIVE PLASTER P/SPOOL	100 Spool		
04	COTTON WOOL P/KG	50 Kg		



(DR. MUKHTIAR AHMED KHOWAJA)
DIRECTOR
INSTITUTE OF SKIN DISEASES SINDH,
KARACHI.

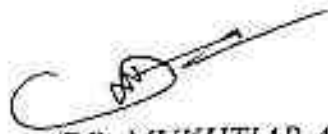
O/c 

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.

CATEGORY III - ICS : AS PER REQUIREMENT 2012 - 13.

LIST OF LINEN AND LEVARIES.

SR. #	NAME OF ITEMS	QUANTITY	RATE.	AMOUNT.
01	APRON DOCTOR COAT	50 Nos		
02	BED SHEET (LATHA) A-ONE 84 * 60"	400 Nos		
03	BED MAT	50 Nos		
04	CURTAIN COLOUR	100 Nos		
05	CAP FOR CHOWKIDAR	25 Nos		
06	DRAW SHEET LATHA 54 * 48"	200 Nos		
07	PILLOW COAT 24 * 15"	100 Nos		
08	PILLOW COVER LATHA A ONE	100 Nos		
09	UNIFORM CLOTH UNSTICH	100 Nos		
10	TOWEL BIG SIZE 40 * 20"	200 Nos		



(DR. MUKHTIAR AHMED KHAWAJA)
DIRECTOR
INSTITUTE OF SKIN DISEASES SINDH,
K A R A C H I

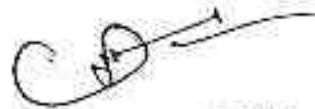
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OFFICE OF THE DIR INSTITUTE OF SKIN DISEASES SINDH, KARACHI

CATEGORY II - MISC : AS PER REQUIREMENT 2012-2013

LIST OF GENERAL ITEMS.

S.#	NAME OF THE ITEMS.	QUANTITY..	RATE	AMOUNT.
01.	LIFE BUOY SOAP.	400 Nos		
02.	PHENYLE	200 Bottle		
03.	ENERGY SAVERS.	100 Nos.		
04.	BULB. 100.W.	100Nos		
05.	BULB 60 W PER EACH	100 Nos		
06.	BROOM HARD	150 Nos		
07.	BROOM SOFT.	150 Nos		
08.	FINIS.	50 No		
09.	CHOKE. 40.W.	50 Nos		
10.	CHOKE 20.W.	50 Nos		
11.	MOP WHITE	200 Nos		
12.	BLACK SOAP / LOUNDRY SOAP	200 Nos		
13.	CAPACITOR PER EACH	50 Nos		
14.	DUSTER THICK CLOTH EACH	300 No		
15.	DUSTER THIN CLOTH EACH	300 Nos		
16.	TORCH PER EACH	50 Nos		
17.	ROOM SPRAY PER EACH 300 ML.	100 Nos		
18.	MATCH (FAIR & STICK) PER EACH	100 Nos		
19.	STARTER PER EACH	100 Nos		
20.	SURF POWDER 500 GM PER PACKET	200 Nos		
21.	SODA (WSHING) PER KG	50 Nos		
22.	TIBET SOPA PER EACH	400 Nos		
23.	VIM POWDER 500 GRAM PER BOTTLE	100 Nos		
24.	TUBE LIGHT 40 W PER EACH	200 Nos		
25.	TUBE LIGHT 25 W PER EACH	50 Nos		



(DR. MUKHTIAR AHMED KHOWAJA)

DIRECTOR

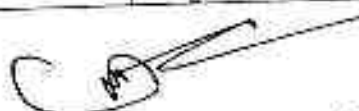
INSTITUTE OF SKIN DISEASES SINDH,

KARACHI.

o/c
w/v

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI
CATEGORY III - AS PER REQUIREMENT 2012-2013
LIST OF DIET ITEMS.

S.#	NAME OF THE ITEMS.	QUANTITY.	RATE	AMOUNT.
01	BREAD IN SLICE PER KG	200 Kg		
02	BUTTER PURE PER KG	50 Kg		
03	SALT ORDINARY PER KG	50Kg		
04	STUFF CURRY MIXED PER KG	100kg		
05	RED CHILLY POWDER PER KG	100 Kg		
06	DHANIA POWDER PER KG	100 Kg		
07	HALDI POWDER PER KG	50 Kg		
08	WHITE ZERA PER KG	50 Kg		
09	GHEE (BANASPATI) PER KG	100 Kg		
10	DAL MONGI (WASHED) PER KG	100 Kg		
11	SUGUR WHITE PER KG	200 KG		
12	ONION PER KG	100 Kg		
13	ATTA (WHEAT) BEST QUALITY PER KG	500 KG		
14	BEAF WITHOUT BONE PER KG	100 KG		
15	MUTTON PER KG	50 KG		
16	CHICKEN (DRESSED) PER KG	200 KG		
17	RICE BASMATI A ONE PER KG	500 KG		
18	EGG (FARMS) PER DOZEN	50 Dozen		
19	MILK PURE FRESH PER LETER	200 Later		
20	TEA LEAVES (PATI) PER KG	100 Kg		
21	FISH (BEST QUALITY) PER KG	200 KG		
22	CUSTERED POWDER PER KG	100 Kg		
23	SUJI PER KG	50 Kg		
24	APPLE PER KG	100 Kg		
25	BANANA PER DOZEN	100 KG		
26	ORANGES PER DOZEN	100 KG		
27	MANGO PER KG	200 Kg		
28	GRAPES PER KG	100 KG		
29	KHUBANI PER KG	50 KG		
30	BISCUIT (EMBI) PER PACKET	100 Packet		
31	GINGER PER KG	100 KG		
32	GARLAC PER KG	50 Kg		
33	POTATOS PER KG	100 KG		
34	BHINDI (LANDI FINGER) PER KG	100 KG		
35	TINDA PER KG	50 Kg		
36	LOKI PER KG	100 Kg		
37	SHALGUM PER KG	100 Kg		
38	TOMATOS PER KG	100 Kg		
39	GREEN MASALA	50 Kg		
40	GREEN PEAS (MUTTON) PER KG	50 Kg		
41	CABBAGE (BAND GOBHI) PER KG	50 Kg		



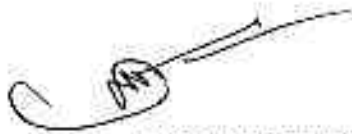
(DR. MUKHTIAR AHMED KHOWAJA)
 DIRECTOR
 INSTITUTE OF SKIN DISEASES SINDH,
 KARACHI.

ofc m

A G R E E M E N T.

We are agreed with Terms & Condition, we guarantee to supply store exactly in accordance with requirement as specified by the Director, Institute Of Skin Diseases Sindh Karachi.

SIGNATURE OF THE TENDERS. _____
NAME. _____
NAME OF THE FIRM WITH _____
FULL ADDRESS. _____
TELEPHONE NOS (OFFICE) _____
MOBILE. NO. _____
TELEPHONE NOS. RESIDENCE. _____



(DR. MUKHTIAR AHMED KHOWAJA)
DIRECTOR
INSTITUTE OF SKIN DISEASES SINDH,
K A R A C H I.

O/c
w

(Rs. 100/- Stamp Papers)

Dated

AGREEMENT

This agreement made _____ day of _____ 2012 between M/s Institute of Skin Diseases Sindh, Karachi (hereinafter called "The Procuring agency) of the one part and M/s _____ (hereinafter called "The Supplier") of the other part.

WHEREAS the Procuring agency invited bids for _____ and has accepted a bid by the supplier for the supply of those goods and services in the same of (hereinafter called "the contract Price")

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this agreement words and expression shall have the same meanings as are respectively assigned to them in the condition of contract referred to Institute of Skin Diseases Sindh, Karachi.
2. The following documents shall be deemed to form and be read and construed as part of this Agreement, _____
 - (a) The bid form and the price schedule submitted by the bidder,
 - (b) The schedule of requirement
 - (c) The General conditions of contract
 - (d) The Special conditions of contract and
 - (e) The procuring agency's Notification of award.

3. In consideration of the payment to be made by the Procuring agency to the Supplier as hereinafter mentioned, the supplier hereby covenants with the Procuring agency to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
4. The procuring agency hereby covenants to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the times and in the manner prescribed by the contract.

In witness whereof the parties here to have caused this agreement in accordance with their respective hands and seals the day the month and the year first above written.

