

BID EVALUATION REPORT FOR THE YEAR 2011-12

1. Name of Procuring Agency: EXECUTIVE DISTRICT OFFICER (HEALTH) DISTRICT
MATIARI.
2. Tender Reference No: EDO (H) MAT/Store/112/16 Dated 10-01-2012
3. Tender Description: Purchase of Medicines /Drugs/ Surgical Sundries/ Disposable/
Laboratory/ X-Ray Films & Chemicals.
4. Method of Procurement: Two Envelopes
5. Tender Published: (I) Daly Ibrat dated 15-01-2012, (II) Daly Awami Aawaz
Dated 14-01-2012 SPPRA Serial # 10801 Dated 14-01-2012
6. Total Bid Documents Sold: _____
7. Total Bid Received: 15 (Fifteen) only
8. Technical Bids opening date: 15-02-2012
9. No of Bid Technically qualified: 15 (Fifteen) only
10. Bids Rejected: -----
11. Financial Bid Opening date: 20-02-2012
12. Bid Evaluation Report: Comparative Statement also attached.

Sr. No	Name of Firm or Bidder	Cost offered by the Bidder	Ranking in terms of cost	Comparison with Estimated cost	Reasons for Acceptance/ Rejection	Remark
01						


EXECUTIVE DISTRICT OFFICER,
HEALTH MATIARI.

**COMPARATIVE STATEMENT FOR
DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS
ITEMS 2011-12**

OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

S#	A/U	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Implrall Traders	Zam Trading	A To Zee	Life Line Trading	Macquins INTERNATIONAL	Gracc Pharma	LOWEST
1	Tab	Aluminum+Mag+other Compounds strip/blister pack	100000	0.75						0.72							0.72
2	Tab	Ascorbic Acid 500mg Bottle/strip/blister pack	25000	1.85													1.85
3	Tab	Asprin Soluble 75mg blister pack (Soluble)	2500														0.00
4	Tab	Atenolol 50mg Strip Pack	5000				2.50	1.90		2.50		1.10		1.15			1.10
5	Tab	Atenolol 25mg Strip Pack	5000							2.40							2.40
6	Tab	Vitamine-k 100mg strip/blister pack	25000											0.69			0.69
7	Tab	B-Complex Sugar Coated Strip/Blister Pack	50000							1.50							1.50
8	Tab	Bromazepam 3 mg Strip/Blister Pack	5000							1.50				1.65			1.50
9	Tab	Salbutamol 4mg Strip/Blister pack	50000						0.33	0.30				0.32			0.30
10	Tab	Cetizine 10mg Strip/Blister Pack	5000					1.60		0.48		0.79		0.49			0.48
11	Tab	Chloroquin Phosphate 250mg Stip/Blister Pack	15000							0.95				1.00			0.95
12	Tab	Amlodopin 5mg Strip/Blister pack	10000				5.00	1.20	2.00			1.10					1.10
13	Tab	Ciprofloxacin 250 mg Strip/Blister Pack	2000				18.00	4.00			2.15	2.19					2.15
14	Tab	Ranitidine 150mg Strip/Blister pack	10000					2.35		1.90		1.95					1.90
15	Tab	Dexamethason strip/blister pack	25000							0.23				0.24			0.23


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16	Tab	Diazepam 5mg. strip/blister pack	10000														0.00
17	Tab	Diclofenac Sodium 50mg Strip / Blister Pack	50000				3.20	1.00	0.40		0.39	0.65		0.49			0.39
18	Tab	Vitamine-c 100mg strip/blister pack	50000									0.35					0.35
19	Tab	Diltiazem 30mg Strip / Blister Pack	5000						1.30								1.30
20	Tab	Dimenhydrinate Strip / Blister Pack	5000											0.69			0.69
21	Tab	Erythromycin 250mg Strip/Blister Pack	5000							5.00				5.10			5.00
22	Tab	Erythromycin 500mg Strip/Blister Pack:	5000							10.00							10.00
23	Tab	Femotidine 20mg Strip / Blister Pack	10000					1.20		0.78		0.80					0.78
24	Tab	Folic acid 5mg line/Bottle of 1000 tabs	50000						0.05	0.06		0.11	0.15				0.058
25	Tab	Furacemide 40mg/Blister Pack	5000											0.68			0.68
26	Tab	Glibenclamide 5mg Strip/Blister Pack	20000								0.35			0.37			0.35
27	Tab	Glimepiride 1mg Blister pack	2000					1.00			0.95						0.95
28	Tab	Ibuprofen 200mg Strip/Blister pack	25000							0.58		0.60		0.64			0.58
29	Tab	Ibuprofen 400mg Strip/Blister pack	25000							0.78		0.80		1.14			0.78
30	Tab	Iso-sorbide Dinitrate 10mg Strip pack	10000								2.00						2.00






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31	Tab	Lanoxin 0.25mg	5000														0.00
32	Tab	Levofloxacin 250mg Strip/Bluster pack	10000			21.00	4.60				2.65	2.70		5.38			2.65
33	Tab	Levofloxacin 500mg Strip/Bluster pack	10000			35.00	7.90				4.25	4.30		6.99			4.25
34	Tab	Mefenamic Acid 250mg	50000				1.50			0.52		0.54		0.58			0.52
35	Tab	Metformin 500mg Strip/Bluster pack	10000								1.04		1.10				1.04
36	Tab	Methyl Dopa 250mg Strip/Bluster pack	5000									4.00					4.00
37	Tab	Metachlopramide 10mg Strip/Bluster pack	20000							0.38							0.38
38	Tab	Piroxicam 20mg Strip/Bluster pack	10000											0.39			0.39
39	Tab	Metronidazole 400mg Strip/Bluster pack	50000			14.00	2.80					0.90		0.59			0.59
40	Tab	Multivitamin Sugar Coated fin	50000			1.27	1.90				0.89	0.90		1.07			0.89
41	Tab	Naproxen 500mg Strip/Bluster pack	10000							2.00							2.00
42	Tab	Norfloxacih 400mg Strip/Bluster pack	5000								4.10	4.20		4.99			4.10
43	Tab	Ofloxacine 400mg Strip/ Bluster pack	10000								4.00	4.10		5.40			4.00
44	Tab	Cephalexin 500mg Strip/Blister Pack	8000			10.00						2.00	10.10				2.00
45	Tab	Paracetamol 500mg strip/blister pack	100000				0.65	0.42		0.40		0.55		0.62			0.40



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46	Tab	Pheneramine 20mg Strip/Bluster pack	100000						0.06			0.08					0.06
47	Tab	Phenobritone 30mg Strip/Bluster pack	20000				0.08										0.08
48	Tab	Cotramoxazole DSStrip/Bluster pack	100000				1.20			1.15		2.15		2.69	2.00		1.15
49	Tab	Cotramoxazole Strip/Bluster pack	100000									1.10		1.49			1.10
50	Syp	Paracetamole 250mg/5ml Bottle of 60ml	10000	16.00				21.00		11.50				14.91	12.00		11.50
51	Syp	Rifampicin 2% 100mg/5ml Bottle of 60ml	1000											38.95			38.95
52	Syp	Solubitamole 2mg/5ml Bottle of 60ml	5000	14.00					9.50	10.50		11.00		12.15			9.50
53	Syp	Sodium Acid Citrate 120ml	5000	16.00					11.50	11.25		13.00		12.85			11.25
54	Syp	Vitamin B Complex 120ml	10000	16.00					17.50	10.20		13.00		10.23			10.20
55	Syp	Albendazole 100mg/5ml Botel of 30ml	5000									11.00		14.40			11.00
56	Syp	Aluminum+Mag+other Compounds Bottle of 120ml	10000	18.00					10.60	12.00				15.92			10.60
57	Syp	Ammonium Chloride 60ml	10000	11.80					17.50	10.85		14.00		10.99			10.85
58	Syp	Theophyllin 120ml	5000	18.00							29.00	23.99					18.00
59	Syp	Amoxicillin 125mg/5ml Bottle of 60ml	10000							26.00				26.15			26.00
60	Syp	Ampicillin 125mg/5ml	5000							26.00		22.00		26.15			22.00
61	Syp	Ampicillin 250mg/5ml	5000							36.50				36.92			36.50
62	Syp	Cephradin 125mg/5ml	5000	32.00							31.00			35.38	38.00		31.00





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63	Syp	Cephtradin 250mg/5ml	5000	48.00							44.00	44.50		59.46			44.00
64	Syp	Cotrimoxazole	50000	14.80					11.20	11.00				13.86			11.00
65	Syp	Cotrimoxazole DS	25000	21.00										20.76	18.00		18.00
66	Syp	Chloroquin 50mg/5ml Bottle of 60ml	5000							13.50		14.00					13.50
67	Syp	Chloropheniramine 60ml	5000	11.00					16.95	10.80		11.00		11.64			10.80
68	Syp	Erythromycine Bottle of 60ml	10000							39.00				39.90			39.00
69	Syp	Fosfomycin 250mg/60ml	5000	58.00						84.00				79.90			58.00
70	Syp	Mefenamic Acid 60ml	10000	10.49						10.50		11.00		12.70			8.50
71	Syp	Meltronidazole 200mg/5ml bottle of 60ml	20000	14.00					12.65	12.50				15.39			12.50
72	Syp	Multivitamin+Minerals Bottle of 120ml	10000	18.00					14.00	13.50							13.50
73	Inj	Ringers Lacted 1000ml	2000														13.50
74	Inj	Ringers Lacted 500ml	5000								55.00		89.90				55.00
75	Inj	Syntocinon	3000								55.00		86.90				55.00
76	Inj	Tranexamic Acid 250mg/5ml	2000								15.00	NOT APPROVED					15.00
77	Inj	Renitidin 50mg Amp of 2ml	5000											11.54			11.54
78	Inj	Vitamin K 10mg. Amp of 1ml	2000									4.00		4.15			4.00
79	Inj	0.45% Dextrose Saline 500ml	1500							3.50				3.90			3.50
80	Inj	A.T.S 1500 I/U Amp of 1.5ml	2000														55.00
81	Inj	Adernaline 1mg Amp of 1ml	1000			117.80											117.80
82	Inj	Salubitamole 1ml	2000								10.00						10.00
																	0.00






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83	Inj	Ampicillin 250mg Vial	15000							7.50							7.50
84	Inj	Ampicillin 500mg Vial	10000							7.90		8.00					7.90
85	Inj	Anti Rabies Vaccine 0.5ml , 1.0ml	2000								580.00		466.60				423.00
86	Inj	Atropin 1mg/ml Amp of 1ml	1000			423.00				8.00		2.00		2.70			2.00
87	Inj	B-Complex I/M /IV Amp of 2ml	10000							3.00		2.75					2.75
88	Inj	Blood Plasma Substitute Bottal of 500ml With giving set	500										275.00				275.00
89	Inj	Cefotaxime Sodium 1g	2500					58.00			29.00	29.50	34.65		34.00		29.00
90	Inj	Cefotaxime Sodium 500mg	2000								23.50	24.00	23.95		26.00		23.50
91	Inj	Cefotaxime Sodium 250mg	2000								21.00	19.00	21.95		22.00		19.00
92	Inj	Ceftriaxone 1g	2500				195.00	58.00			29.50	30.00	36.10		34.00		29.50
93	Inj	Ceftriaxone 500mg	2000				85.00				24.50	25.00	24.95		25.00		24.50
94	Inj	Ceftriaxone 250mg	2000				119.00				22.00	20.00	22.95		22.00		20.00
95	Inj	Cefuroxime Sodium 250mg	2500					38.00				25.00					25.00
96	Inj	Chloroquine 40mg/ Amp of 5ml	15000							10.00							10.00
97	Inj	Chlorophenramin Maleate 10mg/Aml of 2ml	10000							2.95		3.00					2.95
98	Inj	Cimitidine 200mg. Amp of 2ml I M /IV	3000									5.00		4.70			4.70
99	Inj	Dexamithasone Amp of 1ml	25000					5.20		4.50				4.70			4.50
100	Inj	10% Dextrose Water 1000ml	2000														55.00
101	Inj	5% Dextrose Water 1000ml	2000														45.00
102	Inj	5% Dextrose Saline 1000ml	2000														45.00



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103	Inj	Diazepam 5mg/2ml	1000											5.10			5.10
104	Inj	Diclofenac Sodium 75mg/3ml	20000					5.80			2.20	2.90		3.95	2.30		2.20
105	Inj	Dimenhydrinate 50mg/ml	5000											3.25			3.25
106	Inj	Distil Water 5ml	20000				5.00				2.00	2.10			2.10		2.00
107	Inj	Dortavirin 40mg /2ml	2500								12.00	6.50		9.95			6.50
108	Inj	Furasemide IM/IV 20mg Amp of 2ml	3000							3.50		3.00		3.25			3.00
109	Inj	Gentamycin 80mg. Amp/Vial of 2ml	25000				14.00			3.10		3.15		5.54			3.10
110	Inj	Humulin Insulin 70/30 Vial of 10ml	200										389.90				389.90
111	Inj	Humulin Insulin Regular Vial of 10ml	200										389.90				389.90
112	Inj	0.9% Normal Salin 1000ml	1000								45.00		49.90				45.00
113	Inj	Hydrocortisone Sodium 250mg With Solvent	2000						110.00				95.85				95.85
114	Inj	Hydrocortisone Sodium 100mg With Solvent	1000						65.00				53.85				53.85
115	Inj	Lignocaine 2% Solution Amp of 10ml	2000							10.00				10.75			10.00
116	Inj	Lignocaine 2% With Adrenalin Amp of 10ml	1000							10.00		15.00		10.95			10.00
117	Inj	Licomycin 600mg. Vial/Amp 1ml	5000							8.90					9.00		8.90
118	Inj	Methergin 2ml	1000														0.00
119	Inj	Metachlopramide 10mg/2ml Amp I.M/I.V	5000							2.60				2.70			2.60





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120	Inj	Metronidazol 500mg / 100ml	5000							28.00				28.95			28.00
121		Disposable Syringe 5cc	25000			4.16				4.10			4.35			4.25	4.10
122		Disposable Syringe 3cc	25000			4.14				4.10			4.24			4.20	4.10
123		Hydrogen Per Oxide Solution. Bottle of 120ml	1000							22.00							22.00
124		Intra Ocular Lens	500										689.90				689.90
125		Dialyzer Solution	50								350.00		365.00				350.00
126		Dialyzer with Set	200								1250.00		1295.00				1250.00
127	Cream	Betamithason + Neomycin. Tub of 15 gms	1000								26.00		26.95				26.00
128	Cap	Amoxicillin 250mg Strip/Bluster pack	20000					3.20		2.00		2.10		2.54			2.00
129	Cap	Amoxicillin 500mg Strip/Bluster pack	10000	5.80				4.80		3.25		3.40		4.07			3.25
130	Cap	Ampicillin 500mg Strip/Bluster pack	10000							3.25		3.40		4.07			3.25
131	Cap	Ampicillin 250mg Strip/Bluster pack	20000							2.00		2.10		2.54			2.00
132	Cap	Cephadrine 500mg Strip/Bluster pack	10000	6.80				9.50	7.00		6.25	6.50		8.45	8.00		6.25
133	Cap	Cephadrine 250mg Strip/Bluster pack	20000						5.60		4.50	4.00			4.90		4.00
134	Cap	Doxycycline 100mg Strip/Bluster pack	20000					2.20		1.15		1.25		1.34			1.15
135	Cap	Indomithacine 25mg Tin of 1000	25000							0.90				0.92			0.90



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136	Cap	Lincomycin 500mg Strip/Bluster pack	10000	8.84						7.00		5.90			6.00		5.90
137	Cap	Omeprazole 20mg Strip/Bluster pack	10000					2.76			1.35	1.80		1.36			1.35
138	Cap	Oxytetracycline 250mg	50000							0.89		0.90					0.89
139	Cap	Piroxicam 20mg Strip/Bluster pack	5000									0.99		0.59			0.59
140	Cap	Tranexamic Acid 250mg Strip/Bluster pack	10000											5.35			5.35
141	Drops	Tobramycin 0.3% Eye Drops	2000								59.00						59.00
142	Drops	Chloromphenical Eye / Ear	2000						7.80	7.50		9.10					7.50
143	Drops	Gentamycin Eye / Ear Drops	5000						7.85	12.00		14.00					7.85
144	Cream	Sulpher	5000														0.00
145	Gel	Xylocaine Gel	300											17.85			17.85
146	Lotion	Benzyl Benzovit Lotion 25% Bottal of 60ml	1000	15.00						19.00		14.00		19.85			14.00
147		Neomycin Skin Ointment	3000							25.00							25.00
148		Polymyxin B Eye Ointment	2000														0.00
149	Powder	Neomycin Powder	2000									12.00					12.00
150	Soln	Providon Iodin 7.5 % (Solution) Bottle of 450ml	250							175.00				189.00			175.00





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151	Tinct	Tr. Benzain Co Bottle of 450ml	150						110.00	135.00				189.00			110.00
152	Tinct	Tr. Iodin. Bottle of 450ml	150						140.00	135.00				189.00			135.00
153		Adhesive Plaster 4"	1000							160.00			169.90				160.00
154		Blood Collecting Bag With Giving Set Bag of 500ml	200							185.00			189.90				185.00
155		Clove Oil	100										1095.00				1095.00
156		Cotton Roll 500gm	1000							150.00				159.00			150.00
157		Crep Bendegé 6"	200							75.00							75.00
158		Block Needles Box of 100 each	50											495.00			495.00
159		LA Needles Box of 100 each	50											495.00			495.00
160		Serium Anti- A Vial of 10ml	25							275.00			260.00				260.00
161		Serium Anti- B Vial of 10ml	25							275.00			260.00				260.00
162		Serium Anti- D Vial of 10ml	25							275.00			260.00				275.00
163		I.V Giving Set	10000							11.00			11.50				11.00
164		I.V Canulla With Stoper 20,22,24 No	5000							35.00			36.92				35.00
165		ORS (Oral Rehydration Salt)	5000											5.10			5.10
166		Paper Plaster	300							23.00			24.20				23.00
167		Plaster of Paris 15cm x 2.7 metre	200							450.00							450.00
168		Scabiol Lotion	1000							55.00							55.00
169		Silk Thread In Dozens	100							35.00			38.00				35.00



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170		Surgical Bendeges 10cm x 5meter	5000						8.80	6.50				6.70			6.50
171		Surgical Bendeges 15cm x 5meter	5000						9.75	9.50				9.95			9.50
172		Xylestine S Cartridges with Adermaline Tin of 50 cartridges	50											1695.00			1695.00
173		Xylestine S Cartridges without Adermaline Tin of 50 cartridges	50											1695.00			1695.00
174		X-RAY DEVELOPER	50		770.00												700.00
175		X-RAY FIXER	50		770.00												700.00
176		X-RAY FILM SIZE 12 X 15	500		98.00												95.00
177		X-RAY FILM SIZE 10 X 12	500		64.00												63.00
178		X-RAY FILM SIZE 08 X 10	500		43.75												43.00
179		ULTRASOUND GEL	50														1100.00


 DISTRICT OFFICER HEALTH ADMIN & ACCOUNTS)
 (MEMBER)


 REPRESENTATIVE OF DAO MATIARI
 (MEMBER)


 DDO HEALTH (PROCUREMENT)
 (MEMBER)


 EDO HEALTH MATIARI
 (CHAIRMAN)



MCH

To,

RTJ ENTERPRISES
 HYDERABAD.

