Annexure B

SBB ACCIDENT EMERGENCY & TRAUMA CENTRE

SCHEDULE FOR PRINTING ARTICLES # 3

Sr. #.	Description	Units	Qty	Rate (Rs.)	Amount (Rs.)
1	**Referral form** 72gm Paper High Finish, 1 Color F/B Printing	Nos.	2,500	1.90/=	4,750/=
2	**Pre Operative Patients Checklist Form** 72gm Paper High Finish, 1 Color Printing	Nos.	5,000	1.90/=	9,500/=
3	**O.T Surgical Safety Checklist** 72gm Paper High Finish, 1 Color Printing	Nos.	5,000	1.90/=	9,500/=
4	**Pre-Anaesthesia Assessment Record** 72gm Paper High Finish, 1 Color F/B Printing	Nos.	5,000	1.90/=	9,500/=
5	**Anaesthesia Record Chart** NCR/ Carbonless Pad 1 Color Printing	Nos.	100	385/=	38,500/=
6	**Post Anaesthesia Recovery Monitoring Form** 72gm Paper High Finish, 1 Color F/B Printing	Nos.	5,000	1.90/=	9,500/=
7	**Operative Notes** 72gm Paper High Finish, 1 Color F/B Printing	Nos.	5,000	1.90/=	9,500/=
8	**Stock Register** 62gm Local Paper, 1000 pages 1 Color F/B Printing	Nos.	200	1,150/=	230,000/=
9	**I.C.U Sheet** Size 18x23, 72gm Paper High Finish, 2 Color F/B Printing	Nos.	5,000	RS. 21/= 21/=	105,000/=
10	**Medicine Consumption Statement** 72gm Paper High Finish, 1 Color F/b Printing	Nos.	10,000	1.90/=	19,000/=
11	**Letter Head** Imported Manager Paper 2 Color Printing	Nos.	5,000	RS. 6/= 6	30,000/=

BLUE BELL COMPANY BBC

Sr. #.	Description	Units	Qty	Rate (Rs.)	Amount (Rs.)
12	**Envelope** Size 4x9, 70gm Paper High Finish, 2 Color Printing Complete Making Indonesia or Equivalent	Nos.	5,000	Rs 2/-	10,000/-
13	**Emergency Sheet** Continuation Paper 1000 Leaf per Box	Nos.	100,000	2.30/-	230,000/-
14	**Sticker Sheet** Alphabets & Numbers	Nos.	1,200	Rs 11/-	13,200/-
15	**Recovery Room Data Register** 62gm Local Paper, 400 pages, 1 Color F/B Printing	Nos.	20	1,400/-	28,000/-

Note: The said items will be procured on best quality / approved sample basis.

755,950/-

SIGNATURE OF CONTRACTOR: _____

SUPPLIER: Rameez Ahmed Baig

NAME OF FIRM ADDRESS: Blue Bell Company

Plot # 418, St # 6 Sector-B, Akhtar Colony. Karachi

TELEPHONE NO: 0335-2835680-0322-2430406

CELL # _____