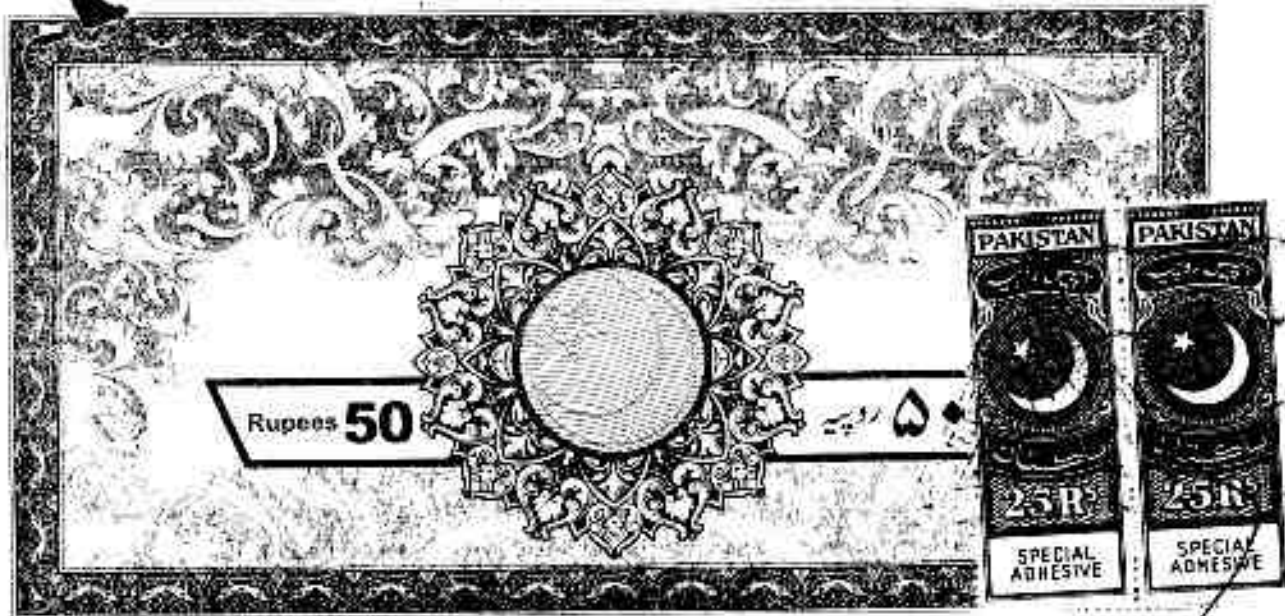
Signature & Seal (Purchaser)
Name
Designation

Signature & Seal (Supplier)
Name
Designation

Witness:

Signature & Seal (Purchaser)
Name
Designation

Signature & Seal (Supplier)
Name
Designation



MUHAMMAD MUSLIM STAMP VENDOR
L No 53, Shop # 8, D.C. Central Karachi

ASSISTANT SUPERINTENDENT OF STAMPS
STAMP OFFICE, CITY COURTS
Karachi II

S No 7087 Dated: 30 JUL 2012
Issued to with order
Through with Address: Ghulam Muhammad
Proposed
Value of Rs. Attached
Vendor's Signature

AGREEMENT

This agreement made _____ day of _____ 2012, between M/s Institute of Skin Diseases Sindh, Karachi (hereinafter called "The Procuring agency) of the one part and M/s. Meehreh Pharmaceutical (hereinafter called "The Supplier") of the Other Part.

WHEREAS the Procuring agency invited bids for _____ and has accepted a bid by the supplier for the supply of those goods and services in the same of (hereinafter called "The Contract Price")

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this agreement words and expression shall have the same meaning as are respectively assigned to them in the condition of contract referred to Institute of Skin Diseases Sindh, Karachi.
2. The following documents shall be deemed to form and be read and construed as part of this Agreement, _____
 - (a) This bid form and the price schedule submitted by the bidder,
 - (b) The Schedule of requirement.
 - (c) The General conditions of contract.
 - (d) The Special conditions of contract and
 - (e) The procuring agency's Notification of award.

Continued on page two.


3. In consideration of the payment to be made by the Procuring agency to the Supplier as hereinafter mentioned, the supplier hereby covenants with the Procuring agency to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
4. The procuring agency hereby consents to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the times and in the manner prescribed by the contract.

In Witness whereof the parties here to have caused this agreement in accordance with their respective hands and seals the day the month and the year first above written.

Signature & Seal (Purchaser)

Name

Designation

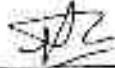


Dr. Mrs Mumtaz Memon
Dir-
Institute of Skin Diseases and
Karachi

Signature & Seal (Supplier)

Name

Designation

 **FOR MEDITECH PHARMACEUTICAL**

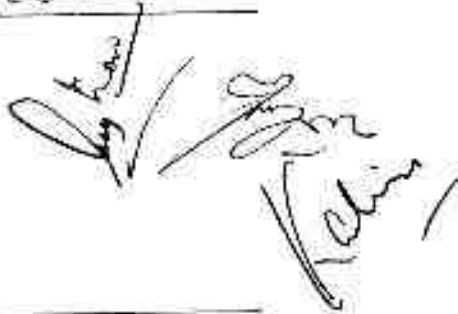
Meditech Pharmaceutical
CEO.

Witness:

Signature & Seal (Purchaser)

Name

Designation



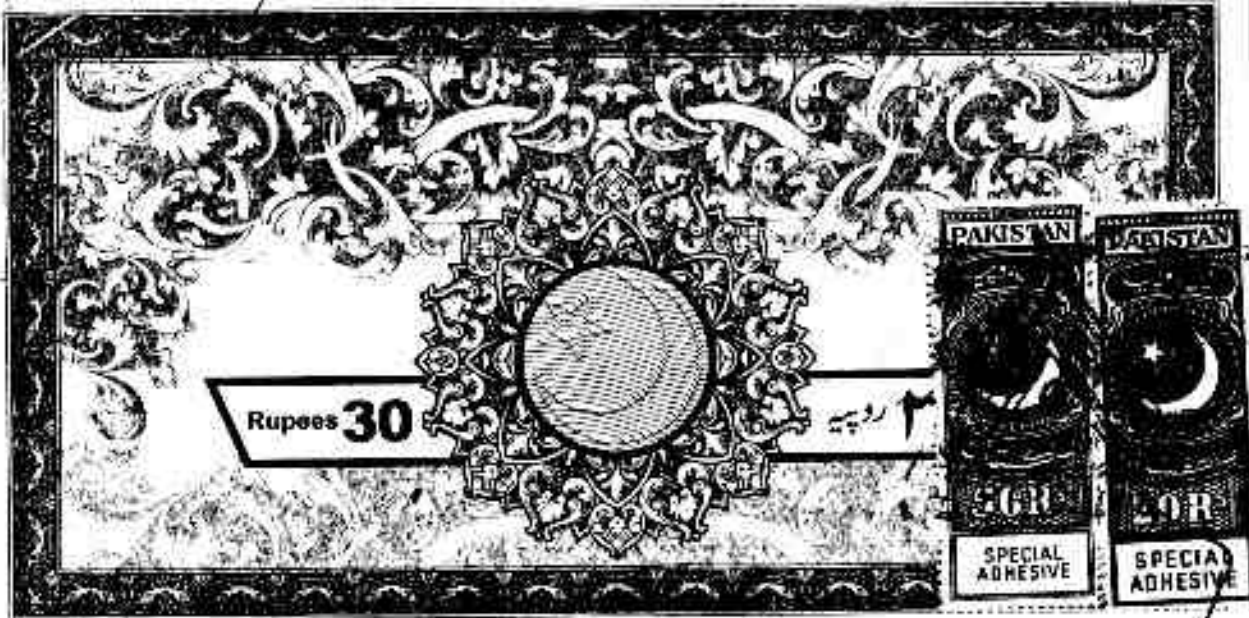
Signature & Seal (Supplier)

Name

Designation



Mohammed Sohail



MOHAMMED HANIF STAMP VENDOR

Branch: 2036, No. 64, City Court Karachi.

Stamp: 2036

Stamp: 2036

Stamp: 2036

Stamp: 2036

Stamp: 2036

Stamp: 2036

05 SEP 2012

AGREEMENT

This agreement made _____ day of _____ 2012 between M/s Institute of Skin diseases Sindh, Karachi (hereinafter called "The Procuring agency") of the one part and M/s Royal International (hereinafter called "The Supplier") of the other part.

WHEREAS the Procuring agency invited bids for _____ and has accepted a bid by the supplier for the supply of those goods and services in the same of (hereinafter called "the contract Price")

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS:

1. In this agreement words and expression shall have the same meanings as are respectively assigned to them in the condition of contract referred to institute of Skin Diseases Sindh, Karachi.
2. The following documents shall be deemed to form and be read and construed as part of this Agreement,
 - (a) The bid form and the price schedule submitted by the bidder,
 - (b) The schedule of requirement
 - (c) The General conditions of contract.
 - (d) The special conditions of contract and
 - (e) The procuring agency's Notification of award.




[Handwritten signature]

[Handwritten signature]

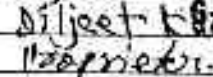
3. In consideration of the payment to be made by the Procuring agency to the Supplier as hereinafter mentioned, the supplier hereby covenants with the Procuring agency to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
4. The procuring agency hereby covenants to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the times and in the manner prescribed by the contract.

In witness whereof the parties here to have caused this agreement in accordance with their respective hands and seals the day the month and the year first above written.

Signature & Seal (Purchaser)
Name
Designation


Dr. M. Mumtaz Memon
Director
Institute of Skin Diseases Sindh
Karachi

Signature & Seal (Supplier)
Name
Designation


Diljeet ROYAL INTERNATIONAL
6-29 Regal Trade Square
Saddar, Karachi.



Witness:

Signature & Seal (Purchaser)
Name
Designation



Signature & Seal (Supplier)
Name
Designation

ATTESTED


M. SHAHID QURESHI
JUSTICE OF PEACE
AS MAGISTRATE
EMPOWERED UNDER 22-A, CR.P.C
To Attest Documents
KARACHI-PAKISTAN





3. In consideration of the payment to be made by the Procuring agency to the Supplier as hereinafter mentioned, the supplier hereby covenants with Procuring agency to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the Contract.

4. The procuring agency hereby covenants to pay the supplier in consideration of the provision for the good and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the times and in the manner prescribed by the contract.

IN WITNESS WHEREOF the parties here to have caused this agreement in accordance with their respective hands and seal the day the month and the year first above written.