Subject: **Supply of medicines through local Purchase (Other Miscellaneous Head) for the year 2011-12.**

As per approved and Agreed rates received through Quotations from your Company for Local Purchase. The Supply Order of following items of drugs/ medicine for the year 2011-12 is hereby placed herewith. In this regards your are directed to please supply the following medicines and submit three copies of bill

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
1	INJ	Syntocinon	53	1500	15000.00
2	INJ	Metronidazole 100ml	49	1000	45000.00
3	Misc	I/V Cannula All Size	118	1000	55000.00
4	Misc	Cord Clamp	05	500	28000.00
5	Misc	Surgical Blade	297	1000	8000.00
6	INJ	Tranexamic Acid	200	1000	25000.00
7	CAP	Tranexamic Acid 250mg	300	1600	8000.00
8	Misc	Cotton Roll	300	100	20000.00
9	Misc	A.D Plaster	250	500	80000.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					270000.00

Period of delivery
 Place of delivery
 Dispatch Instruction
 Name and Address of consignee

30 days
 Store at E.D.O (H) MATIARI
 Free delivery to consignee
 E.D.O (Health) MATIARI

~~EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI~~



Caratic

OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
Phone No: 2760029, Fax: 2760096
Email: edoh_mat@yaboo.com

EDOH (MAT)/store/ 010 2012
DATED: 05-01-12

To:

RTJ ENTERPRISES
HYDERABAD.

Subject:- **Supply of medicines through local Purchase (Other Miscellaneous Head) for the year 2011-12.**

As per approved and Agreed rates received through Quotations from your Company for Local Purchase. The Supply Order of following items of drugs/ medicine for the year 2011-12 is hereby placed herewith. In this regards you are directed to please supply the following medicines and submit three copies of bill

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
1	Misc	ECG ROLL 103	200	150.00	30000.00
2	Misc	I/V Cannula All Sizes 118	1000	55.00	55000.00
3	INJ	Atropine Sulphate 107	2000	4.00	8000.00
4	TAB	Amlodipine 323	10000	8.00	80000.00
5	Misc	Disposable Syringe 5cc 110	5000	6.50	32500.00
6	Misc	Drip Set 114	2000	20.00	40000.00
7	INJ	Adernalin 269	1000	10.00	10000.00
8	TAB	Methyl Dopa 250mg 273	5000	3.00	15000.00
9	TAB	Ranitidine 150mg 335	3900	2.50	9750.00
10	TAB	Relaxin 3mg 328	2000	2.70	5400.00
11	TAB	Frusemide 343	2000	1.50	3000.00
12	TAB	Vitamin C Blister Pack 347	5000	1.10	5500.00
13	TAB	Lanoxin 0.25mg 329	5000	0.40	2000.00
14	TAB	Disprin Soluble 75mg Blister Pack 355	5000	0.75	3750.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					299900.00

Period of delivery
Place of delivery
Dispatch Instruction
Name and Address of consignee

30 days
Store at E.D.O (H) MATIARI
Free delivery to consignee
E.D.O (Health) MATIARI


EXECUTIVE DISTRICT OFFICER (HEALTH)
DISTRICT MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

NO.EDO(H)(MAT)/Store/- 012

Date: 05-01-2012

To,

The M/S LIFE LINE TRADING COMPANY
Hyderabad

SUBJECT: - SUPPLY OF MEDICINE THROUGH LOCAL PURCHASE(OTHER MISCELLANEOUS HEAD) FOR THE YEAR 2011-12

Your quoted rates for the following items have been approved for the purchase of Drug / Medicine for the Year 2011 - 2012 by the purchase committee. You are hereby directed to please supply the following Medicines.

S.#:	Description Of Items	Rate	Quantity Required	Amount
2	Iqj A R V(Rabio) <i>278</i>	-603.50	213	-128545.50

TOTAL Rs- 128545.50

Period of Delivery
Place of Delivery
Dispatch Instruction
Name & Address of Consignee

30 Days
Store @ EDO (H) Matari
Free Delivery to Consignee
EDQ (H) Matari

EXECUTIVE DISTRICT OFFICER,
HEALTH MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

NO.EDOH (MAT)/Store/013

Date: 05-01-2012

To,

The M/S A to Zee International
Hyderabad

SUBJECT:- SUPPLY OF MEDICINE.

Your quoted rates for the following items have been approved for the purchase of Drug / Medicine for the Year 2011 - 2012 by the purchase committee. You are hereby directed to please supply the following Medicines.

S.#:	Description Of Items	Rate	Quantity Required	Amount
1	Payodine S S	129.90	260	33774.00
2	Anti A 10ml	450.00	60	27000.00
3	Anti B 10ml	450.00	58	26100.00
4	Anti D 10ml	550.00	60	33000.00

TOTAL 119874.00

Period of Delivery
Place of Delivery
Dispatch Instruction
Name & Address of Consignee

30 Days
Store @ EDO (H) Matiari
Free Delivery to Consignee
EDO (H) Matiari

EXECUTIVE DISTRICT OFFICER,
HEALTH MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

NO.EDO (MAT)/Store/- 132

Date: 2/13/12

To,

The M/S Medi Mark Pharmaceuticals
Hyderabad

SUBJECT: - SUPPLY OF MEDICINE.

Your quoted rates for the following items have been approved for the purchase of Drug / Medicine for the Year 2011- 2012 by the purchase committee. You are hereby directed to please supply the following Medicines.

S.#:	Description Of Items	Rate	Quantity Required	Amount
1	Inj Amikacine Sulphate 500mg	240/ Vail	498	119520.00

TOTAL Rs- 119520.00

Period of Delivery
Place of Delivery
Dispatch Instruction
Name & Address of Consignee

30 Days
Store @ EDO (H) Matiari
Free Delivery to Consignee
EDO (H) Matiari


EXECUTIVE DISTRICT OFFICER,
HEALTH MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

NO.EDO(H)(MAT)/Store/- 132

Date: 21/3/12

To,

The M/S Medi Mark Pharmaceuticals
Hyderabad

SUBJECT: - SUPPLY OF MEDICINE.

Your quoted rates for the following items have been approved for the purchase of Drug / Medicine for the Year 2011- 2012 by the purchase committee. You are hereby directed to please supply the following Medicines.

S.#:	Description Of Items	Rate	Quantity Required	Amount
1	Inj Amikacine Sulphate 500mg <i>45</i>	240/ Vail <i>✓</i>	498	119520.00
TOTAL Rs-				119520.00

Period of Delivery
Place of Delivery
Dispatch Instruction
Name & Address of Consignee

30 Days
Store @ EDO (H) Matiari
Free Delivery to Consignee
EDO (H) Matiari

[Signature]
EXECUTIVE DISTRICT OFFICER,
HEALTH MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

NO.EDO(H)(MAT)/Store/- 135

Date: 22/03/2012

To,

The M/S R T J ENTERPRISES
Hyderabad

SUBJECT: - SUPPLY OF MEDICINE.

Your quoted rates for the following items have been approved for the purchase of Drug / Medicine for the Year 2011 – 2012 by the purchase committee. You are hereby directed to please supply the following Medicines.

S.#:	Description Of Items	Rate	Quantity Required	Amount
1	Tab Clopidogrel 75mg	8.90/ Tab	7800	69420.00
2	Tab Atrovastatin 10mg	8.42/ Tab	5600	47152.00
3	Tab Escitalopram 10mg	10.30/ Tab	7600	78280.00
TOTAL				194852.00

Period of Delivery
Place of Delivery
Dispatch Instruction
Name & Address of Consignee

30 Days
Store @ EDO (H) Matiari
Free Delivery to Consignee
EDO (H) Matiari


EXECUTIVE DISTRICT OFFICER,
HEALTH MATIARI.



OFFICE OF THE

EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI

Phone No. 2760029 Fax: 2760096

E-mail: doh_mari@yahoo.com

EDOH (MAT)/store/ **136** 2012

DATED: **27/8/12**

To,

RTJ ENTERPRISES
HYDERABAD.

Subject: **Supply of medicines for the year 2011-12.**

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT	
40. 45 48 50 74. 15 31. 23. 28 29 54. 37.7. 9. 10 11.1	TAB	Multivitamin Sugar Coated (Blister Pack)	388	76500	2.00	153000.00
2	TAB	Paracetamol (Blister Pack)	23	100000	0.40	40000.00
3	TAB	Cotrimaxazole (Blister Pack)	86	100000	1.15	115000.00
4	SYP	Paracetamol	58	10000	11.50	115000.00
5	TAB	Ranitidine 150mg (Blister Pack)	335	10000	1.90	19000.00
6	TAB	Dexamethasone (Blister Pack)	365	24000	0.23	5520.00
8	TAB	Erythromycin 250mg (Blister Pack)	373	10000	5.00	50000.00
9	TAB	Famotidine 20mg (Blister Pack)	377	20000	0.78	15600.00
10	TAB	Ibuprofen 200mg (Blister Pack)	73	50000	0.58	29000.00
11	TAB	Ibuprofen 400mg (Blister Pack)	351	50000	0.78	39060.00
12	TAB	Mefenamic Acid 250mg (Blister Pack)	137	100000	0.52	52000.00
13	TAB	Metoclopramide (Blister Pack)	385	20000	0.38	7600.00
14	TAB	B.Complex Sugar Coated (Blister Pack)	357	50000	1.50	75000.00
15	TAB	Salbutamol 4mg (Blister Pack)	361	50000	0.30	15000.00
16	TAB	Citruzine 10mg (Blister Pack)	34	25000	0.48	12000.00
17	TAB	Chloroquine 250mg (Blister Pack)	178	100000	0.95	95000.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
						0.00
GRANT TOTAL						837720.00

Period of delivery

30 days

Place of delivery

Store at E.D.O (H) MATIARI

Dispatch Instruction

Free delivery to consignee

Name and Address of consignee

E.D.O (Health) MATIARI

EXECUTIVE DISTRICT OFFICER (HEALTH)
DISTRICT MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
(HEALTH MATIARI)

Phone No. 2760029. Fax: 2760096

Email: edoh_mati@yahoo.com

EDOH (MAT)/store/ 144 2012

DATED: 24/3/12

To,

A to ZEE
HYDERABAD.

Subject - Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
1	INJ	Blood Plasma Substitute 500ml with Giving set <i>333</i>	400	275.00	110000.00
2		Intracalar Lense <i>353</i>	150	689.00	103350.00
3	INJ	Insullin Humulin 70/30 Vial 10ml <i>325</i>	294	389.90	114630.60
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
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					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					327980.60

28
124
110

Period of delivery	30 days
Place of delivery	Store at E.D.O (H) MATIARI
Dispatch Instruction	Free delivery to consignee
Name and Address of consignee	E.D.O (Health) MATIARI

[Signature]
EXECUTIVE DISTRICT OFFICER (HEALTH)
DISTRICT MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

(HEALTH) MATIARI

Phone No: 276029, Fax: 276030

Email: edo@karnataka.gov.in

EDOH (MATI) Store No. 152

DATE: 27-03-2012

TO,

The M/S Gains Enterprises
Hyderabad

SUBJECT: SUPPLY OF MEDICINES FOR THE YEAR 2011-2-12

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

Sr. No	DESCRIPTION ITEMS	RATE	QUANTITY REQUIRED	AMOUNT
01	Tab Diltiazem 30mg Strip/Blister Pack	1.30	10000	13000.00
02	Tab Phenramine 20mg Strip/Blister pack	0.06	116000	6960.00
03	Syp Solbutamol 2mg/5ml Bottle of 60ml	9.50	10000	95000.00
04	Syp Mefnamic Acid 60ml	8.50	20000	170000.00
	Total			284960.00

Period of delivery
Place of delivery
Dispatch Instruction
Name and Address of consignee

30 days
Store at E.D.O (H) MATIARI
Free delivery to consignee
E.D.O (Health) MATIARI


EXECUTIVE DISTRICT OFFICER (HEALTH)
DISTRICT MATIARI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
Phone No: 5649539 Fax: 768096
Email: edo_hm@nic.nic.in
CDDH(MAT)/store-163 7017
DATED: 3-4-12

Chittoor Urdogy.

To,

IMPERIAL TRADERS (INC.)
HYDERABAD.

Subject **Supply of medicines for the year 2011-12.**

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	AAI	DESCRIPTION	QTY	RATE	AMOUNT
1	IND	Heparin	105 138	650.00	89700.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					89700.00

Period of delivery: 30 days
 Place of delivery: Store at E.D.O (H) MATIARI
 Dispatch Instruction: Free delivery to consignee
 Name and Address of consignee: E.D.O (Health) MATIARI

(Signature)
 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI.



OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATHARI
 Phone No: 2760829, Fax: 2760096
 Email: edoh_mathari@yahoo.com
 EDOH(MATHARI)store/ 164 2012
 DATED: 3-4-12

Wrote

To,

IMPERIAL TRADERS (INC.)
 HYDERABAD.

Subject:- **Supply of medicines for the year 2011-12.**

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
1	Misc	Dialyzer with Set <i>167</i>	100	1250.00	125000.00
2	Misc	Dialyzer Solution <i>327</i>	100	350.00	35000.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
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					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					160000.00

Period of delivery: 30 days
 Place of delivery: Store at E.D.O (H) MATHARI
 Dispatch Instruction: Free delivery to consignee
 Name and Address of consignee: E.D.O (Health) MATHARI

EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATHARI



OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATIARI
 Phone No: 2768029 Fax: 2760896
 Email: edo_matari@karnataka.gov.in
 EDO(H)MATIARI/Store/ 170 2012
 DATED 4-4-2012

To:

A to ZEE ENTERPRISES
 HYDERABAD

Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill

S.NO	AIU	DESCRIPTION	QTY	RATE	AMOUNT
1	Misc	Intra Ocular Lense	689	300.00	206700.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
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					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					206700.00

Period of delivery: 30 days
 Place of delivery: Store at E.D.O (H) MATIARI
 Dispatch Instruction: Free delivery to consignee
 Name and Address of consignee: E.D.O (Health) MATIARI

[Signature]
 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI



OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATIARI
 Phone No. 2760029 Fax: 2765096
 E-mail: dohe@maharashtra.gov.in
 EPD/11/4/2/171/2012
 DATED: 4-4-2012

To,

A to ZEE ENTERPRISES
 HYDERABAD.

Subject: **Supply of medicines for the year 2011-12.**

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	MU	DESCRIPTION	QTY	RATE	AMOUNT
1	Misc	Serum Anti A 10ml	100	260.00	26000.00
2	Misc	Serum Anti B 10ml	100	260.00	26000.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					52000.00

Period of delivery: 30 days
 Place of delivery: Store at E.D.O (H) MATIARI
 Dispatch Instruction: Free delivery to consignee
 Name and Address of consignee: E.D.O (Health) MATIARI

(Signature)
 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI.



To,

A to ZEE ENTERPRISES
HYDERABAD.

Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill

S.NO	QTY	DESCRIPTION	QTY	RATE	AMOUNT
1	400	Humulin insulin 70/30 Vial of 10ml	400	389.00	155600.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
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					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					155600.00

Period of delivery
Place of delivery
Dispatch Instruction
Name and Address of consignee

30 days
Store at E.D.O (H) MATIARI
Free delivery to consignee
E.D.O (Health) MATIARI

EXECUTIVE DISTRICT OFFICER (HEALTH)
DISTRICT MATIARI.



OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATIARI
 Phone No. 2760029, Fax: 2760096
 Email: edoh_mat@yahoo.com
 HOCHIMATI/store: 195 3012
 DATE: 16/4/12

To,

IMPERIAL TRADERS (INC.)
 HYDERABAD.

Subject - Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
1	INJ	Systocinon 54	3000	15.00	45000.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					45000.00

Period of delivery: 30 days
 Place of delivery: Store at E.D.O (H) MATIARI
 Dispatch Instruction: Free delivery to consignee
 Name and Address of consignee: E.D.O (Health) MATIARI

(Signature)
 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI.



16

OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI

Phone No: 2760029 Fax: 2760096

E-mail: edo@matari.nic.in

EDOH (MATI) Store: 195 2012
DATE: 16/4/12

IMPERIAL TRADERS (INC.)
HYDERABAD


Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
1	INJ	Systocinon	3000	15.00	45000.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
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					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					45000.00

Period of delivery:
Place of delivery:
Dispatch instruction:
Name and Address of consignee:

30 days
Store at E.D.O (H) MATIARI
Free delivery to consignee:
E.D.O (Health) MATIARI


 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI.



OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATHARI
 Phone No. 2760029 Fax. 2760096
 Email: edoh_matari@yahoo.com

EDOH (MAT) store / *195* 2012
 DATED *16/4/12*

To,

IMPERIAL TRADERS (INC.)
 HYDERABAD.

Subject Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
1	INJ	Systocinan	3000	15.00	45000.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					45000.00

Period of delivery 30 days
 Place of delivery Store at E.D.O (H) MATHARI
 Dispatch Instruction Free delivery to consignee
 Name and Address of consignee E.D.O (Health) MATHARI

~~EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATHARI~~
(Signature)



OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATIARI
 Phone No: 2760029 Fax 2760096
 Email: edoh_matiari@yahoo.com
 EDOH(MAT)/store/ 196 2012
 DATED: 16/4/12

To,

IMPERIAL TRADERS (INC.)
 HYDERABAD.

Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
101	1	INJ 5% D/Water 1000ml	15 1900	45.000	85500.00
157	2	Cream Betamethasone +Neomycin 15gm	42 950	26.00	24700.00
132	3	CAP Cephradine 500mg (Blister Pack)	202 5000	6.25	31250.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					141450.00

Period of delivery 30 days
 Place of delivery Store at E.D.O (II) MATIARI
 Dispatch Instruction Free delivery to consignee
 Name and Address of consignee E.D.O (Health) MATIARI

[Signature]
 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
Phone No: 2760029, Fax: 2760096
Email: edoh_mati@yahoo.com
E:DOH (MAT)/store/ 197 2012
DATED: 16/4/12

To,

IMPERIAL TRADERS (INC.)
HYDERABAD.

Subject - Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
104	1	INJ Diclofenac Sodium 75mg 174.	28400	2.20	62480.00
93	2	INJ Ceftriaxone 500mg 187	1000	24.50	24500.00
101	3	INJ 5% D/Water 1000ml 14.	2000	45.000	90000.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
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					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
		GRANT TOTAL			176980.00

Period of delivery 30 days
 Place of delivery Store at E.D.O (H) MATIARI
 Dispatch Instruction Free delivery to consignee
 Name and Address of consignee E.D.O (Health) MATIARI

[Signature]
 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
(HEALTH MATIARI)
Phone No: 2760029 Fax: 2760096
Email: edoh_mati@yahoo.com
EDOH (MAT)/store/ **204**, 2012
DATED: **20/4/12**

To,

IMPERIAL TRADERS (INC.)
HYDERABAD.

Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
89. 1	INJ	Cefotaxime 1gm <i>186</i>	6100	29.00	176900.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					176900.00

Period of delivery
Place of delivery
Dispatch Instruction
Name and Address of consignee

30 days
Store at E.D.O (H) MATIARI
Free delivery to consignee
E.D.O (Health) MATIARI

EXECUTIVE DISTRICT OFFICER (HEALTH)
DISTRICT MATIARI.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI

Phone No. 2760029 Fax: 2760096

E-mail: edoh_matiari@yahoo.com

EDOH (MATIARI) STORE 205 2012

DATED 21/4/12

To,

IMPERIAL TRADERS (INC.)
HYDERABAD.

Subject:- Supply of X-Ray Films for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of X-Ray Films for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	A/U	DESCRIPTION	QTY	RATE	AMOUNT
176	1	X-Ray Films 12 x 15 207	300	95.00	28500.00
177	2	X-Ray Films 10 x 12 205	200	63.00	12600.00
178	3	X-Ray Films 08 x 10 203	200	43.00	8600.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					49700.00

Period of delivery	30 days
Place of delivery	Store at E.D.O (H) MATIARI
Dispatch Instruction	Free delivery to consignee
Name and Address of consignee	E.D.O (Health) MATIARI

[Signature]
EXECUTIVE DISTRICT OFFICER (HEALTH)
DISTRICT MATIARI.



Lab

OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATHARI
 Phone No: 2760029 Fax: 2760096
 Email: edoh_mataris@yahoo.com
 EDOH (MAT)/store/ 225 2012
 DATED 31-4-12

To,

RTJ ENTERPRISES
 HYDERABAD

Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	NU	DESCRIPTION	QTY	RATE	AMOUNT
1	Misc	Anti Serum D vial of 10ml 231	4	275.00	1100.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
					0.00
GRANT TOTAL					1100.00

Period of delivery	30 days
Place of delivery	Store at E.D.O (H) MATHARI
Dispatch instruction	Free delivery to consignee
Name and Address of consignee	E.D.O (Health) MATHARI

~~
 EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATHARI.~~

ONE HUNDRED RUPEES

167008
16/03/2012

Macquins International

167008
16/03/2012

CONTRACT AGREEMENT

An agreement made this 13th of March 2012 between the Office of the Executive District Officer
as Master "The Purchaser" hereinafter and M/S MACQUINS INTERNATIONAL KARACHI herein
as "the Supplier".

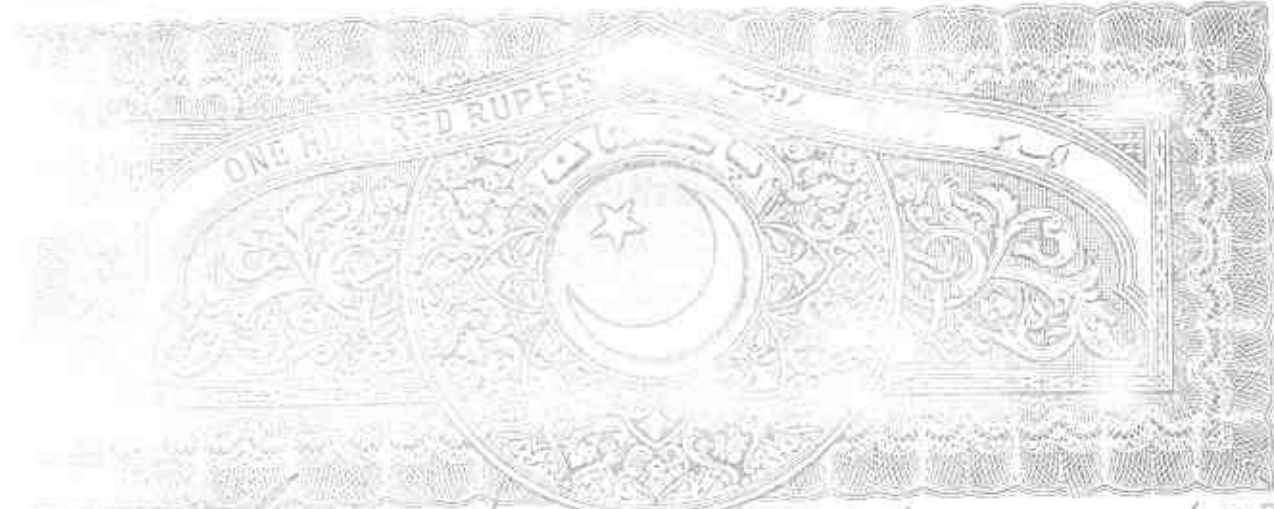
It has all the purchaser is desirous that certain medicine (As mentioned below in the table) should be
provided by supplier and work as the supplier has agreed to provide and quoted the rates has accepted by
purchaser for the supply of named medicine.

S.No	Sl No	DESCRIPTION OF ITEMS	RATE/A/U
01	S29	Cotrimoxazole DS	18.00

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

1. In this agreement word and expression shall have the same meaning as the respective assigned
in the Terms & Conditions of Tender Enquiry.
2. Copying documents shall be attached to form and be read and construed as part of this
agreement.
 - A. Contract Agreement.
 - B. Price Schedule
 - C. Technical Specifications.
 - D. Terms and conditions of Tender Enquiry.
 - E. Schedule of requirement.
 - F. Bidders offer including the relevant correspondence with all annexes made before signing the
Contract Agreement.
3. Re-consideration of the payments to be made by the purchaser to the, we supplier as herein after
mentioned the supplier here by covenants with the purchaser to provide the goods and services
and to remedy the defects therein in conformity in all respects with the provision of the contract.



Macquins International

10700

The purchaser hereby consent to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the amount price payable under the provision of the contract at the time and in the manner prescribed in the contract.

In the witness where of the parties here to have entered this agreement in accordance with their respective legal and valid rights, the date and the year first above written.

SUPPLIER

[Signature]
MACQUINS INTERNATIONAL
Peshawar
P.O. Box 1000
Peshawar

PURCHASER

SIGNATURE & SEAL _____

NAME: DR HASSAN MURAD SHAH

Address: Executive District Officer (Health) Matiari

CNIC NO: 41305-0554246-3

Designation: Executive District Officer (Health) Matiari

Phone: 2301 9307357
Fax: 2301 9307357
Signature: *[Signature]*

Witness (Purchaser)

NAME: Dr. (Capt) Bashir Ahmed Solangi

Address: Executive District Officer (Health) Matiari

CNIC NO: 5306-9215806-9

Designation: District Officer Health (Admin & Accounts) Matiari

NAME: *[Signature]*
Address: P.O. Box 1000 Peshawar
Phone: 43 100 100 9307357
Designation: Bashir Ahmed Solangi



FARHAN RAZA

06 FEB 2012

Ministry of Civil Supplies
Lahore, Pakistan

CONTRACT AGREEMENT

This agreement made this _____ day of _____ 2012 between the undersigned Executive District Officer
Civil Supplies, Government of Punjab, District _____, Pakistan and _____, Pharmacy/Chemist/Supplier.

Whereas the undersigned is desirous that certain medicines (As mentioned below in the table) should be provided
by supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by
undersigned for the supply the quoted medicine.

S.No.	Description of Goods	Rate /A/u
01	Aspirin 500mg Tablet (100 tablets)	1.55
02	Paracetamol 500mg	1.8
03	Amoxicillin 500mg	2.0

The undersigned hereby warrants and warrants that the acceptance of the contract by the bidder
means the bidder's agreement to the terms and conditions of the contract.

The undersigned hereby warrants and warrants that the acceptance of the contract by the bidder
means the bidder's agreement to the terms and conditions of the contract.

The undersigned hereby warrants and warrants that the acceptance of the contract by the bidder
means the bidder's agreement to the terms and conditions of the contract.

- 1. Contract Agreement
- 2. Price Schedule
- 3. Technical Specifications
- 4. Terms & Conditions of Tender Enquiry
- 5. Terms & Conditions of the Tender
- 6. Schedule of Delivery
- 7. Bidding and Contract Documents

The undersigned hereby warrants and warrants that the acceptance of the contract by the bidder
means the bidder's agreement to the terms and conditions of the contract.

The purchaser hereby warrants and warrants that the acceptance of the contract by the bidder
means the bidder's agreement to the terms and conditions of the contract.



... (faint text) ...

... (faint text) ...

... (faint text) ...

... (faint text) ...

... (faint text) ...

... (faint text) ...

PURCHASER

Signature & Seal

Name: Dr. Hassan Murtadhi Sidiq
Add: ...
CNP: ...
Cell number: ...

WITNESS (PURCHASER)

Name: ...
Add: ...
CNP: ...
Cell number: ...



Contract Agreement for *Supplying*
(International)

3118

08-02-2012

This Contract Agreement is made this _____ day of _____ 2012 between the Office of the Executive District Officer

and "A to Zee International" Hyderabad and M/S A. V. ZEE INTERNATIONAL, HYDERABAD herein after

purchaser is desirous that certain medicines (As mentioned below in the schedule) should be provided by

as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the

medicines.

DESCRIPTION OF ITEMS	Rate / A/U
Lead Poison Sulfate (Bottle of 300ml, 100%)	275.00
Amphotericin B 500mg/100ml (100%)	249.00
Insulin (Human Regular) Vial of 100ml	389.00
Hydrocortisone Succinate 250mg White Solvent	95.85
Hydrocortisone Succinate 200mg White Solvent	53.85
Hydrocortisone Succinate 100mg White Solvent	689.90
Hydrocortisone Succinate 50mg White Solvent	1695.00
Hydrocortisone Succinate 25mg White Solvent	25.00
Hydrocortisone Succinate 10mg White Solvent	260.00

A to Zee International
A-10-1704 Civil Hospital Road, Hyd.

This contract shall be operative from the date of acceptance of the contract by the bidder.

The agreement is annexed as follows:

The agreement words and expression shall have the same meaning as are respectively assigned to them in the contract and shall be referred to as follows:

The following documents shall be deemed to form and be read and construed as part of the agreement viz:

- (i) Schedule of items
- (ii) Price Schedule
- (iii) Technical specifications
- (iv) Terms & Conditions of Tender Enquiry
- (v) Terms & Condition of the Contract
- (vi) Schedule of requirement

Bidders offer including the relevant correspondence with all annexes made before signing the Contract Agreement.

3. In consideration of the payments to be made by the purchaser to the, we supplier as herein after mentioned, the supplier here by covenants with the purchaser to provide the goods and services and to deliver the goods herein in conformity with the provision of the contract,

He/It shall also covenants to provide the goods and services to the purchaser in conformity with the provision of the goods and services and to provide the goods and services in conformity with the provision of the contract and in the manner prescribed in the contract.

And the parties have to sign and seal this agreement in accordance with their respective hands and seals as shown in the joint list above written.

SUPPLIER


Signature of Supplier

PURCHASER


Signature of Purchaser
District Officer Health
Matiari

Address: Executive District Officer (Health) Matiari

CNIC NO: 41305-0554246-3

Designation: Executive District Officer (Health) Matiari

Supplier

Witness (Purchaser)

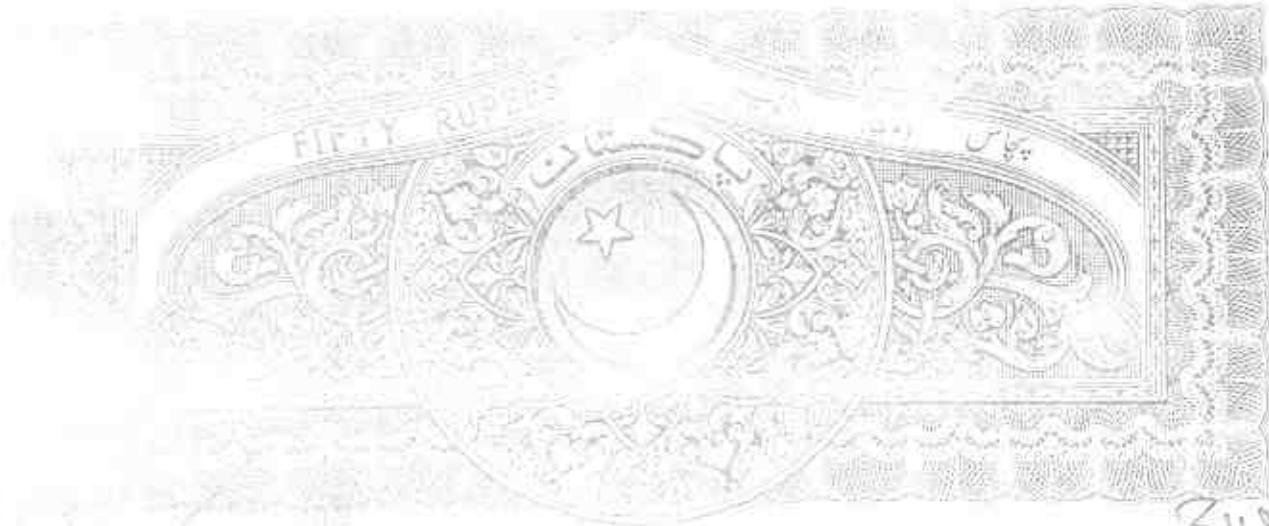

NAME: DR (Capt) Busher Ahmed Solangi

Address: Executive District Officer (Health) Matiari

CNIC NO: 41305-5215144-4

Designation: District Officer Health (Admin & Accounts) Matiari

DISTRICT OFFICER HEALTH
Matiari



Life Line Trading Co

3118

08-02-2012

Contract Agreement

Attest, this 08th day of February 2012 between the Office of the Executive District Officer

"The Purchaser" herein after and M/S LIFE LINE TRADING CO HYDERABAD herein after "The

Supplier" the goods mentioned in the schedule below in the table) should be provided by the Supplier as per the schedule below in the table which was accepted by purchaser for the

DESCRIPTION OF ITEMS	Rate / A/R
Paracetamol 500mg Tablet 100's	0.69
Paracetamol 500mg Tablet 100's	0.69
Paracetamol 500mg Tablet 100's	0.68
Paracetamol 500mg Tablet 100's	0.51
Paracetamol 500mg Tablet 100's	0.60
Paracetamol 500mg Tablet 100's	0.54
Paracetamol 500mg Tablet 100's	4.70
Paracetamol 500mg Tablet 100's	5.10
Paracetamol 500mg Tablet 100's	5.75
Paracetamol 500mg Tablet 100's	2.51
Paracetamol 500mg Tablet 100's	5.52
Paracetamol 500mg Tablet 100's	17.85
Wheel Needle Box of 100 each	495.00
LA Needles Box of 100 each	495.00
ONS (Over Requisition Sale)	5.10

Life Line Trading Company
 Regd No. 10 A96/1725
 10th Road, G.D

DESCRIPTION OF ITEMS	Rate / A/U
Xyloline S Cartridges with Adrenaline Tin of 50 cartridges	1695.00
Xyloline S Cartridges without Adrenaline Tin of 50 cartridges	1695.00

and shall commence from the date of signing of the contract by the bidder.

Signature of the Bidder:

This agreement word and expression shall have the same meaning as are respectively assigned to them in the Terms & Conditions of Tender Enquiry referred to.

The following documents shall be deemed as form and be read and construed as part of this agreement viz:

- 1. Contract Agreement.
- 2. Price Schedule
- 3. Technical Specifications
- 4. Terms & Conditions of Tender Enquiry.
- 5. Terms & Condition of the Contract.
- 6. Schedule of requirement.
- 7. BIDDING FORM including the relevant correspondence with all annexes made before signing the Contract Agreement.

Signature of the Bidder is hereby accepted by the purchaser after

reading the above mentioned documents with the purchaser to provide the goods and services and to

comply with the conditions of the contract.

The purchaser hereby agrees to pay the supplier in consideration of the provision of the goods and services and the furnishing of the defects therein, the Contract price payable under the provision of the contract and in the manner prescribed in the contract.

The parties here to have entered into agreement in accordance with their respective hands and seals and the year first above written.

Signature of Bidder

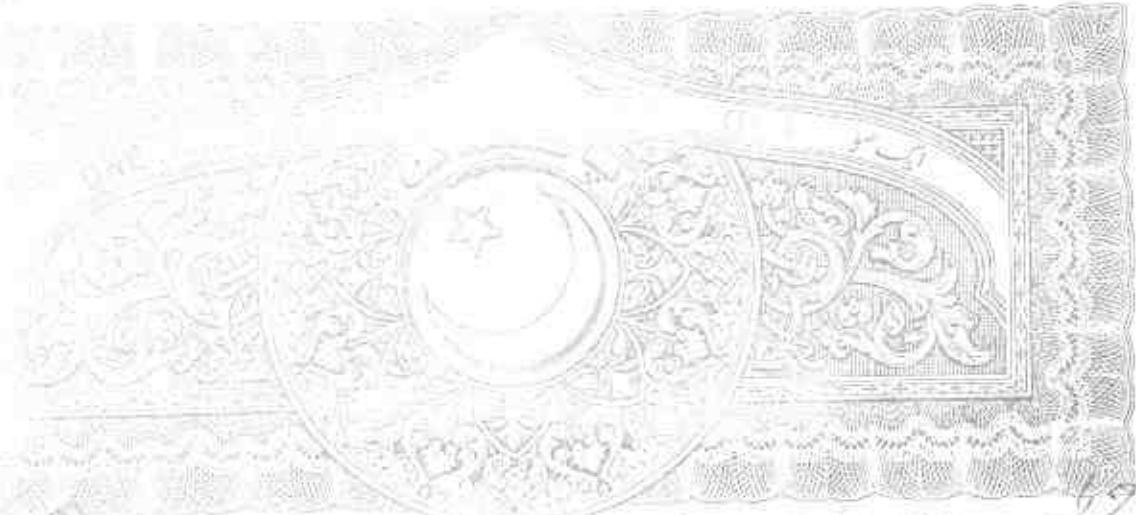
PURCHASER
 SIGNATURE & SEAL

 Executive District Officer Health
 MATIARI
 RAHEEM HASSAN MUNEER
 Executive District Officer (Health) Matiari
 CNIC NO: 41305-0554246-3
 Designation: Executive District Officer (Health) Matiari

Supplier)

Witness (Purchaser)

 NAME: DDC (Capt) Basim Ahmed Solangi
 Address: Executive District Officer (Health) Matiari
 CNIC NO: 41305-0515807-9
 Designation: District Officer (Admin & Accounts) Matiari



Contract Agreement

Grass Tablets

4962

6/3/2012

... of the Executive District Officer:
... DERABAD hereinafter "The

... (mentioned below in the table) should be provided by
... the bidder and a goodly price and quoted the rates which has accepted by preliminary in the

DESCRIPTION OF ITEMS

Trunk 30mg Strip 100 per pack	
Phenomenon 20mg Strip 100 per pack	9.00
S... 20mg Strip Bottle of 60ml	9.50
Al... 20mg Strip Bottle of 60ml	10.50
M... 20mg Strip	11.50
T... 40mg Strip	11.50
T... 40mg Strip	11.50

... from the date of acceptance of the contract by the bidder.

... as follows:

... shall have the same meaning as are respectively assigned to them in
... of Tender Enquiry referred to.

... as part of this agreement viz:

- 1. Contract Agreement.
- 2. ...
- 3. ...
- 4. ... of Tender Enquiry.
- 5. ... of the Contract.
- 6. ...

... before signing the
Contract agreement.

... of the purchase of the goods as herein after
 ... the supplier here by covenants with the purchaser to provide the goods and services and to
 ... the goods herein in conformity in all respects with the provision of the contract
 ... The purchaser here by covenants to pay the supplier in consideration of the provision of the goods and
 ... under the provision of the
 ... hands and
 ...

SUPPLIER

PURCHASER
 SIGNATURE & SEAL

 Executive District Officer Health
MATIARI
 NAME: DR HASSAN MURAD SHAH
 ADDRESS: Executive District Officer (Health) Matiari
 CONTACT: 0333-3554245-3

 Executive District Officer (Health) Matiari

Supplier

Witness (Purchaser)

 Address: Executive District Officer (Health) Matiari
 CONTACT: 0333-3554245-3
 Designation: District Officer Health (Admin & Accounts) Matiari

Part B 2

2. In consideration of the payments to be made by the purchaser to the, we supplier as herein after mentioned, the supplier hereby covenants with the purchaser to provide the goods and services and to rectify the defects therein in conformity in all respects with the provision of the contract.