Signature & Seal (Purchaser)

Name:


Designation:


 Dr. Mrs Mumtaz Memon
 Director
 Institute of Skin Diseases Sindh
 Karachi

Signature & Seal (Supplier)

Name:

Designation:



 Professor
 (Professor)

WITNESSES:-

Signature & Seal (Purchaser)

Name:

Designation:



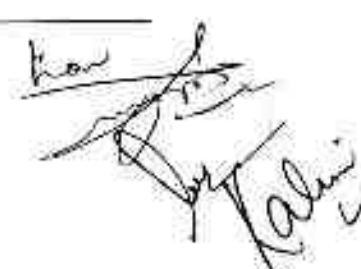
Signature & Seal (Supplier)

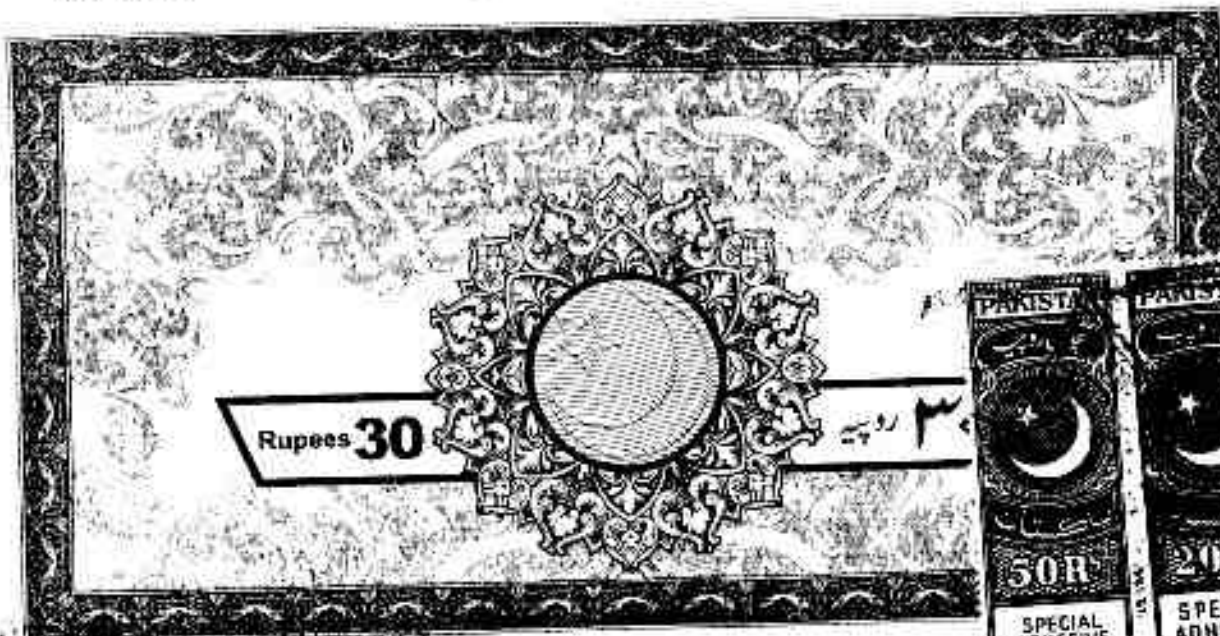
Name:

Designation:



04 SEP 2012





013057

17 AUG 2012

MUHAMMAD NAEEM
Advocate I. No 326

AGREEMENT

This agreement made 23rd August of 2012 between M/s Institute of Skin Diseases Sindh, Karachi (hereafter called "The Procuring agency") of the one part and M/s Nexus Enterprise (hereafter called "The Supplier") of the other part.

WHEREAS the procuring agency invited bids for _____ and has accepted a bid by the supplier for the supply of those goods and services in the same of (hereafter called "the contact Price").

NOW THIS AGREEMENT WITNESSTH AS FOLLOWS:

1. In this agreement words and expression shall the same meanings as are respectively assigned to them in the condition of contract referred to institute of skin Diseases Sindh, Karachi.
2. The following documents shall be deemed to form and be read and construed as part of this Agreement,
 - (a) The bid form and the price schedule submitted by the bidder,
 - (b) The schedule of requirement
 - (c) The General conditions of contract.
 - (d) The Special conditions of contract and
 - (e) The procuring agency's Notification of award.



3. In consideration of the payment to be made by the procuring agency to the Supplier as hereafter mentioned, the supplier hereby covenants with the procuring agency to provide the goods and services and to remedy defects therein in conformity in all respects with the provisions of the contract.
4. The procuring agency hereby covenants to pay the supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provision of the contract at the times and in the manner prescribed by the contract.

In witness whereof the parties here to have caused this agreement in accordance with their respective hands and sales the day the month and the year first above written.

Signature & Seal (Purchaser)

Name

Designation




Dr. Mrs Mumtaz Memon —
 Director
 Institute of Skin Diseases Sindh —
 Karachi

Signature & Seal (Supplier)

Name

Designation




 AJAZ NAFEES.
 PROPRIETOR

Witness:

Signature & Seal (Purchaser)

Name

Designation



 ROZINA-UR-RAHMAN
 SALES MANAGER

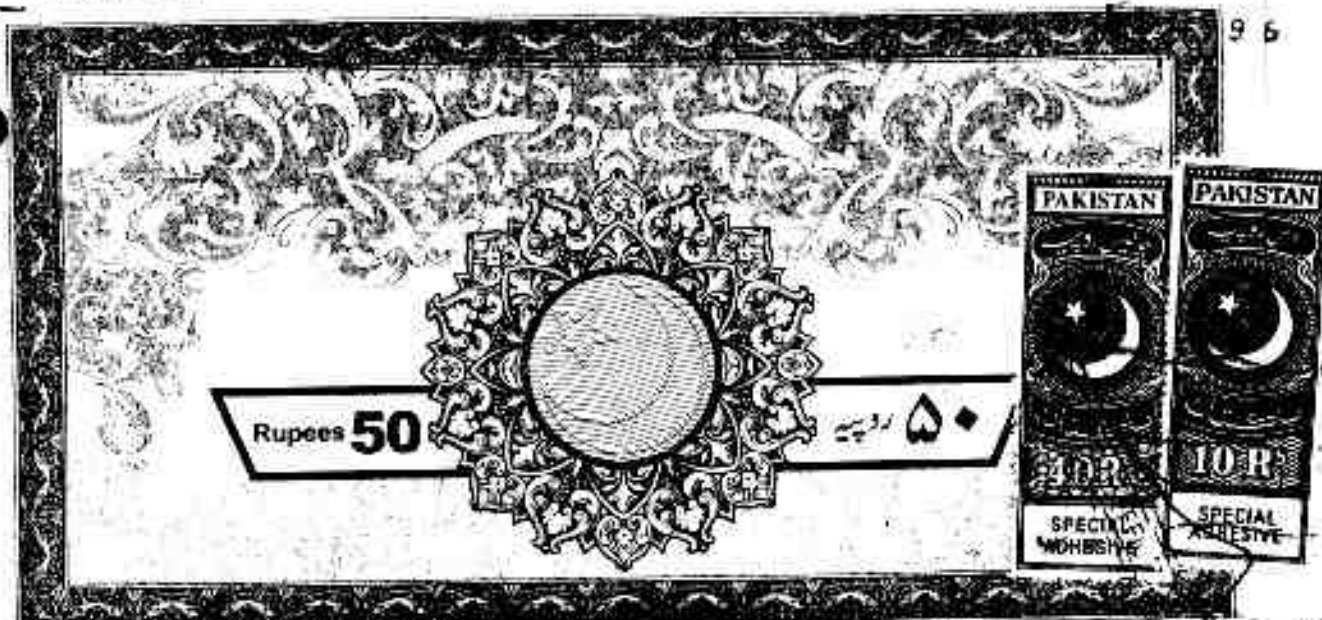
Signature & Seal (Supplier)

Name

Designation







AZAM ALAM STAMP VENDOR
Licence No 78/0-7 Stamp Vendors
Phase-I D.H.A. Karachi

5 AUG 2012

ASSISTANT SUPERINTENDENT OF STAMPS
POST OFFICE, CITY COURTS,
KARACHI

09 AUG 2012

S No. 11567
Issued To With: Muhammad Aqbal Ghazanfar
Through With Address: (Advocate)
Purpose: No. 3083/11C/Karachi
Value Rs. 100/- Attached
Stamp Vendor Signature: *[Signature]*

AGREEMENT

THIS AGREEMENT made 23rd day of August 2012 Between M/S INSTITUTE OF SKIN DISEASES SINDH, KARACHI (hereinafter called "the procuring agency) of the one part and M/S MEDIC INTERNATIONAL (hereinafter called "The Supplier") of other part.

WHEREAS the procuring agency invited bids for Medicines and has accepted a bid by the supplier for the supply of those goods and services in the same of (hereinafter called "the contract Price")

NOW THIS AGREEMENT WITNESSETH AS FOLLOWS :

1. In this agreement words and expression shall have the same meaning as are respectively assigned to them in the condition of contract referred to institute of Skin Diseases Sindh, Karachi
2. The following documents shall be deemed to form and be read and construed as part of this Agreement, _____
 - (a) The bid form and the price schedule submitted by the bidder.
 - (b) The Schedule of requirement.
 - (c) The General conditions of contract.
 - (d) The Special conditions of contract and
 - (e) The procuring agency's Notification of award.

[Handwritten signatures and initials]

[Handwritten signature and stamp]

3. In consideration of the payment to be made by the Procuring agency to the Supplier as hereinafter mentioned, the supplier hereby covenants with the Procuring agency to provide the goods and services and to services and to remedy defects therein in conformity in all respects with the provisions of the Contract.
4. The procuring agency hereby covenants to pay the Supplier in consideration of the provision of the goods and services and the remedying of defects therein, the Contract Price or such other sum as may become payable under the provisions of the contract at the times and in the manner prescribed by the contract.

In witnesses whereof the parties here to have caused this agreement in accordance with their respective hands and seals the day the month and the year first above written.

Signature & Seal (Purchaser)
Name
Designation

Dr. Mrs Mumtaz Memon
Director
Institute of Skin Diseases Sindh
Karachi

Signature & Seal (Supplier)
Name
Designation

Anwer Sharif
ANWER SHARIF
Manager



WITNESSES:-

Signature & Seal (Purchaser)
Name
Designation

Kabir



Signature & Seal (Supplier)
Name
Designation

Mohammad Adnan
MOHAMMAD ADNAN
INSTITUTIONAL SALE OFFICER




Bid Evaluation Report

1. Name of procuring Agency: Director Institute of Skin Diseases Sindh, Karachi
2. Tender Reference No: INF - KAY - 2796 (12)
3. Tender Description / Name of work/item: Medicines / Drugs
4. Method of Procurement: Single Stage 2 Envelop Procedure
5. Tender Published: 00119781 (2012-2013 Daily Jang, Aman & Moomal dated 28.06.2012.
Print & Electronic Media (SPPRA ID No & News Papers name with dates).
6. Total Bid documents sold: 22
7. Total Bids Received: 15
8. Technical Bid Opening date: if application) 05.09.2012(Provide details in separate from)
9. No of Bid technically qualified (if applicable): 14
10. Bid(s) Rejected: 1
11. Financial Bid Opening date: 12.09.2012 Bid Evaluation Report:

S. No	Name of Firm or Bidder	Cost offered by the bidder	Ranking in terms of cost	Comparison with Estimated Cost	Reasons for acceptance / rejection	Remarks
1	2	3	4	5	6	7
COMPARATIVE STATEMENT ATTACHED						



DR. MANZOOR H. MEMON
CHIEF MEDICAL OFFICER (B-19)
MEMBER


DR. KALIM AHMAD SHAIKH
SENIOR MEDICAL OFFICER (B-18)
MEMBER


DR. QAMAR IQBAL CHANDIO
SENIOR MEDICAL OFFICER (B-18)
MEMBER


MR. MUHAMMAD ANWAR KHOKHAR
SECTION OFFICER (PM&I)
GOVT. OF SINDH
HEALTH DEPARTMENT, KARACHI.
MEMBER

Section Officer
(Medical Stores)
Health Department
Government of Sindh


DR. MRS MUMTAZ MEMON
CHAIRMAN / DIRECTOR
INSTITUTE OF SKIN DISEASES
SINDH KARACHI

MINUTES OF THE MEETING OF PURCHASE COMMITTEE TO FINALIZE THE PURCHASE OF REQUIRED ITEMS OF MEDICINE /VASELINE /PETROLIUM JELLY AND CHEMICAL FOR THE YEAR-2012-13.

A meeting of the Procurement Committee of this Institute Of Skin Diseases Sindh, Karachi was held on 12th September-2012 on the office of the Director, Institute Of Skin Diseases Sindh Karachi to evaluate the rates quoted by the Bidders for items mentioned in subjected noted above.

The Director, Dr. Mrs. Mumtaz Memon, presided the meeting that also attended by the Members of Procurement Committee.


That Fourteen (14) Bidders participated the meeting for the Tender of Medicines / Vaseline / Petroleum Jelly and Chemicals M/s. Pharmic Enterprises participated in Medicine Items dis qualified due to not submission of Technical Bids.

After examining the samples provided by the Bidders, the items list of the Annexure has approved and finalize the purchase committee on the basic of quality and on lowest also.



1. Dr. Manzoor Hussain Memon,
Chief Medical Officer (B-19)
Member


2. Dr. Qamar Iqbal Chandio,
Senior Medical Officer (B-18)
Member.


3. Dr. Kalim Ahmed Shaikh,
Senior Medical Officer (B-18)
Member


4. Mr. Muhammad Anwer Khokhar,
Section Officer, (PM&I)
Member

Section Officer
(Medical Stores)
Health Department
Government of Sindh


(DR. MRS. MUMTAZ MEMON)
DIRECTOR, / CHAIRMAN,
INSTITUTE OF SKIN DISEASES SINDH,
KARACHI.

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES SINDH, KARACHI
AS PER REQUIREMENT FOR THE YEAR 2012-2013
LIST OF THE TABLETS

S.NO	PARTICULARS	UNIT	TABLETS	COVER	BRAND	MARKET	POPULAR	Y.SIZ	GENUS	PATENT	MEDICAL	PHARM	MOVAL	QZ	TABLET	MARKET	NET
1	TAB. COMPLEN PER 100 TAB.																
2	TAB. CHLORPHENIRAMINE 4 MG. PER 1000.		54.00								47.00		44.00	95.70	1,730.00		
3	TAB. CLAVULANATE/POTENTILATED													58.00	210.00		
4	TAB. CLAVULANATE/POTENTILATED													74.00			
5	TAB. CALCIUM LACTATE PER 1000 TAB.													118.32			
6	TAB. CIPROFLOXACIN 250 MG. PER 10 TAB.				24.90						24.00		25.00	27.45	28.10		
7	TAB. CIPROFLOXACIN 500 MG. PER 10 TAB.				44.90						34.00		36.95	42.10	46.90	180.90	
8	TAB. ERVITROBYCTINE 750 MG. PER 100 TAB.									400.00	340.00		348.00				
9	TAB. ERVITROBYCTINE 500 MG. PER 100 TAB.									300.00	250.00		289.00				
10	TAB. DELTA CORTEGE 5 MG. PER 1000 TAB.													1,013.00			
11	TAB. FOLIC ACID PER 1000 TAB.													84.10			
12	TAB. C. ETHERINE 40 MG. PER 10 TAB.		7.00								6.50		6.99	9.42	8.80		
13	TAB. TERMOUS SULPHATE PER 1000 TAB.													130.50	3,230.00		
14	TAB. HYOCIN COMPOND PER 1000 TAB.																
15	TAB. MEFENAMIC ACID 250 MG. PER 1000 TAB.																
16	TAB. MORGAN PER 100 TAB.													212.00	320.00		
17	TAB. IMIPROLEN 200 MG. PER 250 TAB.													174.00	182.50		
18	TAB. LOBEATADINE 10 MG. PER 30 TAB.													14.99	13.10		
19	TAB. PARACETAMOL PER 1000 TAB.		460.00											240.50	600.00		
20	TAB. CHLOSOFELVIN 400 MG. PER 20 TAB.									180.00	170.00		174.99				
21	TAB. METHTHELSINATE 2.5 MG. PER 100 TAB.																
22	TAB. AZOTHOPIRIM 50 MG. PER 10 TAB.																
23	TAB. DORYCTANE 100 MG. PER 100 TAB.																
24	TAB. ORIDONACIN 200 MG. PER 100 TAB.				319.00						249.00			162.40	306.00		
25	TAB. SUCRALFA DIMINE + TRIMEPTHOPIRIM PER 300 TAB.													174.00			
26	TAB. SUCRALFA DIMINE + TRIMEPTHOPIRIM 10 PER 100 TAB.																
27	TAB. AZITHROMYCLIN 250 MG. PER 10 TAB.													70.00			

Dr. [Signature]
 Medical Officer
 (Medical Stores)
 Health Department
 Government of Sindh

Dr. [Signature]
 Director
 Institute of Skin Diseases Sindh
 KARACHI.

Dr. Manzoor Hussain Memon
 Chief Medical Officer
 Institute of Skin Diseases Sindh
 Karachi

Dr. KALIM AHMED SHAIKH
 Senior Medical Officer
 Institute of Skin Diseases Sindh
 Karachi

Dr. Qammar Iqbal Chandio
 Medical Officer
 Institute of Skin Diseases
 Sindh, Karachi

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI
AS PER REQUIREMENT FOR THE YEAR 2012-2013