3. The purchaser hereby covenants to pay the contract price in consideration of the provision of the goods and services and the repair of the goods and services at the Contract Price payable under the provisions of the contract at the time and in the manner prescribed in the contract.

4. 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.

5. SELLER


M. MANJUMAN

Address: 154/1, Avenue, Block 6, P.O. CHS,
Stammas Palam, Kanchi

U* No. 8700011/2021-0

Business Contract

6. BUYER (Supplier)


DR. HASSAN

Address: 154/1, Avenue, Block 6, P.O. CHS,
Stammas Palam, Kanchi

U* No. 8700011/2021-0

7. WITNESS


Executive District Officer Health

NAME: DR. HASSAN MALAYALALI

Address: Executive District Officer
(Health) Matari

U* No. 21564-0554246-3

Designation: Executive District Officer
(Health) Matari

8. WITNESS (Purchaser)


NAME: Dr. (Capt) Bashir Ahmed Solangi

Address: Executive District Officer (Health)
Matari

U* No. 21564-0215400-9

Designation: District Officer Health
(Admin & Accounts) Matari

DISTRICT OFFICE MATARI
ADMIN & ACCOUNTS
MATARI



[Handwritten signature] *1572*

Contract Agreement

05 MAR 2012

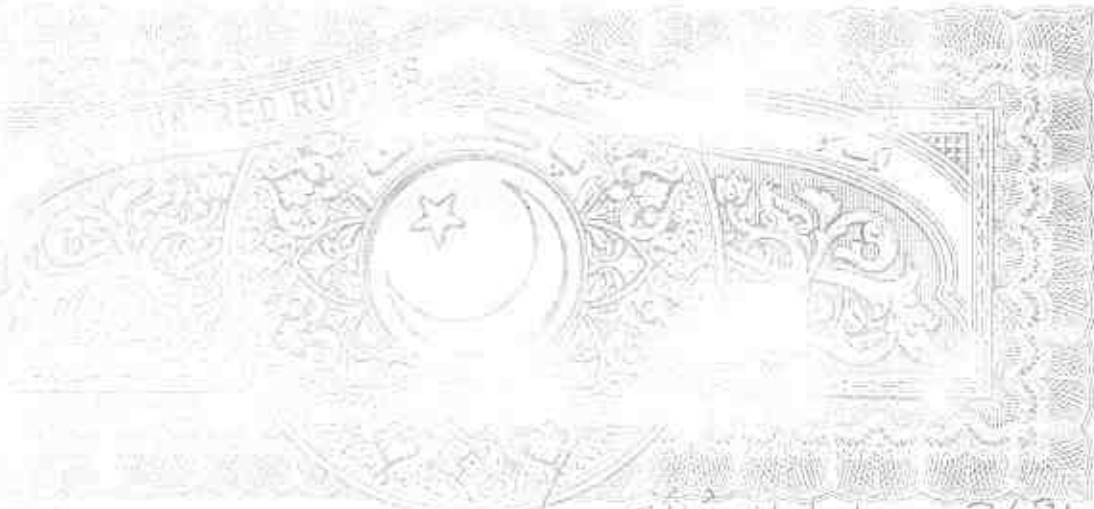
This agreement made this 5 day of 03 2012 between the Office of the Executive District Officer
 Muz. "The Purchaser" herein after and M/s ZAM TRADERS HYDERABAD herein after "The Supplier".
 The purchaser shall purchase the goods mentioned below in the table) should be provided by
 the supplier at the rates which has accepted by purchaser for the
 and Medicine.

S.No	DESCRIPTION OF ITEMS	Rate / A/U
1	Amoxicillin 500mg Strip pack	1.10
2	Amoxicillin 500mg Strip pack	1.10
3	Amoxicillin 500mg Strip pack	1.10
4	Methyl Dopa 250mg Strip/Buster pack	4.00
5	Clonidine 500mg Strip/Buster pack	2.00
6	Clonidine 500mg Strip/Buster pack	1.00
7	Clonidine 500mg Strip/Buster pack	11.00
8	Clonidine 500mg Strip/Buster pack	2.00
9	Clonidine 500mg Strip/Buster pack	4.00
10	Clonidine 500mg Strip/Buster pack	2.75
11	Cefotaxime Sodium 250mg	19.00
12	Cefotaxime 250mg	21.00
13	Cefotaxime Sodium 250mg	21.00

DESCRIPTION OF ITEMS	Rate, %/kg
1. Cement 40kg Bag	6.50
2. 20kg Bag of Cement	3.00
3. 10kg Bag of Cement	4.00
4. 5kg Bag of Cement	2.50
5. 25% Bonded Cement 25% Bonded Cement	14.00
6. Powder Cement	12.00

Price will commence from the date of issue of the contract by the bidder.

- The bidder's offer shall have the same meaning as are respectively assigned to all in the Terms & Conditions of Tender Enquiry referred to.
- The following documents shall be deemed to form and be read as part of this agreement viz:
 - Form of Tender
 - Form of Bid
 - Form of Contract
 - Form of Tender Enquiry
 - Terms & Conditions of the Contract
 - Sched. A's requirements
 - Bidders offer including the relevant correspondence with all notices made before signing the Contract Agreement
- The bidder shall be bound to supply the goods and services as herein after specified to the purchaser or his agent at the price specified in the contract and to provide the goods and services and to be delivered in conformity with all respects with the provision of the contract.
- The bidder shall be bound to pay the supplier in consideration of the provision of the goods and services as specified in the contract and to pay the price payable under the provision of the contract.



Contract Agreement

3681

05 MAR 2012

I, the undersigned, do hereby certify that the above mentioned...
The Purchaser has acknowledged receipt of the goods...
The Supplier has accepted the responsibility...
The Supplier has agreed to provide the goods...
The Supplier has agreed to provide the goods...

M/S. [Name of Supplier] [Address]
[Signature of Supplier]

The goods mentioned above shall be delivered to the purchaser...
The goods mentioned above shall be delivered to the purchaser...

The following conditions shall be deemed to form part of the agreement...

- 1. Delivery of goods
- 2. Payment of goods
- 3. Responsibility of goods
- 4. Return of goods
- 5. Dispute resolution
- 6. Force majeure
- 7. Assignment
- 8. Entire agreement
- 9. Governing law
- 10. Notices
- 11. Counterparts
- 12. Signatures

[Signature]

[Signature]

... agreement in accordance with their respective hands and
... the year first above written.

6

Supplier
[Faint handwritten text and signature]

PURCHASER

SIGNATURE & SEAL
[Signature]
Executive District Officer (Health) Matari
CIN: 41305-0554246-3
Designation: Executive District Officer (Health) Matari

Supplier
[Faint handwritten text and signature]

Supplier (Purchaser)
NAME: DR (Capt) Bashir Ahmed Solangi
Designation: Executive District Officer (Health) Matari
CIN: 41305-0213820-2
Designation: Executive District Officer (Admin & Accounts) Matari

ONE HUNDRED RUPEES

ایک سو روپے

Contract Agreement

4/1/1

This contract made this _____ day of _____ 2012 between the Office of the Executive District Officer, Hyderabad and M. S. M. P. S. TRIDERS HYDERABAD herein after "The

Contractor shall provide the following items as mentioned below in the table should be provided by the contractor at the rate of _____ per unit. The amount of Rs. _____ has been received by purchaser for the above items.

Sl. No.	DESCRIPTION OF ITEMS	Rate / A/c
1	Aspirin 100mg Strip/Blister Pack	2.15
2	Diclofenac Sodium 75mg Strip / Blister Pack	0.39
3	Cloxacillin 250mg Strip/Blister Pack	0.25
4	Vanilignone 1mg 4 Amps	0.55
5	Chlorpheniramine 4mg Strip	0.15
6	Paracetamol 500mg Strip/Blister Pack	1.05
7	Paracetamol 325mg Strip/Blister Pack	4.25
8	Metformin 500mg Strip/Blister Pack	1.04
9	Amoxicillin 500mg Strip/Blister Pack	0.89
10	Metformin 500mg Strip/Blister Pack	0.10
11	Paracetamol 500mg Strip/Blister Pack	-
12	Cephalexin 500mg Strip/Blister Pack	15.00
13	Cephadrin 125mg/5ml	31.00
14	Cephadrin 250mg/5ml	44.00
15	Ringer's Lactate 1000ml	55.00
16	Ringer's Lactate 500ml	55.00
17	Hydrocortisone	15.00
18	Hydrocortisone Saline 500ml	55.00
19	Adrenaline 1mg Amp of 1ml	10.00
20	Cetotaxim Sodium 1g	29.00

M. S. M. P. S. TRIDERS

...hereby covenant to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the Contract price payable under the provision of the ...

...of the parties ... in accordance with their respective hands and ...

PURCHASER

Handwritten notes:
 ...
 ...
 ...
 ...
 ...

Handwritten signature: [Signature]
 ...
 ...

NAME: DR HASSAN MERAD SHAH
 Address: Executive District Officer (Health) Matiari
 CNIC NO: 41305-9215806-9
 Designation: District Officer (Health) Matiari

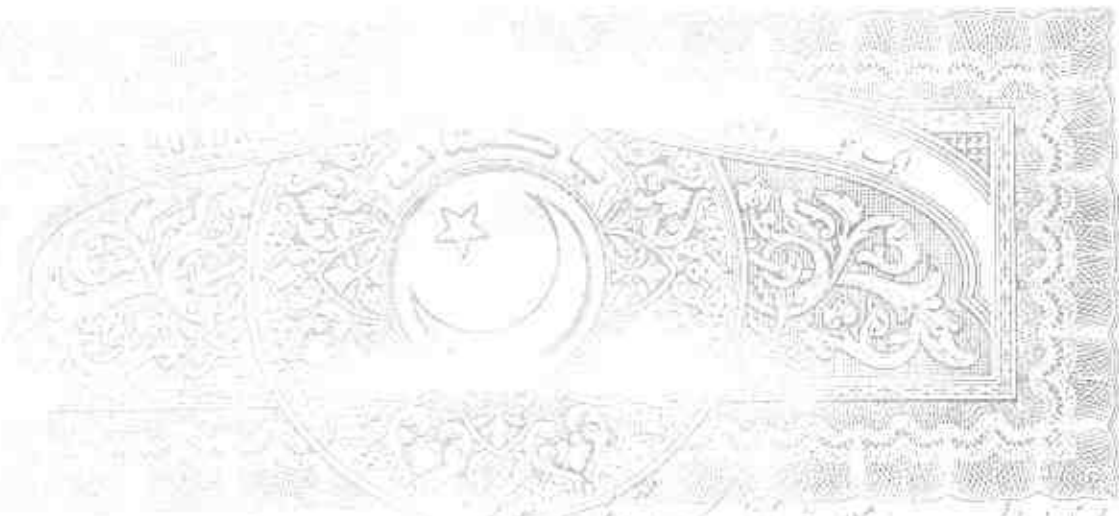
Handwritten notes:
 ...
 ...
 ...
 ...

Witness (Purchaser)

DR (Health) ... Solangi
 District Officer (Health) Matiari

CNIC NO: 41306-9215806-9
 Designation: District Officer Health (Admin & Accounts) Matiari

DISTRICT OFFICER
 ...
 ...



Contract Agreement

... Executive District Officer
... hereinafter "The

... should be provided by
... which has accepted by purchaser for the

DESCRIPTION OF ITEMS	QUANTITY	PRICE
...
...
...
...
...
...
...

... of acceptance of the contract by the bidder.
...

... shall have the same meaning as are respectively assigned to
... of Tender Enquiry referred as:

... as part of this agreement viz:

- 1. ...
- 2. ...
- 3. ...
- 4. ...
- 5. ...
- 6. ...
- 7. ...
- 8. ...
- 9. ...
- 10. ...
- 11. ...
- 12. ...
- 13. ...
- 14. ...
- 15. ...
- 16. ...
- 17. ...
- 18. ...
- 19. ...
- 20. ...
- 21. ...
- 22. ...
- 23. ...
- 24. ...
- 25. ...
- 26. ...
- 27. ...
- 28. ...
- 29. ...
- 30. ...
- 31. ...
- 32. ...
- 33. ...
- 34. ...
- 35. ...
- 36. ...
- 37. ...
- 38. ...
- 39. ...
- 40. ...
- 41. ...
- 42. ...
- 43. ...
- 44. ...
- 45. ...
- 46. ...
- 47. ...
- 48. ...
- 49. ...
- 50. ...

... to be made by the purchaser to the, we supplier as herein after
... with the purchaser to provide the goods and services and to
... the execution of the contract.

ATTESTED

...

... the supplier in consideration of the provision of the goods and
... under the provision of the
... have caused this agreement in accordance with their respective hands and
... the month and one year first above written.

[Handwritten signature and notes]

SIGNATURE & SEAL

[Handwritten signature]

NAME: DR HASSAN *[Handwritten]*
Designation: Executive District Officer (Health) Matiari
CNIC NO: 41305-6554246-3
Designation: Executive District Officer (Health) Matiari

[Handwritten signature and notes]

SIGNATURE & SEAL

[Handwritten signature]

NAME: DR (Capt) Basher Ahmed Solangi
Designation: Executive District Officer (Health) Matiari
CNIC NO: 41305-6215806-9
Designation: District Officer (Admin & Accounts) Matiari



Contract Agreement

Handwritten number: 2384

... 2013 between the Office of the Executive Officer, ... "The Purchaser" herein after and N/S ENTERPRISES HYDERABAD herein after "The

... (table) should be provided by ... accepted by purchaser for the

Sl. No.	DESCRIPTION OF ITEMS	Rate / A/U
	Ammonium Chloride 500mg Strip/Bliater pack	0.72
	Ammonium Chloride 500mg Strip/Bliater pack	
	Ammonium Chloride 500mg Strip/Bliater pack	
	Ammonium Chloride 500mg Strip/Bliater pack	1.50
1	Ammonium Chloride 500mg Strip/Bliater pack	0.30
2	Ammonium Chloride 500mg Strip/Bliater pack	0.45
	Ammonium Chloride 500mg Strip/Bliater pack	0.45
	Ammonium Chloride 500mg Strip/Bliater pack	
	Ammonium Chloride 500mg Strip/Bliater pack	3.00
	Ammonium Chloride 500mg Strip/Bliater pack	10.00
	Ammonium Chloride 500mg Strip/Bliater pack	6.75
	Ammonium Chloride 500mg Strip/Bliater pack	0.51
	Ammonium Chloride 500mg Strip/Bliater pack	
	Ammonium Chloride 500mg Strip/Bliater pack	0.30
	Ammonium Chloride 500mg Strip/Bliater pack	0.52
37	Ammonium Chloride 500mg Strip/Bliater pack	0.38
	Ammonium Chloride 500mg Strip/Bliater pack	0.07
	Ammonium Chloride 500mg Strip/Bliater pack	
	Ammonium Chloride 500mg Strip/Bliater pack	

Stamp: N/S ENTERPRISES HYDERABAD

QTY	DESCRIPTION OF ITEMS	Rate / A/U
1	Pericardol 250mg 5ml Bottle of 10ml	11.50
1	Sulfonamide 400mg 250ml	11.25
1	Amoxicillin 250mg 5ml	10.20
1	Amoxicillin 125mg 5ml Bottle of 10ml	26.00
1	Amoxicillin 250mg 5ml	36.50
1	Clonidine 0.1mg	11.00
1	Clonidine 50mg 5ml Bottle of 10ml	12.50
1	Clonidine 10mg 5ml Bottle of 10ml	13.50
1	Vitamin B12 100mg 1mg of 1ml	3.50
1	Amoxicillin 250mg 5ml	11.50
1	Amoxicillin 500mg 5ml	7.90
1	Chloroquine 40mg Amp of 5ml	10.00
1	Ethopropazine 10mg Amp of 2ml	2.95
1	Amoxicillin 500mg 5ml	4.50
1	Amoxicillin 500mg 5ml	10.00
1	Amoxicillin 250mg Amp of 10ml	10.00
1	Amoxicillin 500mg 5ml Amp of 10ml	8.90
1	Methocarbamol 100mg 2ml of 5ml	10.00
1	Methocarbamol 500mg 5ml	4.10
1	Diphenhydramine 50mg 5ml	4.10
1	Amoxicillin 250mg 5ml 10ml	2.00
1	Amoxicillin 500mg 5ml 10ml	2.00
1	Amoxicillin 250mg 5ml 10ml	2.00
1	Amoxicillin 500mg 5ml 10ml	2.00

RTJ ENTERPRISES

DESCRIPTION OF ITEMS	Rate / A/R
...	...
...	0.90
...	1.35
...	7.50
...	45.00
...	135.00
...	160.00
...	185.00
...	275.00
...	11.00
...	35.00
...	23.00
...	35.00
...	35.00
...	0.50
...	0.50



The agreement with respect to follows:

The agreement with respect to expression shall have the same meaning as are respectively assigned to them in the Terms and Conditions of Tender Enquiry referred to.

Existing documents, with all details, to form a part of the contract submitted as part of this agreement viz:

- ...
- ...
- ...

Financial conditions of Tender Inquiry.

Terms of Contract of the Contract.

Description of requirement.

Student after hearing the relevant correspondence with all annexes made before signing the Contract agreement.

4. In consideration of the payments to be made by the purchaser to the supplier as herein after the supplier shall be bound to deliver the goods and services and to remedy the defects in the goods or to pay the supplier in satisfaction of the provision of the goods and services of the contract, the Contract price payable under the provision of the contract at any time to the contractor as provided in the contract.

5. The purchaser and the supplier shall sign this agreement in duplicate in their respective hands and the original of the same shall be submitted to the authority.

BUYER

PURCHASER

SIGNATURE & SEAL

NAME: DR (Capt) Basher Ahmed Salangi

PHONE NO: 41505-055-2345-8

Designation: Executive District Officer (Health) Mutiali

Witness (Purchaser)

NAME: DR (Capt) Basher Ahmed Salangi

Address: Executive District Officer (Health) Mutiali

PHONE NO: 41505-055-2345-8

Designation: Executive District Officer (Admin & Accounts) Mutiali

MUTIALI
MUTIALI



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 220

Order #: EDOH (MAT)/store/ 151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Caps: Cephadrine 250mg	5000	4.00	20000
		TOTAL	Rs.20000/-

WARRANTY:

Under section 25 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown.


STORE KEEPER
EDO (H), MATIARI

ZAM TRADING CO:

SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 219

Order #: EDOH (MAT)/store/ 151 2012
DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Caps: Cephadrine 250mg	5000	4.00	20000
		TOTAL	Rs.20000/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Handwritten signature and stamp: Executive District Officer Sindh, MATIARI.

Correctly Received
& Entered in Stock
Register on-Pages
Shown

Handwritten signature
STORE KEEPER,
EDOH (H), MATIARI

ZAM TRADING CO.
H # 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758
Handwritten signature
SIGNATURE



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 218

Order #: EDOH (MAT)/store/ 151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Caps: Cephadrine 250mg	5000	4.00	20000
		TOTAL	Rs.20000/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown


STORE KEEPER
EDOH (H), MATIARI

ZAM TRADING CO:
H# 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758


SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 217

Order #: EDOH (MAT)/store/ 151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Caps: Cephadrine 250mg	5000	4.00	20000
		TOTAL	Rs.20000/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on Pages

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758


STORE KEEPER
Matiari


SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahr-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 216

Order #: EDOH (MAT)/store/ 151.2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Cefotaxime 250mg ✓	1000	19	19000
		TOTAL	Rs.19000/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
shown

STORE KEEPER
E.O.O. (H), MATIARI

ZAM TRADING CO.
H# 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758

SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 215

Order #: EDOH (MAT)/store/ 151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Cefotaxime 250mg <i>190</i>	1000	19	19000
		TOTAL	Rs.19000/-

WARRANTY:

Subordinate District Officer Matiari

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on Pages
Shown.