LIST OF THE CAPSULES

S-NO	PARTICULARS	CTTY HEADERS	DAVID HEADERS	BAHS HEADERS	MAXMI INST	POPULAR INST	VAIZ HEADERS	NOVA HEADERS	PAKIST HEADERS	MIDTECH PHARMA	ROYAL INST	R.Z. SERVICES	KORE & CO	SHAMS CO	MEDIC INST
1	CAP. AMBIO. HIN 125 MG. + CLONAZEPINE 12.5 MG PER 100 CAP	-	-	-	-	-	-	-	300.00	200.00	237.00	-	-	-	-
2	CAP. AMBIO. HIN 250 MG. + CLONAZEPINE 250 MG PER 100 CAP.	-	-	-	-	-	-	-	400.00	300.00	397.99	-	-	-	-
3	CAP. LINC. DRYCIN 500 MG. PER 12 CAP.	-	-	-	-	-	-	-	-	70.00	73.48	99.18	-	-	-
4	CAP. DORYCYCLIN 100 MG. PER 100 CAP.	-	-	-	-	-	-	-	-	145.00	147.90	162.40	-	-	-
5	CAP. AMOXYC. HIN 250 MG. PER 100 CAP.	-	-	-	-	-	-	-	-	220.00	222.89	232.00	-	565.00	-
6	CAP. AMOXYC. HIN 500 MG. PER 100 CAP.	-	-	-	-	-	-	-	-	360.00	447.49	377.00	-	572.00	-
7	CAP. CEPHALADINE 250 MG. PER 100 CAP.	-	-	-	-	-	-	-	-	-	-	435.00	438.00	-	-
8	CAP. C. PHENADINE 500 MG. PER 100 CAP.	-	-	-	-	-	-	-	-	-	-	1,015.00	763.00	-	-
9	CAP. OXYTETRA. CYCLINE 250 MG. PER 1000 CAP.	-	-	-	-	-	-	-	-	901.00	-	-	-	-	-
10	CAP. AMBIO. HIN 250 MG. PER 100 CAP.	-	-	-	-	-	-	-	-	250.00	200.00	222.89	-	-	-
11	CAP. AMBIO. HIN 500 MG. PER 100 CAP.	-	-	-	-	-	-	-	-	450.00	400.00	447.49	-	-	-
12	CAP. FLUCONAZOLE 150 MG. PER CAP.	38.00	114.75	-	-	-	-	42.50	-	30.00	31.80	-	-	-	-
13	CAP. CETIMINE 400 MG. PER 10 CAP.	-	-	-	-	-	-	-	-	120.00	124.10	290.00	187.50	-	-

(Signature)
Section Officer
(Medical Services)
Health Requirements
Government of Sindh

(Signature)
DIR BOSTON
Institute of Skin Diseases Sindh
KARACHI

(Signature)
Institute of Skin Diseases Sindh
Karachi

(Signature)
DR. SAJID AHMED SHAIKH
Senior Medical Officer
Institute of Skin Diseases Sindh
Karachi

(Signature)
Dr. Qasim Iqbal Chaudhry
Medical Officer
Institute of Skin Diseases Sindh
Sindh, Karachi

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.
AS PER REQUIREMENT FOR THE YEAR 2012-2013

LIST OF THE OINTMENT/CREAM

S.NO	PARTICULARS	CITY TRADERS	JAMH TRADERS	DABA TRADERS	MAJID INTL	POPIEL INTL	WAZ TRADERS	SEAS ENTERPRISES	PAKIST TRADERS	SUBHIC PHARMA	ROYAL INTL	RIZ SERVICES	FABE & COE	SHAMS & CO	MIRIC INTL
1	CLORITASOL PROPIONATE 0.05% OINTMENT 15 GM PER EACH	-	-	-	-	-	-	-	-	26.00	-	-	-	-	-
2	CLORITASOL PROPIONATE 0.05% OINTMENT 10 GM PER EACH	-	22.92	-	-	-	-	-	23.00	22.00	-	-	-	-	-
3	CLORITASOL PROPIONATE 0.05% OINTMENT 5 GM PER EACH	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4	CLORITASOL PROPIONATE 0.05% CREAM 10 GM PER EACH	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5	CLORITASOL PROPIONATE 0.05% CREAM 15 GM PER EACH	-	23.72	-	-	-	-	-	-	-	-	-	-	-	-
6	CLORITASOL CREAM 1% 15 GM PER EACH	-	-	-	-	-	-	-	44.00	40.00	-	-	-	-	-
7	BITARTHASOL PROPIONATE OINTMENT 15 GM PER EACH	-	-	45.06	-	-	-	-	-	-	-	-	-	-	-
8	POLYVINYL PIPERIDINE + BACTRAXIN 20 GM OINTMENT PER EACH	-	-	-	-	-	-	32.00	-	-	-	-	-	25.175	-
9	HYDROCORTISONE 1% CREAM 5 GM PER EACH	-	-	-	-	-	-	-	55.00	45.00	-	-	-	84.62	-
10	PERMETHRIN CREAM 5% PER EACH	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11	BITARTHASOL PROPIONATE + NEQUINONE CREAM 15 GM PER EACH	-	-	-	-	-	-	-	10.00	25.00	26.99	-	-	-	-
12	MENYLA PROMINOL 4% & 10% CREAM PER EACH	-	109.92	-	-	-	-	-	-	-	-	-	-	-	-
13	FLUCINONOLONE CREAM 1% 15 GM & 30 GM PER EACH	-	-	-	-	-	-	76.50	-	60.00	60.99	-	-	-	-
14	RETINOL ACID 0.05% CREAM PER EACH	-	-	-	-	-	-	36.00	-	-	-	-	-	-	-
15	FLUCINONOLONE ACTONIDE 15 GM OINTMENT CREAM	-	-	-	-	-	-	36.00	-	-	-	-	-	-	-
16	FLUCINONOLONE ACTONIDE 15 GM GEL	-	-	-	-	-	-	47.00	-	-	-	-	-	-	-
17	BUDNIZOLE CREAM 15 GM	-	-	-	-	-	-	82.00	-	60.00	69.99	-	-	-	-
18	FLUCINONOLONE ACTONIDE + NEQUINONE CREAM OINTMENT 15 GM	-	-	-	-	-	-	39.00	-	-	-	-	-	-	-
19	FLUCINONOLONE ACTONIDE + CLORITASOL CREAM OINTMENT 15 GM	-	-	-	-	-	-	37.00	-	-	-	-	-	-	-
20	HYDROCORTISONE 1% + TRITENOLONE 0.05%	-	-	-	-	-	-	-	-	-	-	-	-	-	-
21	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	68.00	-	-	-	-	-	-	-
22	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
23	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
24	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
25	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
26	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
27	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
28	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
29	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
30	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
31	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
32	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
33	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
34	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
35	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
36	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
37	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
38	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
39	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
40	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
41	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
42	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
43	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
44	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
45	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
46	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
47	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
48	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
49	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
50	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
51	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
52	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
53	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
54	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
55	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
56	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
57	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
58	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
59	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
60	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
61	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
62	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
63	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
64	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
65	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
66	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
67	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
68	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
69	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
70	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
71	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
72	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
73	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
74	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
75	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
76	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
77	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
78	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
79	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
80	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
81	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
82	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
83	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
84	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
85	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
86	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
87	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
88	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
89	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
90	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
91	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
92	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
93	FLUCINONOLONE ACTONIDE 0.1% 30 GM	-	-	-	-	-	-	45.00	-	-	-	-	-	-	-
94	FLUCINONOLONE ACTONIDE 0.1% 10 GM	-	-	-											

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI
AS PER REQUIREMENT FOR THE YEAR 2012-2013
LIST OF THE CHEMICAL

S NO	PARTICULARS	CITY TRADERS	JAMSHED TRADERS	BAHA TRADERS	MAAMI INTL	MOOLBAR INTL	VAIZ TRADERS	NEKUS ENTERPRISE	PAKICE TRADERS	MEHTEER PHARMA	ADYAL INTL	REZ SERVICES	FAD & CHEM	SHANKS CO	MEDIC INTL
1	SILICIC ACID POWDER PER K.G.	200	-	-	-	-	-	-	300	975	-	250	-	-	-
2	CALAMINA POWDER PER K.G.	127	-	-	-	-	-	-	150	140	-	130	-	-	-
3	ZINC OXIDE POWDER PER K.G.	275	-	-	-	-	-	-	300	350	-	-	-	-	-
4	SODIUM THIO SULPHATE PER K.G.	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5	CAMPHEOR POWDER PER K.G.	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6	POTASSIUM PERMANGANATE PER K.G.	-	-	-	-	-	-	-	2,000	2,200	-	1225	-	-	-
7	STARCH POWDER PER K.G.	118	-	-	-	-	-	-	120	-	-	99	-	-	-
8	SALICYLIC ACID PER K.G.	222	-	-	-	-	-	-	800	850	-	-	-	-	-
9	MINZOIC ACID PER K.G.	509	-	-	-	-	-	-	-	-	-	-	-	-	-
10	EMULSIFACTS CARBONUM PER BOTTLE	909	-	-	-	-	-	-	1,000	1,050	-	-	-	-	-
11	EMULSIFACTS ALCOHOL PER CANE	1400	-	-	-	-	-	-	1,500	-	-	1110	-	-	-
12	EMULSIFACTS GEL PER CANE	-	-	-	-	-	-	-	1,400	1,350	-	1327	-	-	-
13	EMULSIFACTS SOLID PER BOTTLE	-	-	-	-	-	-	-	300	350	-	220	-	-	-
14	BETTER ALCOHOL PER CANE	-	-	-	-	-	-	-	1,600	1,800	-	1525	-	-	-

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DIREKTOR
Institute of Skin Diseases Sindh
KARACHI.

Handwritten signature
Dr. Khalim Ahmed Shaikh
 Senior Medical Officer
 Institute of Skin Diseases Sindh
 Karachi

Handwritten signature
Dr. Qunwar Iqbal Chandio
 Senior Medical Officer
 Institute of Skin Diseases Sindh
 Karachi

Handwritten signature
Dr. Qunwar Iqbal Chandio
 Senior Medical Officer
 Institute of Skin Diseases Sindh
 Karachi

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.
DRUGS/MEDICINES AS PER REQUIREMENT FOR THE YEAR 2012-2013
AS PER REQUIREMENT
LIST OF THE INJECTION

S.NO	PARTICULARS	CITY TRADERS	PAVED TRADERS	HAJA TRADERS	MAJIDI INTL	POPULAR INTL	Y.M.Z TRADERS	SEKHS ENTERPRISE	PAKIDIC TRADERS	MEDITECH INTL	ROYAL INTL	RZ SERVICES	KARLA FORT	SUMASK CO.	MEDITECH INTL
1	INJECTIONS PENICILLIN G.C PER EACH	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2	INJECTIONS PENICILLIN G.LAC PER EACH	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3	INJECTIONS AMIC 2% 10 ML AMP PER 100 AMP	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4	INJECTIONS AMIC WITH ADRENALINE 100 ML AMP PER 100 AMP	-	-	-	-	-	-	-	-	-	-	-	-	-	-
5	INJECTIONS ONTINE 1500 MG PER AMP	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6	INJECTIONS AMIC 2% 10 ML AMP PER 100 AMP	-	-	-	-	-	-	-	-	-	-	-	-	-	-
7	INJECTIONS AMIC WITH ADRENALINE 100 ML AMP PER 100 AMP	-	-	-	-	-	-	-	-	-	-	-	-	-	-
8	INJECTIONS AMIC 2% 10 ML AMP PER 100 AMP	-	-	-	-	-	-	-	-	-	-	-	-	-	-
9	INJECTIONS AMIC WITH ADRENALINE 100 ML AMP PER 100 AMP	-	-	-	-	-	-	-	-	-	-	-	-	-	-
10	INJECTIONS AMIC 2% 10 ML AMP PER 100 AMP	-	-	-	-	-	-	-	-	-	-	239.25	-	-	-

R. Rawal
Section Officer
(Medical Services)
Health Department
Governments of Sindh

[Signature]
DIRECTOR
Institute of Skin Diseases Sindh
KARACHI

[Signature]
Dr. Mansoor Hussain Memon
Chief Medical Officer
Institute of Skin Diseases Sindh
Karachi

[Signature]
Dr. SALIM AHMED SHAIKH
Senior Medical Officer
Institute of Skin Diseases Sindh
Karachi

[Signature]
Dr. Qamar Iqbal Chandio
Medical Officer
Institute of Skin Diseases
Sindh, Karachi

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI
DRUGS/MEDICINES AS PER REQUIREMENT FOR THE YEAR 2012-2013
LIST OF THE SYRINGE/LOTION/SUNDRIES/VASELINE AS PER REQUIREMENT

S NO	PARTICULARS	CITY TRADERS	JAMSHED TRADERS	HABA TRADERS	MAJUMI INTL	PORTUGAL INTL	VALEZ TRADERS	SONUS ENTERPRISES	PACIFIC TRADERS	MEDITECH PHARMA	ROYAL INTL	RZ SERVICES	CARE & CURE	SHANSA CO	MEDIC INTL
SYRINGES.															
1	DISPOSABLE SYRINGE 1 CC PER 100 NO	-	-	429	-	-	-	-	-	-	-	420.50	-	418	-
2	DISPOSABLE SYRINGE 3 CC PER 100 NO	-	-	449	-	-	-	-	-	-	-	435.00	-	423.00	-
3	INSULINE SYRINGE PER 100 NO	-	-	490	-	-	-	-	-	-	-	625.50	-	-	-
4	DISPOSABLE SYRINGE 10 CC PER 100 NO	-	-	675	-	-	-	-	-	-	-	696.00	-	786.00	-
LOTION															
1	BENZYL BENZOATE EMULSION 20 ML PER BOTTLE	-	-	-	76.9	-	-	-	-	76.00	75.00	-	-	-	-
2	TRISMETHRIN 4% LOTION PER BOTTLE	-	63.24	-	-	-	-	43.50	-	-	60.00	-	-	-	-
VASELINE															
1	WHITE PETROLIUM JELLY 175 KG DRUM PER KG	-	-	-	189.98	-	-	-	185.00	187.00	-	-	-	-	-
SUNDRIES															
1	BANDAGE 15 CM 1000Z	-	-	-	-	-	-	-	300.00	-	-	174.00	-	311.00	-
2	BANDAGE 3 CM 1000Z	-	-	-	-	-	-	-	100.00	-	-	58.00	-	103.70	-
3	ADHESIVE PLASTER 1000Z	-	-	-	-	-	-	-	250.00	-	-	43.50	-	490.00	-
4	COTTON WOOL PKG	-	-	-	-	-	-	-	250.00	-	-	203.00	-	180.00	-

(Signature)
 Director
 Institute of Skin Diseases
 Government of Sindh

DIRBETOR
 Institute of Skin Diseases Sindh
 KARACHI

(Signature)
 Dr. Mansoor Hussain Memon
 Chief Medical Officer
 Institute of Skin Diseases Sindh
 Karachi

(Signature)
 Dr. KALIM AHMED SHAIKH
 Senior Medical Officer
 Institute of Skin Diseases Sindh
 Karachi

(Signature)
 Dr. Qasim Iqbal Chaudhri
 Medical Officer
 Institute of Skin Diseases
 Sindh, Karachi

**OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.
LABORATORY ITEMS AS PER REQUIREMENT FOR THE YEAR 2012-2013.**

SNO	PARTICULARS	CITY	QUANT	UNIT	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE	ESTIMATED PRICE
1	CATIONIC DETERGENT WITH STYRAMIDE CRYMOL				3000					7.500								
2	GLYCEROL GERMICIDE WITH STYRAMIDE CRYMOL				1000					4.000								
3	NON ACRYL GERMICIDE WITH STYRAMIDE CRYMOL				1000					4.200								
4	NON ACRYL GERMICIDE WITH STYRAMIDE CRYMOL				5000					5.500								
5	ANTISEPTIC SOAP				1180					2.500								
6	ANTISEPTIC SOAP				1284					3.000								
7	ANTISEPTIC SOAP				1000					2.000								
8	ANTISEPTIC SOAP				8000					9.000								
9	ANTISEPTIC SOAP				1000					3.500								
10	ANTISEPTIC SOAP				8000					8.500								
11	ANTISEPTIC SOAP				2100					2.300								
12	ANTISEPTIC SOAP				9500					10.000								
13	ANTISEPTIC SOAP				1100					3.300								
14	ANTISEPTIC SOAP				2000					3.000								
15	ANTISEPTIC SOAP				5000					4.000								
16	ANTISEPTIC SOAP				3500					16.000								
17	ANTISEPTIC SOAP				3300					10.000								
18	ANTISEPTIC SOAP				37500					40.000								
19	ANTISEPTIC SOAP				15000					18.000								
20	ANTISEPTIC SOAP				15000					40.000								
21	ANTISEPTIC SOAP				55000					40.000								
22	ANTISEPTIC SOAP				750					9000								
23	ANTISEPTIC SOAP				5500					9000								
24	ANTISEPTIC SOAP				5500					9000								
25	ANTISEPTIC SOAP				36600					5500								
26	ANTISEPTIC SOAP				2900					1500								
27	ANTISEPTIC SOAP				4000					1500								

Director
Institute of Skin Diseases Sindh
Karachi

DR. KALIM AHMED SHAIKH
Senior Medical Officer
Institute of Skin Diseases Sindh
Karachi

DR. QUADIR IQBAL CHANDIO
Medical Officer
Institute of Skin Diseases Sindh
Karachi

DR. QUADIR IQBAL CHANDIO
Medical Officer
Institute of Skin Diseases Sindh
Karachi

DR. QUADIR IQBAL CHANDIO
Medical Officer
Institute of Skin Diseases Sindh
Karachi