ZAM TRADING CO:
H# 171/D Sadat Colony Unit No: 9
Lahabad. 0321-8908758

[Signature]
STORE KEEPER,
E.O.O: (H), MATIARI

[Signature]
SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9, Lahore, Pakistan
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrab-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 214

Order #: EDOH (MAT)/store/ 151 2012..

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Cefotaxime 250mg ¹⁹⁰	1000	19	19000
		TOTAL	Rs.19000/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Signature
 District Officer
 MATIARI.

Correctly Received
 & Entered in Stock
 Register on-Pages
 Shown.

Signature
 STORE KEEPER
 EDOH (H), MATIARI

ZAM TRADING CO:
 H# 171/D Sadat Colony Unit No: 9
 Latifabad. 0321-8908758

Signature
 SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
 Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahr-e-Liaquat, Karachi-74000.
 Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 213

Order #: EDOH (MAT)/store/ 151.2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Drotaverin <i>81</i>	2000	6.50	13000
		TOTAL	Rs.13000/-

WARRANTY:

Handwritten: Section 23 of Drug Act 1976
Stamp: DISTRICT OFFICER MATIARI
Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Page
Shown.

Handwritten Signature
STORE KEEPER
E.D.O.H. MATIARI

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758

Handwritten Signature
SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 212

Order #: EDOH (MAT)/store/ 151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Drotaverin <i>81</i>	2000	6.50	13000
		TOTAL	Rs.13000/-

WARRANTY:

MATIARI

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown

[Signature]
STORE KEEPER
E.O.O: (H), MATIARI

ZAM TRADING CO:
H # 1710 Sadat Colony Unit No: 9
Latifabad-0321-3508758

[Signature]
SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 211

Order #: EDOH (MAT)/store/ 151 2012
DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Ceftriaxone 250mg <i>253</i>	1000	20	20000
		TOTAL	Rs.20000/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Registers on Pages

ZAM TRADING CO:
H # 17/10 Sadat Colony Unit No: 9
Latifabad. 0321-8908758

[Signature]
STORE KEEPER,
EDO:01 (H), MATIARI

[Signature]
SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahr-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 210

Order #: EDOH (MAT)/store/ 151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Ceftriaxone 250mg <i>263</i>	1000	20	20000
		TOTAL	Rs.20000/-

WARRANTY:

Signature of Customer Ujjwal Meena MATIARI

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

[Signature]
STORE KEEPER
E/O/OI (H), MATIARI

ZAM TRADING CO.
H# 171/D Sadat Colony, Unit No: 9
Latifabad, 0321-8908758

[Signature]
SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 209

Order #: EDOH (MAT)/store/151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Cefuroxime Sodium 250mg <i>357</i>	600	25	15000
		TOTAL	Rs.15000/-

WARRANTY:

Handwritten: 357, MATIARI, District Matiari

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

Handwritten Signature
STORE KEEPER,
E.C.O. (H), MATIARI

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad, 6321-8908758

Handwritten Signature
SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 208

Order #: EDOH (MAT)/store/ 15-4-2012
DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Cefuroxime Sodium 250mg <i>250</i>	800	25	20000
		TOTAL	Rs.20000/-

WARRANTY:

Handwritten: MATIARI

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

Handwritten Signature
STORE KEEPER
E.O. (H), MATIARI

ZAM TRADING CO:
H# 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758

Handwritten Signature
SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 206

Order #: EDOH (MAT)/store/ 151-2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Cefuroxime Sodium 250mg	800	25	20000
		TOTAL	Rs.20000/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown.


STORE KEEPER
EDO (H), MATIARI

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758


SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax: # (92) 21-2639396, 2625688 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 205

Order #: EDOH (MAT)/store/ 151 2012

DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: B.Complex IM/VI 2ml	6000	2.75	16500
		TOTAL	Rs.16500/-

WARRANTY:

Under Section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758

SIGNATURE

Inductively Remanufactured
& Entered in Stock
Register on-Pages
Shown.


STORE KEEPER
E.O.O: (H) MATIARI

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 204

Order #: EDOH (MAT)/store/151 2012
DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: B.Complex IM/VI 2ml	6000	2.75	16500
		TOTAL	Rs.16500/-

WARRANTY:

Under section 2 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
shown.


STORE KEEPER
E:O:O: (H), MATIARI

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad. 0321-8908758


SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 203

Order #: EDOH (MAT)/store/ 151 2012
DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
New Newmycin powder	1300	12.00	15600
		TOTAL	Rs. 15600/=

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly received
& Entered in Stock
Register on-Pages
Shown.


STORE KEEPER
EIOI (H), MATIARI

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad, 0321-8908758


SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

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Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 15-04-2012

CUSTOMER NAME:

EDO Health
Matiari

CASH MEMO/BILL # 202

Order #: EDOH (MAT)/store/ 151 2012
DATE: 27-03-2012

DESCRIPTION	QTY	RATE	TOTAL
Inj: Atropine	2000	2.00	4000.00/-
Inj: Fursimide 2ml	2500	3.00	7500.00
Newmycin powder	575	12.00	6900
	TOTAL		Rs.18400/-

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of Zam Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Correctly Received
& Entered in Stock
Register on-Pages
Shown.


STORE KEEPER
EDO: (H), MATIARI

ZAM TRADING CO:
H# 171/D Sadat Colony Unit No 9
Latifabad. 0321-8906769


SIGNATURE

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8906758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 709

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	0

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 710

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 710

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P_Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 711

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	:	29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 711

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P_Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 712

Party Name :- E.D.O (Health) Matari.

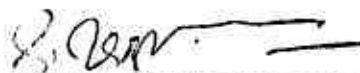
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	:	29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 712

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 713

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	:3	29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 713

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18-23	29	:3

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 172 dated 4/4/12

Invoice No. :- 715

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj. Humulin 70/30		50	389.90	19,495.00

226

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

R. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 715

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 172 dated 4/4/12

Invoice No. :- 716

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

236

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad, Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 716

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad, Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No *172 dated 4/4/12*

Invoice No. :- 717

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

26

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 717

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 172 dated 4/4/12

Invoice No. :- 718

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 718

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 172 dated 4/4/12

Invoice No. :- 719

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No 172 dated 4/4/12

Ref No. :- 719

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 172 dated 4/4/12

Invoice No. :- 720

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 720

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 172 dated 4/4/12

Invoice No. :- 721

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj. Humulin 70/30		50	389.90	19,495.00

236

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad, being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No 172 date 4/4/12

Ref No. :- 721

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 722

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	:	10	689.00	6,890.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	6,890.00
Disc.Amount :-	0.00
Net Amount :-	6,890.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No


Ref No. :- 722

Party Name :- **E.D.O (Health) Matia ri.**

Address :- Matia ri

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	10	:

Number of Items 1


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

DELIVERY CHALLAN

Date: 09-04-2012

Order Ref # EDOH (MAT)/store/170 Date: 04-04-2012

Party Name: Executive District Officer (Health) Matiyari.

Qty	Description	Mfg Company	Batch No	Mfg Date	Exp Date
300	Intra Occular Lens	The Fred Hollows Foundation	E7923185	01-2011	01-2015

(One Item)

For: A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 9/4/12
Order No. :- No 172 dated 4/4/12
Invoice No. :- 714

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		49	389.90	19,105.10

235

Correctly Received
& Entered in Stock
Register on Page #
shown.

[Signature]
S. Razaq
E.D.O (Health) Matari

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,105.10
Disc.Amount :-	0.00
Net Amount :-	19,105.10

[Signature]

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 714

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	49	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob. 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 171 dated 4/4/12

Invoice No. :- 701

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Anti-A Serum 10ml		75	260.00	19,500.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,500.00
Disc.Amount :-	0.00
Net Amount :-	19,500.00


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 701

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P_Name	Qty	Batch #
1	Anti-A Serum 10ml	75	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 171 dated 4/4/12

Invoice No. :- 702

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Anti-B Serum 10ml		75	260.00	19,500.00

229

[Handwritten signature]
MATARI.

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,500.00
Disc.Amount :-	0.00
Net Amount :-	19,500.00

[Handwritten signature]
For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

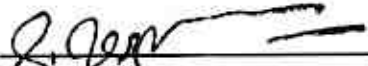
Ref No. :- 702

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Anti-B Serum 10ml	75	:

Number of Items 1


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 171 date 2 4/4/12

Invoice No. :- 703

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Anti-A Serum 10ml	:	25	260.00	6,500.00
2	Anti-B Serum 10ml	:	25	260.00	6,500.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	13,000.00
Disc.Amount :-	0.00
Net Amount :-	13,000.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No 171 dated 4/4/12

Ref No. :- 703

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Anti-A Serum 10ml	25	:
2	Anti-B Serum 10ml	25	:

Number of Items 2

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 704

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 704

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18-23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 705

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 705

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 706

Party Name :- E.D.O (Health) Matiari.

Address :- Matiari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	:	29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 706

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18-23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 707

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 707

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 708

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	:	29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- No

Ref No. :- 708

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- No 170 dated 4/4/12

Invoice No. :- 709

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	0	29	689.00	19,981.00

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00


For M/s. A to Zee International

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 181

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
TAB. CEBON 500mg (Ascorbic Acid) L347	042	40's	10000 Tabs.	1.85	18,500
					18,500.00

FORM 2A (See rules 10 & 20)

WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976.

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business as a Proprietor Registered Office under the name of M/s. Pharmaxone, do hereby give warranty that Drugs and Medicines and described on this Invoice has not been manufactured or sold in contravene in any way the Provision of Section 23 of the Drug Act, 1976.

Correctly Received
Entered in Stock
Date: 18/04/12
Storekeeper
Signature
STORE KEEPER
EDOH (H), MATIARI

(Rupees: Eighteen Thousand & Five Hundred Only)

For
PharmaXone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 182

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

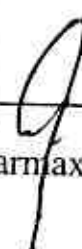
PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
TAB. CEBON 500mg (Ascorbic Acid) 347	042	40's	10000 Tabs.	1.85	18,500
					18,500.00

FORM 2A (See rules 10 & 20)

WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976.

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business at our Registered Office under the name of M/s. Pharmaxone, do hereby give this warranty that Drugs and Medicines and described on this Invoice has sold by me do not contravene in any way the Provision of Section 23 of the Drug Act, 1976.

(Rupees: Eighteen Thousand & Five Hundred Only)

For: 
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 183

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

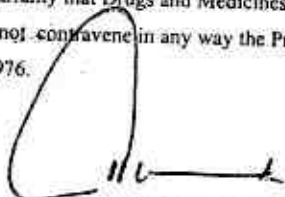
Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
TAB. CEBON 500mg (Ascorbic Acid) <i>1347</i>	042	40's	5000 Tabs.	1.85	9,250
					9,250.00

FORM 2A (See rules 10 & 20)


WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business at our Registered Office under the name of M/s. Pharmaxone, do hereby give this warranty that Drugs and Medicines and described on this Invoice has sold by me do not contravene in any way the Provision of Section 23 of the Drug Act, 1976.



(Rupees: Nine Thousand Two Hundred & Fifty Only)

For:
Pharmaxone



PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment
 B-441 2nd Floor, Block-13 F B Area, Karachi
 Ph: 6347576, Fax: 6348586
 E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 184

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. THEOPHYLLIN (Theophylline) <i>459</i>	270	120ml	1100 Botts.	18.00	19,800
					19,800.00

Correctly Received
 & Entered in FORM 2A (See rules 10 & 20)
 Registered under SECTION 23 (D) OF THE DRUG ACT, 1976.
 Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying
 on business at our Registered Office under the name of M/s. Pharmaxone, do
 hereby give the warranty that Drugs and Medicines and described on this Invoice
 has sold by me do not contravene in any way the Provision of Section 23
 of the Drug Act, 1976.

Signature
 A. L. F.

(Rupees: Nineteen Thousand & Eight Hundred Only)

For *Signature*
 Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmaxone@live.com

BILL / INVOICE

INVOICE NO. 185

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

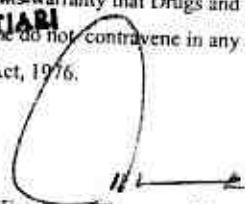
Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. THEOPHYLLIN (Theophylline) <i>USP</i>	270	120ml	1100 Botts.	18.00	19,800

Entered in Schedule
Register on Form 2A (See rules 10 & 20)

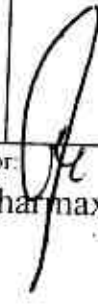
WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976.
I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying
business at our Registered Office under the name of M/s. Pharmaxone, do
hereby warrant that Drugs and Medicines and described on this Invoice
shall not contravene in any way the Provision of Section 23
of the Drug Act, 1976.

STORE KEEPER
EDOH (H) MATIARI



(Rupees: Nineteen Thousand & Eight Hundred Only)

19,800.00

For: 
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 186

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. THEOPHYLLIN (Theophylline) <i>459</i>	270	120ml	1100 Botts.	18.00	19,800
					19,800.00

Correctly Prepared

Entered in FORM 2A (See rules 10 & 20)

Registered under SECTION 23 (D) (i) OF THE DRUG ACT, 1976.

Howd. Masud Ahmed Khan, Proprietor being a person resident in Pakistan carrying

business at our Registered Office under the name of M/s. Pharmaxone, do

hereby give the warranty that Drugs and Medicines and described on this Invoice

has sold by me do not contravene in any way the Provision of Section 23
of the Drug Act, 1976.

STORE KEEPER

EDOH (H), MATIARI

(Rupees: Nineteen Thousand & Eight Hundred Only)

For
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 187

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. THEOPHYLLIN (Theophylline) <i>US</i>	270	120ml	1100 Botts.	18.00	19,800
					19,800.00

FORM 2A (See rules 10 & 20)

WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976.

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business at our Registered Office under the name of M/s. Pharmaxone, do

hereby give this warranty that Drugs and Medicines and described on this Invoice

has sold by me do not contravene in any way the Provision of Section 23

of the Drug Act, 1976.

Mushtaq Ahmed Khan
STORE KEEPER
of the Drug Act, 1976.
EDOH (H), MATIARI

(Rupees: Nineteen Thousand & Eight Hundred Only)

For:
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 188

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. THEOPHYLLIN (Theophylline) <i>455</i>	270	120ml	1100 Botts.	18.00	19,800
					19,800.00

Entered in **FORM 2A (See rules 10 & 20)**
REGISTERED UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976
I, **Mushtaq Ahmed Khan**, Proprietor being a person resident in Pakistan carrying
on business at our Registered Office under the name of M/s. Pharmaxone, do
hereby give this warranty that Drugs and Medicines and described on this Invoice
has sold by me do not contravene in any way the Provision of Section 23
of the Drug Act, 1976

(Rupees: Nineteen Thousand & Eight Hundred Only)

For:
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 189

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. OSFOCIN (Fosfomycin) <i>461</i>	226	60ml	300 Botts.	58.00	17,400
					17,400.00

Correctly Received

& Entered in Stock

Registered or FORGSA (See rules 10 & 20)

Shows WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976.

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying

the business at the Registered Office under the name of M/s. Pharmaxone, do

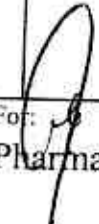
hereby give this warranty that Drugs and Medicines and described on this Invoice

is sold by me do not contravene in any way the Provision of Section 23

of the Drug Act, 1976.

STORE KEEPER
E.D.O. (H) MATIARI

(Rupees: Seventeen Thousand & Four Hundred Only)

For: 
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 190

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. OSFOCIN (Fosfomycin) <i>461</i>	226	60ml	300 Botts.	58.00	17,400
					17,400.00

Register on **FORM 2A (See rules 10 & 20)**

Since **WARRANTY UNDER SECTION 23 (D.G) OF THE DRUG ACT, 1976.**

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying

on business in our Registered Office under the name of M/s. Pharmaxone, do

hereby give the warranty that Drugs and Medicines and described on this Invoice

will not contravene in any way the Provision of Section 23

STORE KEEPER
EDOH (H) MATIARI

(Rupees: Seventeen Thousand & Four Hundred Only)

For:
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 191

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. OSFOCIN (Fosfomycin) <i>461</i>	226	60ml	300 Botts.	58.00	17,400
					17,400.00

Carefully Received

& Entered in FORM 2A (See rules 10 & 20)

Registered under SECTION 23 (D) (i) OF THE DRUG ACT, 1976

Shown by Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying

on business at our Registered Office under the name of M/s. Pharmaxone, do

not give the warranty that Drugs and Medicines and described on this Invoice

has sold by me & not contravene in any way the Provision of Section 23

STORE KEEPER
of the Drug
EiOioi (H), MATIARI

(Rupees: Seventeen Thousand & Four Hundred Only)

For:
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 192

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. OSFOCIN (Fosfomycin) <i>461</i>	226	60ml	300 Botts.	58.00	17,400
					17,400.00

Correctly Received

& Entered in Stock Register on pages

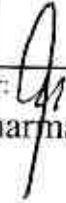
FORM 2A (See rules 10 & 20)

WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business at our Registered Office under the name of M/s. Pharmaxone, do

hereby warrant and guarantee that Drugs and Medicines and described on this Invoice had sold by me do not contravene in any way the Provision of Section 23 of the Drug Act, 1976.

(Rupees: Seventeen Thousand & Four Hundred Only)

For: 
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 193

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. OSFOCIN (Fosfomycin) <i>461</i>	226	60ml	300 Botts.	58.00	17,400
					17,400.00

FORM 2A (See rules 10 & 20)

WARRANTY UNDER SECTION 23 (D) (G) OF THE DRUG ACT, 1976.

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business at our Registered Office under the name of M/s. Pharmaxone, do

hereby give this warranty that Drugs and Medicines and described on this Invoice has sold by me do not contravene in any way the Provision of Section 23

of the Drug Act, 1976.

STORE KEEPER
E.D.O. (H), MATIARI

(Rupees: Seventeen Thousand & Four Hundred Only)

For
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 194

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. OSFOCIN (Fosfomycin) <i>14/61</i>	226	60ml	300 Botts.	58.00	17,400
					<u>17,400.00</u>

FORM 2A (See rules 10 & 20)

WARRANTY UNDER SECTION 23 (1) (i) OF THE DRUG ACT, 1976

I, Mushtaq Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business at our Registered Office under the name of M/s. Pharmaxone, do hereby warrant that Drugs and Medicines and described on this Invoice was sold by me do not contravene in any way the Provision of Section 23 of the Drug Act, 1976.

(Rupees: Seventeen Thousand & Four Hundred Only)

For
Pharmaxone

PharmaXone

Distribution of quality medicines, Bio-medical / Surgical equipment

B-441 2nd Floor, Block-13 F.B Area, Karachi

Ph: 6347576, Fax: 6348586

E-mail: pharmazone@live.com

BILL / INVOICE

INVOICE NO. 195

DATED: 18-04-2012

on Account and risk of Messrs. EXECUTIVE DISTRICT OFFICER (HEALTH), MATIARI

Your supply Order No. EDOH (MAT)/Store/150/2012

Dated: 27-03-2012

PARTICULARS	BATCH NO	PACKING	QUANTITY	RATE	AMOUNT
SYP. OSFOCIN (Fosfomycin) <i>461</i>	226	60ml	200 Botts.	58.00	11,600
EXECUTIVE DISTRICT OFFICER (HEALTH) MATIARI					
<p>Directly Received & Entered in Stock Register on-Page Shown, FORM 2A (See rules 10 & 20)</p> <p>WARRANTY UNDER SECTION 23 (1)(i) OF THE DRUG ACT, 1976:</p> <p><i>[Signature]</i> Ahmed Khan, Proprietor being a person resident in Pakistan carrying on business at our Registered Office under the name of M/s. Pharmaxone, do hereby warrant that Drugs and Medicines and described on this Invoice has sold by me do not contravene in any way the Provision of Section 23 of the Drug Act, 1976.</p> <p><i>[Signature]</i></p> <p>(Rupees: Eleven Thousand & Six Hundred Only)</p>					11,600.00

For
Pharmaxone



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 131

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
Tab Vitamin C 100mg (Blister Pack)	50000	0.35	17500.00
Tab Cotrimaxazole	2000	1.10	2200.00
		TOTAL	Rs.19700.00/-

Correctly Received
& entered in Stock
Registers on-Pages
Shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

[Signature]
JOB KEEPER
MATIARI

[Handwritten signature]

[Handwritten signature]

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrsh-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 132

YOUR ORDER NO EDOH(MAT) Store 093

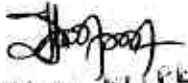
DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
Tab Methly Dopa 250mg (Blister Pack) ¹³	2000	4.00	8000.00
Tab Cotrimaxazole ⁶	10000	1.10	11000.00
		TOTAL	Rs.19000.00/-

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

WARRANTY:

Under section 23 of the Drug Act, 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.


SICIL KILPER
H. MATIAD

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrh-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 133

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
Tab Ofloxacin 400mg	10000	2.00	20000.00
		TOTAL	Rs.20000.00/-

Correctly Received
& Entered in Stock
Register on-Page
Shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 14-03-2012

CUSTOMER NAME:

EDO Health
Matyari

CASH MEMO/BILL # 134

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
Tab Cotrimaxazole	18000	1.10	19800.00
		TOTAL	Rs.19800.00/-

Received
& Entered in Stock
Register on Pages
Shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

STORE KEEPER
EDO (H), MATIARI

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 135

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
SYP Ampicillin 125mg <i>2161</i>	400	22.00	8800.00
Tab Cotrimaxazole <i>195</i>	10000	1.10	11000.00
		TOTAL	Rs.19800.00/-

Correctly Received
& Entered in Stock
Register on-Page
Shown

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

[Signature]
STORE KEEPER
EDO (H), MATYARI

ZAM TRADING CO.
H # 171/D Sadat Colony, Unit-9
Latifabad, Hyderabad-74000

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahr-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 136

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
INJ Ranitidine 50mg	5000	4.00	20000.00
		TOTAL	Rs.20000.00/-

Correctly Received
& Entered in Stock
Register on Pages
Shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice should by us do not contravene in any way the provision of section 23 of Drug Act 1976.

[Signature]
STORE KEEPER
MOI (H), MATIARI

~~Handwritten signature~~

ZAM TRADING CO:
H# 171/D Sadat Colony, Unit No. 9
Latifabad, 35247-700759



Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 137

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
INJ Atropine	1000	2.00	2000.00
SYP Ampicillin 125mg	600	22.00	13200.00
INJ Frusemide 2ml	1500	3.00	4500.00
		TOTAL	Rs.19700.00/-

Correctly Received
& Entered in Stock
Register on-Page
Shown

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

ZAM TRADING CO.
H# 171/D Sadat Colony Unit No: 9
Latifabad. 022-3812451

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahr-eh-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 141

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
INJ Frusemide 2ml	1500	3.00	4500.00
INJ Drotaverin	2000	6.50	13000.00
		TOTAL	Rs.17500.00/-

Correctly Received
& Entered in Stock
Register on Pages
Shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 138

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
INJ B.Complex IM/IV 2ml <i>57</i>	7000	2.70	18900.00
		TOTAL	Rs.18900.00/-

Correctly Received
& Entered in Stock
Register on Pages
Shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

[Signature]
STORE KEEPER
EDO (H), MATIARI

ZAM TRADING CO.
H# 171/9 Sadat Colony, Unit-9
Latifabad, G-22-3913758

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 146

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
Tab Cotrimaxazole	10000	1.10	11000.00
INJ B.Complex IM/IV 2ml	3000	2.70	8100.00
		TOTAL	Rs.19100.00/-

Correctly Received
& Entered in Stock
Register on Pages
shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice

[Signature]

STORE KEEPER

EDO (H), MATYARI

Drug Act 1976.

Stamp: ZAM TRADING CO. KARACHI
17/03/2012

[Signature]

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahr-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 139

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
INJ Cefotaxime 250mg	1000	19.00	19000.00
		TOTAL	Rs.19000.00/-

Correctly Received
Entered in Stock

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice by us do not contravene in any way the provision of section 23 of Drug Act 1976.

STORE KEEPER

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.

Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.

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ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 140

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
INJ Cefotaxime 250mg	1000	19.00	19000.00
		TOTAL	Rs.19000.00/-

Correctly Received

Entered In Stock

Registered on Pages

shown

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

[Signature]
 STORE KEEPER
 EDOH (H), MATIARI

ZAM TRADING CO.
 KJ 171/D Sadat Colony Unit No: 9
 Latifabad Hyderabad

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
 Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
 Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 142

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
CAP Cephadrine 250mg ✓	5000	4.00	20000.00
Received			
in Stock			
		TOTAL	Rs.20000.00/-

Correctly
& returned
Registered on-Page
Shows

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

ZAM TRADING CO.
H# 174D Sadat Colony, Unit-9
Latifabad, Hyderabad

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 14-03-2012

CUSTOMER NAME:

EDO Health
Matyari

CASH MEMO/BILL # 144

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
Benzyle Benzovit Lotion 25% 60ml ✓	1000	14.00	14000.00
		TOTAL	Rs.14000.00/-

Correctly Received
& Entered in Stock
Registers on Pages
shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.


STORE KEEPER
EDO (H), MATIARI

ZAM TRADING CO:
H # 171/D Sadat Colony Unit No: 9
Latifabad, 022-3812451



Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahr-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

Dated: 14-03-2012

CUSTOMER NAME:

EDO Health
Matyari

CASH MEMO/BILL # 143

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
CAP Lincomycin 500mg	2000	5.90	11800.00
SYP Ampicilling 125mg	100	22.00	2200.00
		TOTAL	Rs.14000.00/-

Correctly Received

Entered in Stock

Register on Page

shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

STORE KEEPER

Signature of Store Keeper

Stamp and signature of ZAM Trading Co.

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



ZAM TRADING CO.

Importer, Distributer & General Order Suppliers

CUSTOMER NAME:

Dated: 14-03-2012

EDO Health
Matyari

CASH MEMO/BILL # 145

YOUR ORDER NO EDOH(MAT) Store 093

DATED 27-02-2012

DESCRIPTION	QTY	RATE	TOTAL
SYP Ampicilling 125mg <i>161</i>	900	22.00	19800.00
		TOTAL	Rs.19800.00/-

Correctly Received
& Entered in Stock
Register on-Page
Shown.

WARRANTY:

Under section 23 of the Drug Act 1976 from 2-a being a person resident of Pakistan Carrying on business under the name of ZAM Trading Co. do hereby given this warranty drug described in this invoice sold by us do not contravene in any way the provision of section 23 of Drug Act 1976.

[Signature]
STORE KEEPER
EDO (H), MATIARI

ZAM TRADING CO.
#171/0 Sadat Colony
Latifabad, Hyderabad

[Signature]

Head Office: House # 171, Block-D, Sadat Colony, Unit-9 Latifabad, Hyderabad.
Phone: 022-3812451 Fax: 022-3812451 Mob: 0321-8908758 E-mail: zamtraders@yahoo.com

378 Al Rehman Trade Center, Shahrah-e-Liaquat, Karachi-74000.
Ph: # (92) 21-2424273, 2423350, Fax # (92) 21-2639396, 2625686 E-mail: zamtraders@yahoo.com



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 27

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	1200	10200.00
			Total	10200.00

Total Value: Ten thousand and two hundred rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision

**Correctly Received
& Entered in Stock
Register on-Pages
shown.**

Signature.....
STORE KEEPER
EIOI (H), MATIARI Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 21

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty

Correctly received
Entered in Stock
Register on-Page
own.

STORE KEEPER
E:O:O: (H), MATIARI

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 22

Date:

Executive District Officer (Health)
Matiari

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of M/s Gains Enterprises do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision

Correctly Received
& Entered in Stock
Register on Pages
Shown.

STORE KEYS

FIG:O: 1/1

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 23

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of M/s Gains Enterprises do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section 23(1)-(I) of the Drug Act 1976.

Correctly Received
& Entered in Stock
Register on Page
Shown.

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 24

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml <i>SY</i>	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

Correctly Received

& Entered in Stock

Register on Page

Shown.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

STORE KEEPER
E.O.O. (H)

Signature

M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 25

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

WARRANTY:

Correctly Received

Gains Enterprises
Registered
Hyderabad

Under Section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying on business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

STORE KEEPER

EDOH (H), MATIARI

Signature.....

M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 26

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

WARRANTY:

Correctly received in 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan
& Enterprises carrying business under the name of M/s Gains Enterprises do hereby give this warranty
Registered and Drugs described in this invoice sold by us do not contravene in any way the Provision
shown, of Section.

STORE KEEPER

Signature.....

M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 13

Date:

Executive District Officer (Health)
Matiari

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Tab: Diltiazem 30mg	1.30/each	10000	13000.00
2	Tab: Phenairmen 20mg	0.06/each	116000	6960.00
			Total	19960.00

Total Value: Nineteen thousand nine hundred and sixty rupees only.

WARRANTY:

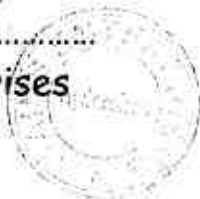
Correctly Received

I, **Enter District Officer** in 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan
registered my business under the name of **M/s Gains Enterprises** do hereby give this warranty
that drugs described in this invoice sold by us do not contravene in any way the Provision
of Section. 7

STORE KEEPER
EDOH (H), MATIARI

Signature.....

M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 20

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

Correctly Received

WARRANTY:

Entered in Stock

Registered

own.

Under Section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 19

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefenemic acid 60ml	8.50/each	2350	19975.00
			Total	19975.00

Total Value: Nineteen thousand nine hundred and seventy five rupees only.

**Correctly Received
& Entered in Stock
Registered on-Pages**

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

STORE KEPT

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 18

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Salbutamol 2mg/5ml <i>25</i>	9.50/each	1600	15200.00
			Total	15200.00

Total Value: Fifteen thousand and two hundred rupees only.

WARRANTY:

*Correctly Received
& Entered in Stock
Register on Page
Shown.*

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of M/s Gains Enterprises do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

STORE KEEPER
E.O.I.O: (H), MATIARI

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 17

Date:

**Executive District Officer (Health)
Matuari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Salbutamol 2mg/5ml <i>AS</i>	9.50/each	2100	19950.00
			Total	19950.00

Total Value: Nineteen thousand nine hundred and fifty rupees only.

WARRANTY:

~~Correctly Received~~ 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan
& Entering into business under the name of **M/s Gains Enterprises** do hereby give this warranty
Registered that the goods described in this invoice sold by us do not contravene in any way the Provision
shown of Section.

STORE KEEPER
E.O.O. (H), MATIARI

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 16

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Salbutamol 2mg/5ml	9.50/each	2100	19950.00
			Total	19950.00

Total Value: Nineteen thousand nine hundred and fifty rupees only.

WARRANTY:

I, the undersigned, section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan
& carrying business under the name of M/s Gains Enterprises do hereby give this warranty
that the drugs described in this invoice sold by us do not contravene in any way the Provision
shown, of Section.

STOR 152
EDOH (H), MATIARI

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 15

Date:

Executive District Officer (Health)
Matari

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Salbutamol 2mg/5ml	9.50/each	2100	19950.00
			Total	19950.00

Total Value: Nineteen thousand nine hundred and fifty rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan
I hereby receive the goods under the name of **M/s Gains Enterprises** do hereby give this warranty
& ensure that the goods described in this invoice sold by us do not contravene in any way the Provision
Regd. at Sec 106
shown.

STORE KEEPER

Signature.....

M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 14

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/152

Dated: 27/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Salbutamol 2mg/5ml	9.50/each	2100	19950.00
			Total	19950.00

Total Value: Nineteen thousand nine hundred and fifty rupees only.

WARRANTY:

Correctly Received
& Entered in Stock Register
Under Section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying on business under the name of **M/s Gains Enterprises** do hereby give this warranty that the goods described in this invoice sold by us do not contravene in any way the Provision of Section.

STORE KEEPER

F.O.P.

Signature.....

M/S Gains Enterprises



LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'Ll Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 214

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Syp: Rifampicin 2% 60ml	433	513	38.95	19,981.35

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.35
Disc.Amount :-	0.00
Net Amount :-	19,981.35

Handwritten signature

For M/s. Life Line Trading Company

Shop # 10, Hina Heights Market Road, Hyderabad. Tel: +92-22-2611340, Cell: +92-333-2621464

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 214

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Syp: Rifampicin 2% 60ml	513	0

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date :-
Order No. :- EDOH (Mat)/ 143 /2012
Invoice No. :- 215

Party Name :- E.D.O (Health) Mat i a r i.
Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Syp: Rifampicin 2% 60ml	433	513	38.95	19,981.35

H → mat

Correctly Received
& Entered in Stock
Register on-Pages
shown

STORE KEEPER
E:O:O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.35
Disc.Amount :-	0.00
Net Amount :-	19,981.35

A. Khalique

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 215

Party Name :- E.D.O (Health) Mat i a r i .

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Syp: Rifampicin 2% 60ml	513	

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 216

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Syp: Rifampicin 2% 60ml	433	513	38.95	19,981.35

Handwritten signature

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.35
Disc.Amount :-	0.00
Net Amount :-	19,981.35

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 216

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Syp: Rifampicin 2% 60ml	513	

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve LI Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 217

Party Name :- E.D.O (Health) Mat i a r i

Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Syp: Rifampicin 2% 60ml	433	461	38.95	17,955.95

Aman

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	17,955.95
Disc.Amount :-	0.00
Net Amount :-	17,955.95

A. Khalique

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 217

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Syp: Rifampicin 2% 60ml	461	

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 218

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	inj: Cimitidine 2ml	435	4250	4.70	19,975.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,975.00
Disc.Amount :-	0.00
Net Amount :-	19,975.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

serve ll best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 218

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	inj: Cimitidine 2ml	4250	

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 219

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	inj: Cimitidine 2ml		1750	4.70	8,225.00
2	Cap: Piroxicam 20mg		12000	0.59	7,080.00

Handwritten notes: 435 and 19.5

Handwritten signature/initials

**Correctly Received
& Entered in Stock
Register on-Pages
Shown.**

STORE KEEPER
E.D.O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	15,305.00
Disc.Amount :-	0.00
Net Amount :-	15,305.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 219

Party Name :- **E.D.O (Health) Matiarl**

Address :- **Matiarl**

S#	P_Name	Qty	Batch #
1	inj: Cimitidine 2ml	1750	
2	Cap: Piroxicam 20mg	12000	

Number of Items 2



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date :-
Order No. :- EDOH (Mat)/ 143 /2012
Invoice No. :- 220

Party Name :- E.D.O (Health) Mat i a r i.
Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Tab: Piraxicam	197	10000	0.59	5,900.00
2	Inj: Transamine	1288	1215	11.54	14,021.10

Am

**Correctly Received
& Entered in Stock
Register on-Pages
Shown.**

STORE KEEPER
E:O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,921.10
Disc.Amount :-	0.00
Net Amount :-	19,921.10

(Signature)
For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012


Ref No. :- 220

Party Name :- E.D.O (Health) Mat i a r i

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Tab: Piraxicam	10000	:
2	Inj: Transamine	1215	:

Number of Items 2



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat) 143 /2012

Invoice No. :- 221

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj. Transamine		1733	11.54	19,998.82

A → → →

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,998.82
Disc.Amount :-	0.00
Net Amount :-	19,998.82

A. Khaliq

For M/s Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 221

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Transamine	1733	:

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 222

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Transamine	<i>1299</i>	1733	11.54	19,998.82

A → in am

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,998.82
Disc.Amount :-	0.00
Net Amount :-	19,998.82

A. Khaliq

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 222

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Transamine	1733	:

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date :-
Order No. :- EDOH (Mat)/ 143 /2012
Invoice No. :- 223

Party Name :- E.D.O (Health) Mat i a r i.
Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Tab: Frusemide 40mg	L343	5000	0.68	3,400.00
2	Inj: Diminhydrinate 5ml	L437	1744	3.25	5,668.00
3	Inj: Transamine	L299	319	11.54	3,681.26
4	Tab: Diminhydrinate	L431	10500	0.69	7,245.00

Handwritten signature

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,994.26
Disc.Amount :-	0.00
Net Amount :-	19,994.26

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'Ll Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 223

Party Name :- E.D.O (Health) Mat i a r i .

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Tab: Frusemide 40mg	5000	:
2	Inj: Diminhydrinate 5ml	1744	:
3	Inj: Transamine	319	:
4	Tab: Diminhydrinate	10500	:

Number of Items 4



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 224

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Diminhydrinate 5ml	437	6150	3.25	19,987.50

Handwritten signature

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,987.50
Disc.Amount :-	0.00
Net Amount :-	19,987.50

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 224

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Diminhydrinate 5ml	6150	:

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE**TRADING COMPANY**
Distributors & Institutional Suppliers*Serve U Best***Sales Invoice**

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 225

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Diminhydrinate 5ml		2106	3.25	6,844.50
2	Cap: Transamin 250mg		2450	5.35	13,107.50

*H. Man***WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.**

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,952.00
Disc.Amount :-	0.00
Net Amount :-	19,952.00

A. Khalique

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 225

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Diminhydrinate 5ml	2106	:
2	Cap: Transamin 250mg	2450	:

Number of Items 2



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 226

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Cap: Transamin 250mg	783	3735	5.35	19,982.25

A. K. Rajput

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,982.25
Disc.Amount :-	0.00
Net Amount :-	19,982.25

A. Khaliq

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 226

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Cap: Transamin 250mg	3735	

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'U Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 227

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Cap: Transamin 250mg	303	3735	5.35	19,982.25

H. Issan

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,982.25
Disc.Amount :-	0.00
Net Amount :-	19,982.25

A. Khalique

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 227

Party Name :- **E.D.O (Health) Mat i a r i.**

Address :- **Mat i a r i**

S#	P Name	Qty	Batch #
1	Cap: Transamin 250mg	3735	

Number of Items 1



For M/s. Life Line Trading Compa

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'Ll Best

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Invoice No. :- 228

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Cap: Transamin 250mg	303	80	5.35	428.00
2	Xylocain Jelly	325	379	17.85	6,765.15
3	Inj: Diazepam 5mg	245	1000	5.10	5,100.00

Handwritten signature

Correctly Received
6 Entered in Stock
Register on-Pages
shown.