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.
LABORATORY CHARGES AS PER REQUIREMENT FOR THE YEAR 2012-2013

S.No	PARTICULARS	QTY	UNIT	PRICE	TOTAL	REMARKS	QTY	UNIT	PRICE	TOTAL	REMARKS
1	QUINACRINE 5% W/W	-	-	-	-	-	-	-	-	-	-
2	HYDROXY ACETONE	-	-	-	-	-	-	-	-	-	-
3	FORMALIN 40% W/W	-	-	-	-	-	-	-	-	-	-
4	FORMALIN 10% W/W	-	-	-	-	-	-	-	-	-	-
5	FORMALIN 5% W/W	-	-	-	-	-	-	-	-	-	-
6	FORMALIN 2% W/W	-	-	-	-	-	-	-	-	-	-
7	FORMALIN 1% W/W	-	-	-	-	-	-	-	-	-	-
8	FORMALIN 0.5% W/W	-	-	-	-	-	-	-	-	-	-
9	FORMALIN 0.2% W/W	-	-	-	-	-	-	-	-	-	-
10	FORMALIN 0.1% W/W	-	-	-	-	-	-	-	-	-	-
11	FORMALIN 0.05% W/W	-	-	-	-	-	-	-	-	-	-
12	FORMALIN 0.02% W/W	-	-	-	-	-	-	-	-	-	-
13	FORMALIN 0.01% W/W	-	-	-	-	-	-	-	-	-	-
14	FORMALIN 0.005% W/W	-	-	-	-	-	-	-	-	-	-
15	FORMALIN 0.002% W/W	-	-	-	-	-	-	-	-	-	-
16	FORMALIN 0.001% W/W	-	-	-	-	-	-	-	-	-	-
17	FORMALIN 0.0005% W/W	-	-	-	-	-	-	-	-	-	-
18	FORMALIN 0.0002% W/W	-	-	-	-	-	-	-	-	-	-
19	FORMALIN 0.0001% W/W	-	-	-	-	-	-	-	-	-	-
20	FORMALIN 0.00005% W/W	-	-	-	-	-	-	-	-	-	-
21	FORMALIN 0.00002% W/W	-	-	-	-	-	-	-	-	-	-
22	FORMALIN 0.00001% W/W	-	-	-	-	-	-	-	-	-	-
23	FORMALIN 0.000005% W/W	-	-	-	-	-	-	-	-	-	-
24	FORMALIN 0.000002% W/W	-	-	-	-	-	-	-	-	-	-
25	FORMALIN 0.000001% W/W	-	-	-	-	-	-	-	-	-	-
26	FORMALIN 0.0000005% W/W	-	-	-	-	-	-	-	-	-	-
27	FORMALIN 0.0000002% W/W	-	-	-	-	-	-	-	-	-	-
28	FORMALIN 0.0000001% W/W	-	-	-	-	-	-	-	-	-	-
29	FORMALIN 0.00000005% W/W	-	-	-	-	-	-	-	-	-	-
30	FORMALIN 0.00000002% W/W	-	-	-	-	-	-	-	-	-	-
31	FORMALIN 0.00000001% W/W	-	-	-	-	-	-	-	-	-	-
32	FORMALIN 0.000000005% W/W	-	-	-	-	-	-	-	-	-	-
33	FORMALIN 0.000000002% W/W	-	-	-	-	-	-	-	-	-	-
34	FORMALIN 0.000000001% W/W	-	-	-	-	-	-	-	-	-	-
35	FORMALIN 0.0000000005% W/W	-	-	-	-	-	-	-	-	-	-
36	FORMALIN 0.0000000002% W/W	-	-	-	-	-	-	-	-	-	-
37	FORMALIN 0.0000000001% W/W	-	-	-	-	-	-	-	-	-	-
38	FORMALIN 0.00000000005% W/W	-	-	-	-	-	-	-	-	-	-
39	FORMALIN 0.00000000002% W/W	-	-	-	-	-	-	-	-	-	-
40	FORMALIN 0.00000000001% W/W	-	-	-	-	-	-	-	-	-	-
41	FORMALIN 0.000000000005% W/W	-	-	-	-	-	-	-	-	-	-
42	FORMALIN 0.000000000002% W/W	-	-	-	-	-	-	-	-	-	-
43	FORMALIN 0.000000000001% W/W	-	-	-	-	-	-	-	-	-	-
44	FORMALIN 0.0000000000005% W/W	-	-	-	-	-	-	-	-	-	-
45	FORMALIN 0.0000000000002% W/W	-	-	-	-	-	-	-	-	-	-
46	FORMALIN 0.0000000000001% W/W	-	-	-	-	-	-	-	-	-	-
47	FORMALIN 0.00000000000005% W/W	-	-	-	-	-	-	-	-	-	-
48	FORMALIN 0.00000000000002% W/W	-	-	-	-	-	-	-	-	-	-
49	FORMALIN 0.00000000000001% W/W	-	-	-	-	-	-	-	-	-	-
50	FORMALIN 0.000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
51	FORMALIN 0.000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
52	FORMALIN 0.000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
53	FORMALIN 0.0000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
54	FORMALIN 0.0000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
55	FORMALIN 0.0000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
56	FORMALIN 0.00000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
57	FORMALIN 0.00000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
58	FORMALIN 0.00000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
59	FORMALIN 0.000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
60	FORMALIN 0.000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
61	FORMALIN 0.000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
62	FORMALIN 0.0000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
63	FORMALIN 0.0000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
64	FORMALIN 0.0000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
65	FORMALIN 0.00000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
66	FORMALIN 0.00000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
67	FORMALIN 0.00000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
68	FORMALIN 0.000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
69	FORMALIN 0.000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
70	FORMALIN 0.000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
71	FORMALIN 0.0000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
72	FORMALIN 0.0000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
73	FORMALIN 0.0000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
74	FORMALIN 0.00000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
75	FORMALIN 0.00000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
76	FORMALIN 0.00000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
77	FORMALIN 0.000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
78	FORMALIN 0.000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
79	FORMALIN 0.000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
80	FORMALIN 0.0000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
81	FORMALIN 0.0000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
82	FORMALIN 0.0000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
83	FORMALIN 0.00000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
84	FORMALIN 0.00000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
85	FORMALIN 0.00000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
86	FORMALIN 0.000000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
87	FORMALIN 0.000000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
88	FORMALIN 0.000000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
89	FORMALIN 0.0000000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
90	FORMALIN 0.0000000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
91	FORMALIN 0.0000000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
92	FORMALIN 0.00000000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
93	FORMALIN 0.00000000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
94	FORMALIN 0.00000000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
95	FORMALIN 0.000000000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
96	FORMALIN 0.000000000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
97	FORMALIN 0.000000000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-
98	FORMALIN 0.0000000000000000000000000000005% W/W	-	-	-	-	-	-	-	-	-	-
99	FORMALIN 0.0000000000000000000000000000002% W/W	-	-	-	-	-	-	-	-	-	-
100	FORMALIN 0.0000000000000000000000000000001% W/W	-	-	-	-	-	-	-	-	-	-

Section Officer (Medical Stores)
Health Department
Government of Sindh

DINBOTON
Institute of Skin Diseases Sindh
KARACHI

Director
Institute of Skin Diseases Sindh
Karachi

DR. KALIM AHMED SHAIKH
Senior Medical Officer
Institute of Skin Diseases Sindh

Dr. Qamar Iqbal Chandio
Senior Medical Officer
Institute of Skin Diseases Sindh, Karachi


Bid Evaluation Report


- | | |
|-----------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. Name of procuring Agency: | Director Institute of Skin Diseases Sindh,
<u>Karachi</u> |
| 2. Tender Reference No: | <u>INF - KAY - 2796 (12)</u> |
| 3. Tender Description / Name of work/item: | <u>Diet .</u> |
| 4. Method of Procurement: | <u>Single Stage 2 Envelop Procedure</u> |
| 5. Tender Published: | <u>00119781 (2012-2013 Daily Jang, Aman & Moomal dated 28.06.2012.</u>
Print & Electronic Media (SPPRA ID No & News Papers name with dates). |
| 6. Total Bid documents sold: | <u>22</u> |
| 7. Total Bids Received: | <u>15</u> |
| 8. Technical Bid Opening date: if application) | <u>05.09.2012(Provide details in separate from)</u> |
| 9. No of Bid technically qualified (if applicable): | <u>14</u> |
| 10. Bid(s) Rejected: | <u>1</u> |
| 11. Financial Bid Opening date: | <u>12.09.2012 Bid Evaluation Report:</u> |

Kalim

S. No	Name of Firm or Bidder	Cost offered by the bidder	Ranking in terms of cost	Comparison with Estimated Cost	Reasons for acceptance / rejection	Remarks
1	2	3	4	5	6	7
COMPARATIVE STATEMENT ATTACHED						

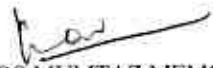

DR. MANZOOR H. MEMON
CHIEF MEDICAL OFFICER (B-19)
MEMBER


DR. KALIM AHMAD SHAIKH
SENIOR MEDICAL OFFICER (B-18)
MEMBER


DR. QAMAR IQBAL CHANDIO
SENIOR MEDICAL OFFICER (B-18)
MEMBER


MR. MUHAMMAD ANWAR KHOKHAR
SECTION OFFICER (PM&I)
GOVT. OF SINDH
HEALTH DEPARTMENT, KARACHI.
MEMBER

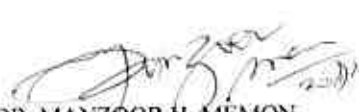
Section Officer
(Medical Stores)
Health Department
Government of Sindh



DR. MRS MUMTAZ MEMON
CHAIRMAN / DIRECTOR
INSTITUTE OF SKIN DISEASES
SINDH KARACHI


Bid Evaluation Report

1. Name of procuring Agency: Director Institute of Skin Diseases Sindh, Karachi
2. Tender Reference No: INF – KAY – 2796 (12)
3. Tender Description / Name of work/item: General Items.
4. Method of Procurement: Single Stage 2 Envelop Procedure
5. Tender Published: 00119781 (2012-2013 Daily Jang, Aman & Moomal dated 28.06.2012.
Print & Electronic Media (SPPRA ID No & News Papers name with dates).
6. Total Bid documents sold: 22
7. Total Bids Received: 15
8. Technical Bid Opening date: if application) 05.09.2012(Provide details in separate from)
9. No of Bid technically qualified (if applicable): 14
10. Bid(s) Rejected: 1
11. Financial Bid Opening date: 12.09.2012 Bid Evaluation Report:

S. No	Name of Firm or Bidder	Cost offered by the bidder	Ranking in terms of cost	Comparison with Estimated Cost	Reasons for acceptance / rejection	Remarks
1	2	3	4	5	6	7
COMPARATIVE STATEMENT ATTACHED						



DR. MANZOOR H. MEMON
CHIEF MEDICAL OFFICER (B-19)
MEMBER


DR. KALIM AHMAD SHAIKH
SENIOR MEDICAL OFFICER (B-18)
MEMBER


DR. QAMAR IQBAL CHANDIO
SENIOR MEDICAL OFFICER (B-18)
MEMBER


MR. MUHAMMAD AWAR KHOKHAR
SECTION OFFICER (PM&I)
HEALTH DEPARTMENT, KARACHI.
MEMBER

Section Officer
(Medical Stores)
Health Department
Government of Sindh


DR. MRS MUMTAZ MEMON
CHAIRMAN / DIRECTOR
INSTITUTE OF SKIN DISEASES
SINDH KARACHI


MINUTES OF THE MEETING OF PURCHASE COMMITTEE TO FINALIZE THE
PURCHASE OF REQUIRED ITEMS OF MEDICINE /VASELINE /PETROLIUM
JELLY AND CHEMICAL FOR THE YEAR-2012-13.

A meeting of the Procurement Committee of this Institute Of Skin Diseases Sindh, Karachi was held on 12th September-2012 on the office of the Director, Institute Of Skin Diseases Sindh Karachi to evaluate the rates quoted by the Bidders for items mentioned in subjected noted above.


The Director, Dr. Mrs. Mumtaz Memon, presided the meeting that also attended by the Members of Procurement Committee.

That Fourteen (14) Bidders participated the meeting for the Tender of Medicines / Vaseline / Petroleum Jelly and Chemicals M/s. Pharmic Enterprises participated in Medicine Items dis qualified due to not submission of Technical Bids.

After examining the samples provided by the Bidders, the items list of the Annexure has approved and finalize the purchase committee on the basic of quality and on lowest also.



1. Dr. Manzoor Hussain Memon,
Chief Medical Officer (B-19)
Member


2. Dr. Qamar Iqbal Chandio,
Senior Medical Officer (B-18)
Member.


3. Dr. Kalim Ahmed Shaikh,
Senior Medical Officer (B-18)
Member


4. Mr. Mohammad Amver Khokhar,
Section Officer, (PM&I)
Member

Section Officer
(Medical Stores)
Health Department
Institute of Skin Diseases Sindh
Karachi


(DR. MRS. MUMTAZ MEMON)
DIRECTOR, / CHAIRMAN,
INSTITUTE OF SKIN DISEASES SINDH,
KARACHI.

Arif/-

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.
CATEGORY II, MISC. AS PER REQUIREMENT FOR THE YEAR 2012-2013.

LIST OF GENERAL ITEMS

S.NO	PARTICULARS	CITY TRADERS	JAWID TRADERS	BADA TRADERS	MAJAN INTL	POOR LAR INTL	SANT TRADERS	NETIS (SHEER) TRADERS	PACIFIC TRADERS	STREET II TRADERS	ROYAL INTL	K/2 SERVICES	CARI & CO	SHAMSA CO	MIRIC INTL
1	LIFE BODY SOAP	-	-	-	23	-	24	-	-	-	-	36	-	-	-
2	PIRENYL	-	-	-	110	-	140	-	-	-	-	114	-	-	-
3	ENERGY SAVERS	-	-	-	135	-	170	-	-	-	-	140	-	-	-
4	BILE 100 W	-	-	-	18	-	20	-	-	-	-	34	-	-	-
5	BILE 60 W PER EACH	-	-	-	18	-	20	-	-	-	-	34	-	-	-
6	BROODHARD	-	-	-	25	-	60	-	-	-	-	28	-	-	-
7	BROODHARD	-	-	-	30	-	60	-	-	-	-	32	-	-	-
8	TINS	-	-	-	100	-	120	-	-	-	-	110	-	-	-
9	CHONE 40 W	-	-	-	100	-	240	-	-	-	-	110	-	-	-
10	CHONE 20 W	-	-	-	110	-	240	-	-	-	-	120	-	-	-
11	NOF WHITE	-	-	-	160	-	180	-	-	-	-	180	-	-	-
12	BLACK SOAP (GONDRAV SOAP)	-	-	-	12	-	15	-	-	-	-	60	-	-	-
13	CAPTION PER EACH	-	-	-	18	-	20	-	-	-	-	160	-	-	-
14	DUSTY TROCK CLOTH EACH	-	-	-	18	-	20	-	-	-	-	24	-	-	-
15	DUSTY TROCK CLOTH EACH	-	-	-	17	-	18	-	-	-	-	22	-	-	-
16	TORCH PER EACH	-	-	-	135	-	140	-	-	-	-	280	-	-	-
17	ROOM SPRAY PER EACH 200 ML	-	-	-	125	-	130	-	-	-	-	160	-	-	-
18	MATCH FAIR & STICK PER EACH	-	-	-	1	-	1.5	-	-	-	-	1	-	-	-
19	STARTER PER EACH	-	-	-	12	-	15	-	-	-	-	245	-	-	-
20	SURE POWDER 500 GM PER PACKET	-	-	-	122	-	125	-	-	-	-	124	-	-	-
21	SOFA WASHING PER KG.	-	-	-	40	-	45	-	-	-	-	42	-	-	-
22	THIRT SOPA PER EACH	-	-	-	25	-	28	-	-	-	-	27	-	-	-
23	VAN POWDER 500 GRAM PER BOTTLE	-	-	-	30	-	32	-	-	-	-	38	-	-	-
24	TUBE LIGHT 40 W PER EACH	-	-	-	100	-	110	-	-	-	-	105	-	-	-
25	TUBE LIGHT 25 W PER EACH	-	-	-	85	-	90	-	-	-	-	90	-	-	-

Dr. Farooq
 Director
 Institute of Skin Diseases Sindh
 KARACHI.

Dr. Muzoor Hussain Memom
 Director
 Institute of Skin Diseases Sindh
 KARACHI.

Dr. Khalid Ahmed Shaikh
 Director
 Institute of Skin Diseases Sindh
 KARACHI.

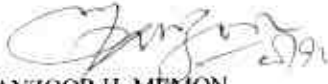
Dr. Qamar Iqbal Chandio
 Director
 Institute of Skin Diseases Sindh
 Karachi.

Bid Evaluation Report


1. Name of procuring Agency: Director Institute of Skin Diseases Sindh, Karachi
2. Tender Reference No: INF – KAY – 2796 (12)
3. Tender Description / Name of work/item: Linen & Liveries .
4. Method of Procurement: Single Stage 2 Envelop Procedure
5. Tender Published: 00119781 (2012-2013 Daily Jang, Aman & Moomal dated 28.06.2012.
Print & Electronic Media (SPPRA ID No & News Papers name with dates).
6. Total Bid documents sold: 22
7. Total Bids Received: 15
8. Technical Bid Opening date: if application) 05.09.2012(Provide details in separate from)
9. No of Bid technically qualified (if applicable): 14
10. Bid(s) Rejected: 1
11. Financial Bid Opening date: 12.09.2012 Bid Evaluation Report:


S. No	Name of Firm or Bidder	Cost offered by the bidder	Ranking in terms of cost	Comparison with Estimated Cost	Reasons for acceptance / rejection	Remarks
1	2	3	4	5	6	7
COMPARATIVE STATEMENT ATTACHED						

Kalim


DR. MANZOOR H. MEMON
CHIEF MEDICAL OFFICER (B-19)
MEMBER

Kalim
DR. KALIM AHMAD SHAIKH
SENIOR MEDICAL OFFICER (B-18)
MEMMBER


DR. QAMAR IQBAL CHANDIO
SENIOR MEDICAL OFFICER (B-18)
MEMBER

M. M. Khokhar

MR. MUHAMMAD NAWAZ KHOKHAR
SECTION OFFICER (PM&I)
HEALTH DEPARTMENT, KARACHI.
MEMBER

Section Officer
Medical Stores
Health Department
of Sindh

M. Mumtaz Memon
DR. MRS MUMTAZ MEMON
CHAIRMAN / DIRECTOR
INSTITUTE OF SKIN DISEASES
SINDH KARACHI

OFFICE OF THE DIRECTOR INSTITUTE OF SKIN DISEASES, SINDH, KARACHI.
CATEGORY III (CS) AS PER REQUIREMENT FOR THE YEAR 2012-2013
LIST OF LINEN AND LEAVIES

S NO	PARTICULARS	CITY TRADERS	LAYED TRADERS	BADA TRADERS	MAAMI INTL	POPULAR INTL	YALZ TRADERS	NEWEN ENTERPRISE	PAROIC TRADERS	HEBTECH PHARMA	ROYAL INTL	RZ SERVICES	CAJIA LIME	SHARSK CO	MEDIC INTL
1	APRON DOCTOR COAT	-	-	-	-	-	400	-	440.00	-	-	375	-	-	-
2	INDU SHEET (LATHA A ONE) 34-60"	-	-	-	-	-	140	-	350.00	-	-	345	-	-	-
3	BEDMATT	-	-	-	-	-	180	-	350.00	-	-	250	-	-	-
4	CURTAIN COLOUR	-	-	-	-	-	425	-	450.00	-	-	345	-	-	-
5	CAP FOR CHOWKIDAR	-	-	-	-	-	150	-	200.00	-	-	80	-	-	-
6	DRAWN SHEET LATHA 54-60"	-	-	-	-	-	90	-	250.00	-	-	250	-	-	-
7	PULLOW COAT 24-45"	-	-	-	-	-	80	-	400.00	-	-	380	-	-	-
8	PULLOW COVER LATHA A ONE	-	-	-	-	-	55	-	150.00	-	-	110	-	-	-
9	SUNSHORN CLOTH LINEN	-	-	-	-	-	70	-	180.00	-	-	160	-	-	-
10	COVER BIC SIZE 40-20"	-	-	-	-	-	180	-	200.00	-	-	160	-	-	-

[Signature]
Section Officer
(Medical Stores)
Health Department
Government of Sindh.

[Signature]
HYRBOTON
Institute of Skin Diseases Sindh
KARACHI

[Signature]
Dr. Nazim Hussain Memon
Chief Medical Officer
Institute of Skin Diseases Sindh
Karachi

[Signature]
Dr. TALIM AHMED SHAIKH
Senior Medical Officer
Institute of Skin Diseases Sindh
Karachi

[Signature]
Dr. Qamar Iqbal Chandio
Senior Medical Officer
Institute of Skin Diseases
Sindh, Karachi