STORE KEEPER
E.D.O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	12,293.15
Disc.Amount :-	0.00
Net Amount :-	12,293.15

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 143 /2012

Ref No. :- 228

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	P Name	Qty	Batch #
1	Cap: Transamin 250mg	80	:
2	Xylocain J e l l y	379	:
3	Inj: Diazepam 5mg	1000	:

Number of Items 3



For M/s. Life Line Trading Compa



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 524

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	353	29	689.00	19,981.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 524

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18-23	29	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 523

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Blood Plasma Substitute 500ml with Set	333	72	275.00	19,800.00

Hassan

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,800.00
Disc.Amount :-	0.00
Net Amount :-	19,800.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 523

Party Name :- **E.D.O (Health) Matari**

Address :- Matari

S#	P Name	Qty	Batch #
1	Blood Plasma Substitute 500ml with Set	72	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 522

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Blood Plasma Substitute 500ml with Set	333	72	275.00	19,800.00

Hassan

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,800.00
Disc.Amount :-	0.00
Net Amount :-	19,800.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 522

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Blood Plasma Substitute 500ml with Set	72	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 519

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Blood Plasma Substitute 500ml with Set	1353	72	275.00	19,800.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,800.00
Disc.Amount :-	0.00
Net Amount :-	19,800.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 519

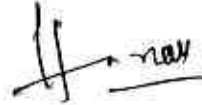
Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Blood Plasma Substitute 500ml with Set	72	:

Number of Items 1





For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 521

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Blood Plasma Substitute 500ml with Set	L333	72	275.00	19,800.00

A. Razzaq

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,800.00
Disc.Amount :-	0.00
Net Amount :-	19,800.00

A. Razzaq
For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 521

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Blood Plasma Substitute 500ml with Set	72	:

Number of Items 1

S. Khan

Hassan

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 520

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Blood Plasma Substitute 500ml with Set	333	72	275.00	19,800.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,800.00
Disc.Amount :-	0.00
Net Amount :-	19,800.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 520

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P_Name	Qty	Batch #
1	Blood Plasma Substitute 500ml with Set	72	

Number of Items 1

[Handwritten signature]

[Handwritten signature]

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 525

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	353	29	689.00	19,981.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat) 144 /2012

Ref No. :- 525

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	

Number of Items 1

[Signature]

H. new

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 526

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

353

A. Razzaq

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 526

Party Name :- **E.D.O (Health) Matiari.**

Address :- Matiari

S#	P_Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 527

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

A. Razzaq

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

A. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 527

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18-23	29	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 528

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

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WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 528

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

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H. Mury

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 529

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

Handwritten signature

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 529

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 530

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30	235	50	389.90	19,495.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (I) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 530

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 531

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30	1235	50	389.90	19,495.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 531

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 532

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

Handwritten signature/initials

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 532

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Inj: Humulin 70/30	50	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 533

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	44	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 534

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

1353

[Signature]

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

[Signature]

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :-

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 534

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18-23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Invoice No. :- 535

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23	353	5	689.00	3,445.00
2	Blood Plasma Substitute 500ml with Set	333	40	275.00	11,000.00

[Handwritten signature]

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	14,445.00
Disc.Amount :-	0.00
Net Amount :-	14,445.00

[Handwritten signature]

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (Mat)/ 144 /2012

Ref No. :- 535

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	5	:
2	Blood Plasma Substitute 500ml with Set	40	:

Number of Items 2

For M/s. A to Zee International



Hospital Services & Sales

Head Office: 13-C, Annexe, Block-6, P.E.C.H.S., Shahrah-e-Faisal, Karachi.
Tel: +92-21-38270244 Fax: +92-21-34538792, E-mail: hssintl@cyber.net.pk

NTN #: 0685621-5

S.Tax Regn #: 12-00-3000-506-64

Original

Customer AKHTER SUPPLY 2011-12
THE EXECUTIVE DISTRICT OFFICER

Address MATIARI BUS STOP

City MATIARI

NTN / NIC #: **Gst. No**

Invoice No 12000290

Invoice Date 14-03-2012

Order No.

Order Date - -

Salesman

Sr #	Product Name	Unit Price	Qty	Bonus	Disc %age	Total Amount
1	INDIRAB VIAL 1 Dose + Syr. Dil. Lot No: 62AN11012 Expiry : 31-03-2014	423.00	30	0	0.00	12,690.00
NO. OF ITEMS : 1 Only		TOTAL				12,690

Correctly Received & Entered in Stock Register on-Pages Shown.

Handwritten signature: Hossain

Handwritten signature

INCOME TAX 3.5 % EXEMPTION

(Vide CBR,SRO. No. 97(1)/2002 Dated :12/02/2002)

WARRANTY : FORM 2-A, (SEE RULES 19 & 30) Warranty under section 23 (1) of the Drug Act 1976.
I being a person resident in Pakistan carrying business under the name of Hospital Services & Sales, 45, Sunny Plaza, Haarat Mohani Road, Karachi and being an Authorized Agent / Distributor hereby give warranty that the drug described above as sold by us specified and contained in the bill of sale do not contravene in any way of the provision of Section 23 of the Drug Act 1976.

NOTE: 1) For dated items we must be informed in writing SIX Months prior to expiry alongwith invoice copy.
2) Product should be checked at the time of delivery. No claim will be entertained of Breakage, Leakage and Shortage.
3) Any income tax deduction from invoice cheques paid or certificate must be sent alongwith payment.
4) This warranty does not apply to Unani, Homeopathic and Bio-Chemic system of medicine and General Items, if any mentioned in this invoice / cash memo.

I do hereby affirm that I have received the goods and that I am holding a valid drug sales licence for the above name establishment / that I am registered medical practitioner.

Prepared by: *[Signature]*

Delivered by:

[Signature]
For Hospital Services & Sales

Signature of goods recipient firm / R.M.P.



Hospital Services & Sales

Head Office: 13-C, Annexe, Block-6, P.E.C.H.S., Shahrah-e-Faisal, Karachi.
Tel: +92-21-38270244 Fax: +92-21-34538792, E-mail: hssintl@cyber.net.pk

NTN #: 0685621-5

S.Tax Regn #: 12-00-3000-506-64

Original

Customer AKHTER TENDER SUPPLY
THE EXECUTIVE DISTRICT OFFICER

Address , MATIARI BUS STOP

City MATIARI

NTN / NIC #: **Gst. No**

Invoice No 12000289

Invoice Date 14-03-2012

Order No. 107

Order Date 07-03-2012

Salesman

Sr.#	Product Name	Unit Price	Qty	Bonus	Disc %age	Total Amount
1	INDIRAB VIAL 1 Dose + Syr. Dtl. Lot No: 62AN11012 Expiry: 31-03-2014	423.00	25	0	0.00	10,575.00
NO. OF ITEMS : 1 Only		TOTAL				10,575

INCOME TAX 3.5 % EXEMPTION
(Vide CBR,SRO. No. 97(1)/2002 Dated :12/02/2002)

WARRANTY : FORM 2-A. (SEE RULES 19 & 30) Warranty under section 23 (1) of the Drug Act 1976.
I being a person resident in Pakistan carrying business under the name of Hospital Services & Sales, 45, Sunny Plaza, Hasrat Mohani Road, Karachi and being an Authorized Agent / Distributor hereby give warranty that the drug described above as sold by us specified and contained in the bill of sale do not contravene in any way of the provision of Section 23 of the Drug Act 1976.

NOTE: 1) For dated items we must be informed in writing Six Months prior to expiry alongwith invoice copy.
2) Product should be checked at the time of delivery. No claim will be entertained of Breakage, Leakage and Shortage.
3) Any income tax deduction from invoice challan paid or certificate must be sent alongwith payment.
4) This warranty does not apply to Unani, Homeopathic and Bio-Chemic system of medicine and General Items, if any mentioned in this invoice / cash memo.

I do hereby affirm that I have received the goods and that I am holding a valid drug sales licence for the above name establishment / that I am registered medical practitioner.

Prepared by:

Delivered by:

For Hospital Services & Sales

Signature of goods recipient firm / R.M.P.



Hospital Services & Sales

Head Office: 13-C, Annexe, Block-5, P.E.C.H.S., Shahrah-e-Faisal, Karachi.
Tel: +92-21-38270244 Fax: +92-21-34538792, E-mail: hssintl@cyber.net.pk

NTN #: 0685621-5

S.Tax Regn #: 12-00-3000-506-64

Original

Customer AKHTER SUPPLY FOR 2011-12
THE EXECUTIVE DISTRICT OFFICER

Address , MATIARI BUS STOP

City MATIARI

NTN / NIC #: **Gst. No**

Invoice No 12000288

Invoice Date 14-03-2012

Order No. 107

Order Date 07-03-2012

Salesman

Sr #	Product Name	Unit Price	Qty	Bonus	Disc %age	Total Amount
1	INDIRAB VIAL 1 Dose + Syr. Dil. Lot.No: 62AN11012 Expiry : 31-03-2014	423.00	45	0	0.00	19,035.00
NO. OF ITEMS : 1 Only		TOTAL				19,035

238

Hasan

Correctly Received & Entered in Stock Register on-Pages shown.

INCOME TAX 3.5 % EXEMPTION

(Vide CBR,SRO. No. 97(1)/2002 Dated :12/02/2002)

WARRANTY : FORM 2-A. (SEE RULES 19 & 30) Warranty under section 23 (1) of the Drug Act 1976.
I being a person resident in Pakistan carrying business under the name of Hospital Services & Sales, 45 Sunny Plaza, Hasrat Mohani Road, Karachi and being an Authorized Agent / Distributor hereby give warranty that the drug described above as sold by us specified and contained in the bill of sale do not contravene in any way of the provision of Section 23 of the Drug Act 1976.

NOTE: 1) For dated items we must be informed in writing SIX Months prior to expiry alongwith invoice copy.
2) Product should be checked at the time of delivery. No claim will be entertained of Breakage, Leakage and Shortage.
3) Any income tax deduction from invoice challan paid or certificate must be sent alongwith payment.
4) This warranty does not apply to Unani, Homeopathic and Bio-Chemic system of medicine and General Items, if any mentioned in this invoice / cash memo.

I do hereby affirm that I have received the goods and that I am holding a valid drug sales licence for the above name establishment / that I am registered medical practitioner.

Prepared by:

Delivered by:

For Hospital Services & Sales

Signature of goods recipient firm / R.M.P.



Hospital Services & Sales

Head Office: 13-C, Annexe, Block-6, P.E.C.H.S., Shahrah-e-Faisal, Karachi.
Tel: +92-21-38270244 Fax: +92-21-34538792, E-mail: hssintl@cyber.net.pk

NTN #: 0685621-5

S.Tax Regn #: 12-00-3000-506-64

Original

Customer AKHTER ORDER 2011-12
THE EXECUTIVE DISTRICT OFFICER

Address , MATIARI BUS STOP

City MATIARI

NTN / NIC #: **Gst. No**

Invoice No 12000287

Invoice Date 14-03-2012

Order No. 107

Order Date 07-03-2012

Salesman

Sr #	Product Name	Unit Price	Qty	Bonus	Disc %age	Total Amount
1	INDIRAB VIAL 1 Dose + Syr. Dil. Lot No: 62AN11012 Expiry : 31-03-2014	423.00	45	0	0.00	19,035.00
NO. OF ITEMS : 1 Only		TOTAL				19,035

Handwritten notes: 1238, Hanan, [Signature]

INCOME TAX 3.5 % EXEMPTION

(Vide CBR,SRO. No. 97(1)/2002 Dated :12/02/2002)

WARRANTY : FORM 2-A, (SEE RULES 19 & 30) Warranty under section 23 (1) of the Drug Act 1976.
I being a person resident in Pakistan carrying business under the name of Hospital Services & Sales, 45, Sunny Plaza, Hissar Mohani Road, Karachi and being an Authorized Agent / Distributor hereby give warranty that the drug described above as sold by us specified and contained in the bill of sale do not contravene in any way of the provision of Section 23 of the Drug Act 1976.

- NOTE:**
- 1) For dated items we must be informed in writing Six Months prior to expiry alongwith invoice copy.
 - 2) Product should be checked at the time of delivery. No claim will be entertained of Breakage, Leakage and Shortage.
 - 3) Any Income tax deduction from invoice challan paid or certificate must be sent alongwith payment.
 - 4) This warranty does not apply to Unani, Homeopathic and Bio-Chemical system of medicine and General items, if any mentioned in this invoice / cash memo.

I do hereby affirm that I have received the goods and that I am holding a valid drug sales licence for the above name establishment / that I am registered medical practitioner.

[Signature]
Prepared by:

[Signature]
Delivered by:

[Signature]
For Hospital Services & Sales

Signature of goods recipient firm / R.M.F

MEDI MARK PHARMACEUTICALS

To
E.D.O (Health)
Matiari

Invoice No. 001/3/12

Invoice Date,

Order No. 132 21/3/12

SR #	PRODUCT	PACKING	PRICE	DISCOUNT	NET PRICE	RATE	QTY	VALUE
1.	Inj: Amikacine Sulphate 500 mg	Vial	250/=	10 per vial	240/= Per Vial	240/=	83 Vial	19,920/=
								19,920/=

TOTAL INVOICE VALUE 19,920 /=-

WARRANTY

We are M/S Medi Mark Pharmaceutical carrying of business as importer, holding valid license no. 549/D (and being authorization holder in case of distributor and duly authorized on form 2b) that the here above described as sold indented by me specified and contained in the bill of sale invoice bill of lading or other documents describing the goods referred to herein do not controversy in any way the provision of section 23 of the drug act.


SIGNATURE

HEAD OFFICE:

588-B/1, Liaquat Chowk
Sahiwal
Ph: 0092-404-226221
Fax:0092-404-66698

REGIONAL OFFICE

102,6-Civic Center Moon
Market Gulshan Ravi
Lahore
Ph/Fax.0092-42-37419543

MEDI MARK PHARMACEUTICALS

To
E.D.O (Health)
Matiari

Invoice No. 002/3/12

Invoice Date,

Order No. 132 21/3/12

SR #	PRODUCT	PACKING	PRICE	DISCOUNT	NET PRICE	RATE	QTY	VALUE
1.	Inj: Amikacine Sulphate 500 mg	U.S. Vial	250/=	10 per vial	240/= Per Vial	240/=	83 Vial	19,920/=
								19,920/=

TOTAL INVOICE VALUE 19,920 /=-

WARRANTY

We are M/S Medi Mark Pharmaceutical carrying of business as importer, holding valid license no. 549/D (and being authorization holder in case of distributor and duly authorized on form 2b) that the here above de4scribed as sold indented by me specified and contained in the bill of sale invoice bill of lading or other documents describing the goods referred to herein do not controversy in any way the provision of section 23 of the drug act.

Correctly Received
& Entered In Stock
Register on-Pages
shown

Handwritten signature/initials

Handwritten signature

SIGNATURE

Handwritten signature

STORE KEEPER
E.D.O: (H), MATIARI

HEAD OFFICE:

588-B/1, Liaquat Chowk
Sahiwal
Ph: 0092-404-226221
Fax:0092-404-66698

REGIONAL OFFICE

102,6-Civic Center Moon
Market Gulshan Ravi
Lahore
Ph/Fax.0092-42-37419543

MEDI MARK PHARMACEUTICALS

To
E.D.O (Health)
Matiari

Invoice No. 003/3/12

Invoice Date,

Order No. 132

21/3/12

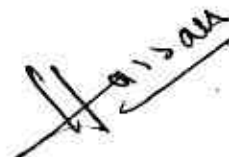
SR #	PRODUCT	PACKING	PRICE	DISCOUNT	NET PRICE	RATE	QTY	VALUE
1.	Inj: Amikacine Sulphate 500 mg	Vial	250/=	10 per vial	240/= Per Vial	240/=	83 Vial	19,920/=
								19,920/=

TOTAL INVOICE VALUE 19,920 /=

WARRANTY

We are M/S Medi Mark Pharmaceutical carrying of business as importer, holding valid license no. 549/D (and being authorization holder in case of distributor and duly authorized on form 2b) that the here above described as sold indented by me specified and contained in the bill of sale invoice bill of lading or other documents describing the goods referred to herein do not controversy in any way the provision of section 23 of the drug act.


STORE KEEPER
E.D.O (H), MATIARI




SIGNATURE

HEAD OFFICE:

588-B/1, Liaquat Chowk
Sahiwal
Ph: 0092-404-226221
Fax:0092-404-66698

REGIONAL OFFICE

102,6-Civic Center Moon
Market Gulshan Ravi
Lahore
Ph/Fax.0092-42-37419543

MEDI MARK PHARMACEUTICALS

To
E.D.O (Health)
Matiari

Invoice No. 004/3/12

Invoice Date,

Order No. 132

21/3/12

SR #	PRODUCT	PACKING	PRICE	DISCOUNT	NET PRICE	RATE	QTY	VALUE
1.	Inj: Amikacine Sulphate 500 mg	<i>USA</i> Vial	250/=	10 per vial	240/= Per Vial	240/=	83 Vial	19,920/=
								19,920/=

TOTAL INVOICE VALUE 19,920 /=-

WARRANTY

We are M/S Medi Mark Pharmaceutical carrying of business as importer, holding valid license no. 549/D (and being authorization holder in case of distributor and duly authorized on form 2b) that the here above de4scribed as sold indented by me specified and contained in the bill of sale invoice bill of lading or other documents describing the goods referred to herein do not controversy in any way the provision of section 23 of the drug act.

**Quantity Received
& Entered in Stock
Register on-Pages
Shown**

Handwritten signature and date: 21/3/12

Handwritten signature
SIGNATURE

Handwritten signature
STORE KEEPER
E.O.O: (H), MATIARI

HEAD OFFICE:

588-B/1, Liaquat Chowk
Sahiwal
Ph: 0092-404-226221
Fax:0092-404-66698

REGIONAL OFFICE

102,6-Civic Center Moon
Market Gulshan Ravi
Lahore
Ph/Fax.0092-42-37419543

MEDI MARK PHARMACEUTICALS

To
E.D.O (Health)
Matiari

Invoice No. 005/3/12

Invoice Date,

Order No. 132 21/3/12

SR #	PRODUCT	PACKING	PRICE	DISCOUNT	NET PRICE	RATE	QTY	VALUE
1.	Inj: Amikacine Sulphate 500 mg	Vial	250/=	10 per vial	240/= Per Vial	240/=	83 Vial	19,920/=
								19,920/=

TOTAL INVOICE VALUE 19,920 /=-

WARRANTY

We are M/S Medi Mark Pharmaceutical carrying of business as importer, holding valid license no. 549/D (and being authorization holder in case of distributor and duly authorized on form 2b) that the here above described as sold indented by me specified and contained in the bill of sale invoice bill of lading or other documents describing the goods referred to herein do not controversy in any way the provision

of section 23 of the drug act.

19,920

[Signature]

SIGNATURE

[Signature]

STORE KEEPER
E.D.O (H), MATIARI

HEAD OFFICE:

588-B/1, Liaquat Chowk
Sahiwal
Ph: 0092-404-226221
Fax:0092-404-66698

REGIONAL OFFICE

102,6-Civic Center Moon
Market Gulshan Ravi
Lahore
Ph/Fax.0092-42-37419543

MEDI MARK PHARMACEUTICALS

To

E.D.O (Health)

Matiari

Invoice No. 006/3/12

Invoice Date,

Order No. 132

21/3/12

SR #	PRODUCT	PACKING	PRICE	DISCOUNT	NET PRICE	RATE	QTY	VALUE
1.	Inj: Amikacine Sulphate 500 mg	10 Vial	250/=	10 per vial	240/= Per Vial	240/=	83 Vial	19,920/=
								19,920/=

TOTAL INVOICE VALUE 19,920 /=

WARRANTY

We are M/S Medi Mark Pharmaceutical carrying of business as importer, holding valid license no. 549/D (and being authorization holder in case of distributor and duly authorized on form 2b) that the here above described as sold indented by me specified and contained in the bill of sale invoice bill of lading or other documents describing the goods referred to herein do not controversy in any way the provision

of section 23. of the drug act.

[Faint handwritten text]

[Handwritten signature]

[Handwritten signature]

[Handwritten signature]

SIGNATURE

HEAD OFFICE:

588-B/1, Liaquat Chowk
Sahiwal
Ph: 0092-404-226221
Fax:0092-404-66698

REGIONAL OFFICE

102,6-Civic Center Moon
Market Gulshan Ravi
Lahore
Ph/Fax.0092-42-37419543



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 12

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

Correctly
& Entered
Register on
Pages
Shown.

S.#	Description	Rate	Quantity	Amount
1	Drop: Gentacin Eye/Ear drops	7.85/each	1600	12560.00
			Total	12560.00

Total Value: Twelve thousand five hundred and sixty rupees only.

STORE KEEPER
B.O/O: (H), MATIARI

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature.....
M/S Gains Enterprises



Handwritten signature/initials



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 11

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Drop: Gentacin Eye/Ear drops	7.85/each	1515	11893.00
Total			1515	11893.00

Correctly Received & Entered in Register on Pages Shown.

Total Value: Eleven thousand eight hundred and ninety three rupees only.

STORE KEEPER

EDOH (H), MATIARI

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature.....

M/S Gains Enterprises



Handwritten signature



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 07

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Aluminum +Meg+other compound Bott: of 20ml	10.60/each	1250	13250.00
	Syp: Mefnemic acid 60ml bott:	8.50/each	780	6630.00
Total				19880.00

Total Value: Nineteen thousand eight hundred and eighty rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of M/s Gains Enterprises do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature _____
M/S Gains Enterprises



Handwritten signature



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 08

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

Correctly
& Entered
Register
Shown.

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefnemic acid 60ml bott: <i>3</i>	8.50/each	2300	19550.00
			Total	19550.00

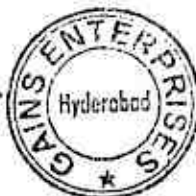
Total Value: Nineteen thousand five hundred and fifty rupees only.

WARRANTY:

STORE KEEPER

EO:OI (H), MATIARI Section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of M/s Gains Enterprises do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature *35500mto*
M/S Gains Enterprises



Hasan



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 09

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

Correctly
& Entered
Register on-
Pages
Shown.

S.#	Description	Rate	Quantity	Amount
✓	1000000p: Mefnemic acid 60ml bott:	8.50/each	2320	19720.00
			Total	19720.00

Total Value: Nineteen thousand seven hundred and twenty rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature.....
M/S Gains Enterprises



[Handwritten signature]



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 10

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

Correctly
& Entered
Registers
shown.

S.#	Description	Rate	Quantity	Amount
1	Syp: Mefnemic acid 60ml bott:	8.50/each	600	5100.00
2	Drop: Gentacin Eye/Ear drops	7.85/each	1885	14797.00
			Total	19897.00

Total Value: Nineteen thousand eight hundred and ninety seven rupees only.

STORE KEEPER

EO:O: (H), MATIARI

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of M/s Gains Enterprises do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature *Zafar*

M/S Gains Enterprises



[Handwritten signature]



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 04

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Salbutamol	9.50/each	2000	19000.00
Total Value: Nineteen thousand rupees only.			Total	19000.00

Correctly Received
in Stock
Registered in Pages
shown.

WARRANTY:

STORE KEEPER
EDOH (H), MATIARI

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature.....
M/S Gains Enterprises



Hassan



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 05

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Aluminum +Meg+other compound Bott: of 20ml	10.60/each	1875	19875.00
Total Value: Nineteen thousand eight hundred and seventy five rupees only.			Total	19875.00

Correctly
& Entered
Registered
Shown

WARRANTY:

STORE KEEPER
E.O.O: (H), MATIARI

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature.....
M/S Gains Enterprises



Handwritten signature



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 02

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Tab: Folic acid 5mg	0.06/each	50000	3000.00
2	Tab: Diltiazem 30mg	1.30/each	5000	6500.00
3	Syn: Salbutamol	9.50	1000	9500.00
Total Value: Nineteen thousand rupees only.			Total	19000.00

Correctly
& Entered
Rep: _____
Store: _____

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of **M/s Gains Enterprises** do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature.....
M/S Gains Enterprises



Handwritten signature



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 03

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Salbutamol	9.50/each	2000	19000.00
Total Value: Nineteen thousand rupees only.			Total	19000.00

Correctly Received
& Entered in Stock
Register of
shown

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan
STORE KEEPER MATIARI
EDOH (H) MATIARI
that drugs described in this invoice sold by us do not contravene in any way the Provision
of Section.

Signature _____
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 01

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Tr. Benzoin Co 450ml <i>375</i>	110/each	125	13750.00
2	Tab: Phenarmine 20mg <i>26</i>	0.06/each	100000	6000.00
Total			19750.00	

Correctly
& Entered
Register
shown.

Total Value: Nineteen thousand seven hundred and fifty rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan
doing business under the name of **M/s Gains Enterprises** do hereby give this warranty
that drugs described in this invoice sold by us do not contravene in any way the Provision
of Section.

Signature.....
M/S Gains Enterprises





Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

INVOICE/BILL

Bill #: 06

Date:

**Executive District Officer (Health)
Matiari**

EDOH (MAT)/Store/105/2012

Dated: 06/3/2012

S.#	Description	Rate	Quantity	Amount
1	Syp: Aluminum +Meg+other compound Bott: of 20ml <i>35</i>	10.60/each	1875	19875.00
			Total	19875.00

Total Value: Nineteen thousand eight hundred and seventy five rupees only.

WARRANTY:

Under section 23(1)-(I) Drug Act 1976 Form 2-A being a person resident of Pakistan carrying business under the name of M/s Gains Enterprises do hereby give this warranty that drugs described in this invoice sold by us do not contravene in any way the Provision of Section.

Signature..... *33/06/12*

M/S Gains Enterprises



Hassan



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 477

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

Handwritten signature/initials

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 477

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 476

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

*Correctly Received
& Entered in Stock
Register on-Pages
Shown.*

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

A. Razzaq
For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 476

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 475

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

Handwritten signature/initials

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 475

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	P_Name	Qty	Batch #
1	Intra Ocular Lens Nos: 18-23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 101
Invoice No. :- 474

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

Matari

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :- 19,981.00
Disc.Amount :- 0.00
Net Amount :- 19,981.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 474

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

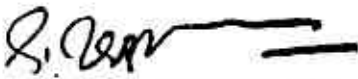
Delivery Challan

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 101
Ref No. :- 481

Party Name :- E.D.O (Health) Matari
Address :- Matari

S#	P_Name	Qty	Batch #
1	Anti-A Serum 10ml	27	:
2	Anti-B Serum 10ml	28	:

Number of Items 2



For M/s. A to Zee International



Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 481

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Anti-A Serum 10ml	27	:
2	Anti-B Serum 10ml	28	:

Number of Items 2

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 101
Invoice No. :- 473

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

Handwritten signature/initials

**Correctly Received
& Entered in Stock
Register on-Pages
Shown.**

**STORE KEEPER
E.D.O (H), MATIARI**

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

Handwritten signature

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 473

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 472

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

1234

11 AM

Correctly Received
& Entered in Stock
Register on Pages
Shown.

STORE KEEPER
E.D.O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

S. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :	Party Name :- E.D.O (Health) Matari.
Order No. :- EDOH (MAT)Store/ 101	Address :- Matari
Ref No. :- 472	

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 471

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

1734

Correctly Received

Entered in Stock

Register on Pages

Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

A. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 471

Party Name :- **E.D.O (Health) Matari.**

Address :- Matari

S#	P_Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 470

Party Name :- E.D.O (Health) Matiari.

Address :- Matiari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Humulin 70/30		50	389.90	19,495.00

1234
AS

Correctly Received
& Entered in Stock
Register on Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,495.00
Disc.Amount :-	0.00
Net Amount :-	19,495.00

A. Razzaq

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 470

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Humulin 70/30	50	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 480

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		26	689.00	17,914.00

353
11/3/12
AS

Correctly Received
& Entered in Stock
Register on Pages
Shown.

STOCK KEEPER
E.D.O (H), MATARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	17,914.00
Disc.Amount :-	0.00
Net Amount :-	17,914.00

S. Razzaq
For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 480

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	26	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 479

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

Correctly Received
& Entered in Stock
Register on Pages
Shown.

STORE KEEPER
E.D.O (H), MATARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00


For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 479

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	:

Number of Items 1

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96-1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad. Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Invoice No. :- 478

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Intra Ocular Lens Nos. 18-23		29	689.00	19,981.00

1353
[Signature]

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I A.Razzaq being a person resident in Pakistan carrying on business Under the name of A to Zee International at A96-1725 Civil Hospital Road Hyderabad.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,981.00
Disc.Amount :-	0.00
Net Amount :-	19,981.00

[Signature]

For M/s. A to Zee International



A to Zee International

GENERAL ORDER SUPPLIERS

We distribute quality nationwide

A96--1725, Mezzanine Floor Near Pakistan Corporation Hospital Road Hyderabad, Mob: 0300-8375677, Phone & Fax: +92-22-2630089

Delivery Challan

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 101

Ref No. :- 478

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Intra Ocular Lens Nos. 18~23	29	

Number of Items 1

For M/s. A to Zee International

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 188

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Syp: Rifampicin 2% 60ml	433	500	38.95	19,475.00

Handwritten signature/initials

Correctly Received
& Entered in Stock
Register on-Page
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,475.00
Disc.Amount :-	0.00
Net Amount :-	19,475.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 188

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Syp: Rifampicin 2% 60ml	500	:

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 187

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Syp: Rifampicin 2% 60ml	433	500	38.95	19,475.00

*Correctly Received
& Entered in Stock
Register on Pages
shown.*

STORE KEEPER
E.D.O. (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,475.00
Disc.Amount :-	0.00
Net Amount :-	19,475.00



For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date :	Party Name :- E.D.O (Health) Mat i a r i.
Order No. :- EDOH (MAT)Store/ 102	Address :- Mat i a r i
Ref No. :- 187	

S#	P Name	Qty	Batch #
1	Syp: Rifampicin 2% 60ml	500	:

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 186

Party Name :- E.D.O (Health) Matiari.

Address :- Matiari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Tab: Diminhydrinate	1431	6900	0.69	4,761.00
2	Tab: Frusemide 40mg	1343	10000	0.68	6,800.00
3	Tab: Piraxicam	197	10000	0.59	5,900.00

*Correctly Received
& entered in Stock
Register on Page
Shown*

Hina

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	17,461.00
Disc.Amount :-	0.00
Net Amount :-	17,461.00

A. Khaliq

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 186

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Tab: Diminhydrinate	6900	:
2	Tab: Frusemide 40mg	10000	:
3	Tab: Piraxicam	10000	:

Number of Items 3



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Invoice No. :- 185

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Tab: Vitamin K 100mg		25000	0.69	17,250.00

429

Handwritten signature/initials

*Electrical Receipt
of amount in Stamp
Number on Page
shown*

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	17,250.00
Disc.Amount :-	0.00
Net Amount :-	17,250.00

Handwritten signature

For M/s. Life Line Trading Company

LIFE LINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve LI Best

Delivery Challan

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 185

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Tab: Vitamin K 100mg	25000	

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 194

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Cap: Transamin 250mg		3280	5.35	17,548.00

353
11/1/11

Correctly Received
& entered in Stock
Register on-Page
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	17,548.00
Disc.Amount :-	0.00
Net Amount :-	17,548.00

Abdul Khaliq Rajput
For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 194

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Cap: Transamin 250mg	3280	

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 193

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Cap: Transamin 250mg		3730	5.35	19,955.50

3730

13/03/12

Correctly Received
& Entered in Stock
Register on-Page
shown

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,955.50
Disc.Amount :-	0.00
Net Amount :-	19,955.50

Abdul Khaliq Rajput

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

serve 'u Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 193

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Cap: Transamin 250mg	3730	

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Invoice No. :- 192

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Diminhydrinate 5ml		260	3.25	845.00
2	Cap: Piroxicam 20mg		5000	0.59	2,950.00
3	Cap: Transamin 250mg		2990	5.35	15,996.50

Handwritten signature

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,791.50
Disc.Amount :-	0.00
Net Amount :-	19,791.50

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 192

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Diminhydrinate 5ml	260	:
2	Cap: Piroxicam 20mg	5000	:
3	Cap: Transamin 250mg	2990	:

Number of Items 3



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 191

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	inj: Cimitidine 2ml	435	2360	4.70	11,092.00
2	Inj: Diminhydrinate 5ml	437	2740	3.25	8,905.00

Handwritten signature

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,997.00
Disc.Amount :-	0.00
Net Amount :-	19,997.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 191

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Cimitidine 2ml	2360	:
2	Inj: Diminhydrinate 5ml	2740	:

Number of Items 2



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 190

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Transamine	2209	1460	11.54	16,848.40
2	inj: Cimitidine 2ml	1435	640	4.70	3,008.00

Handwritten signature/initials

Correctly Received
& Entered in Stock
Registers on Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,856.40
Disc.Amount :-	0.00
Net Amount :-	19,856.40

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 190

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Transamine	1460	:
2	inj: Cimitidine 2ml	640	:

Number of Items 2



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Invoice No. :- 189

Party Name :- E.D.O (Health) Matlari
Address :- Matlari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Syp: Rifampicin 2% 60ml		200	38.95	7,790.00
2	Inj: Transamine		1040	11.54	12,001.60

Handwritten signature/initials

Previously submitted
to Inspector in Special
Register on 17/02/12
shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,791.60
Disc.Amount :-	0.00
Net Amount :-	19,791.60

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 189

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Syp: Rifampicin 2% 60ml	200	:
2	Inj: Transamine	1040	:

Number of Items 2



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 204

Party Name :- E.D.O (Health) Mat i a r i.

Address :- M a t i a r i

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Medicain Cartridges Plain		11	1,695.00	18,645.00

342

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10/10/2018

Correctly Received
& Entered in Stock
Register on Pages
Shown.

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

A. Khaliq Rajput

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 204

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Medicain Cartridges Plain	11	:

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 203

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Medicain Cartridges Plain		11	1,695.00	18,645.00

Bus

Handwritten signature/initials

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER

E.D.O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 203

Party Name :- E.D.O (Health) Matiarl.

Address :- Matiarl

S#	P Name	Qty	Batch #
1	Inj: Medicaln Cartridges Plain	11	:

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'Ll Best

Sales Invoice

Invoice Date :- 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 207

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Medicain Cartridges Plain		6	1,695.00	10,170.00

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STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	10,170.00
Disc.Amount :-	0.00
Net Amount :-	10,170.00

A. Khaliq
For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

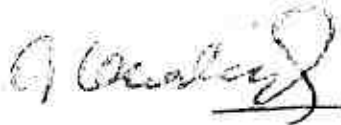
Ref No. :- 207

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Medicain Cartridges Plain	6	

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 206

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj. Medicain Cartridges Plain	0	11	1,695.00	18,645.00

1309

15/03/12

Correctly Received
& Entered in Stock
Register on Pages
Shown.

STORE KEEPER
E.D.O (H), MATARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

A. Khaliq

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 206

Party Name :- E.D.O (Health) Mat i a r i.

Address :- Mat i a r i

S#	P Name	Qty	Batch #
1	Inj: Medicain Cartridges Plain	11	0

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 205

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Medicain Cartridges Plain	1348	11	1,695.00	18,645.00

11/03/12

Correctly Received
& Entered in Stock
register on-Page
shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

A. Khaliq Rajput

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 205

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Medicain Cartridges Plain	11	:

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 202

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj: Medicine Cartage with Adernalin	0	6	1,695.00	10,170.00

Handwritten signature/initials

Quantity Received
Entered in Stock
Register on-Page
own.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	10,170.00
Disc.Amount :-	0.00
Net Amount :-	10,170.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 202

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Medicalne Cartage with Adernalin	6	0

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date :- 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 201

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj. Medicaine Cartage with Ademalin		11	1,695.00	18,645.00

Handwritten signature/initials

Correctly Received
Entered in Stock
Register on Pages
shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Heights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 201

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Medicaine Cartage with Adernalin	11	

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 200

Party Name :- E.D.O (Health) Matlari.

Address :- Matlari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj; Medicaine Cartage with Adernalin		11	1,695.00	18,645.00

345

Handwritten signature/initials

Correctly Received
& Entered in Stock
Register on-Pages
Shown

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 200

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Medicine Cartage with Adernalin	11	

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Invoice No. :- 199

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj. Medicaine Cartage with Adernalin	3	11	1,695.00	18,645.00

305

~~Correctly Received~~
& Entered in Stock
Register on-Page
Shown.

STORE KEEPER
E.D.O (HEALTH) MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khalique Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

A. Khalique

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 199

Party Name :- E.D.O (Health) Matari

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Medicine Cartage with Adernalin	11	3

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve-U Best

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Invoice No. :- 198

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Inj. Medicaine Cartage with Adernalin	1305	11	1,695.00	18,645.00

1305
1305

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	18,645.00
Disc.Amount :-	0.00
Net Amount :-	18,645.00

A. Khaliq

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 198

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P Name	Qty	Batch #
1	Inj: Medicaline Cartage with Adernalin	11	:

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Invoice No. :- 197

Party Name :- E.D.O (Health) Matiari.
Address :- Matiari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Dental Needle LA Block		35	495.00	17,325.00

354
11/01/12

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.O.O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	17,325.00
Disc.Amount :-	0.00
Net Amount :-	17,325.00

A. Khaliq

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve It Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 197

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Dental Needle LA Block	35	

Number of Items 1



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve U Best

Sales Invoice

Invoice Date :- 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Invoice No. :- 196

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Dental Needle Block	1337	25	495.00	12,375.00
2	Dental Needle LA Block	1341	15	495.00	7,425.00

Handwritten signature/initials

**Correctly Received
& Entered in Stock
Register on Pages
Shown.**

STORE KEEPER
E.D.O (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	19,800.00
Disc.Amount :-	0.00
Net Amount :-	19,800.00

Handwritten signature

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date : 03-03-2012
Order No. :- EDOH (MAT)Store/ 102
Ref No. :- 196

Party Name :- E.D.O (Health) Matari.
Address :- Matari

S#	P Name	Qty	Batch #
1	Dental Needle Block	25	:
2	Dental Needle LA Block	15	:

Number of Items 2



For M/s. Life Line Trading

LIFELINE

TRADING COMPANY

Distributors & Institutional Suppliers

Serve 'll Best

Sales Invoice

Invoice Date : 03-03-2012

Order No. :- EDOH (MAT)Store/ 102

Invoice No. :- 195

Party Name :- E.D.O (Health) Matlari.

Address :- Matlari

S#	Product Name	Batch #	Qty	RATE	AMOUNT
1	Xylocain Jelly		300	17.85	5,355.00
2	Dental Needle Block		25	495.00	12,375.00

1327
1337
1302

Correctly Received
& Entered in Stock
Register on-Pages
Shown.

STORE KEEPER
E.O.O: (H), MATIARI

WARRANTY UNDER SECTIONS 23 (1) (i) OF THE DRUGS ACT 1976.

I Abdul Khaliq Rajput being a person resident in Pakistan carrying on business Under the name of Life Line Trading Company at Shop No.10 Hina Hights Market Road Hyd.. being an authorized agent/Distributor, do hereby give this warranty that the drugs described above, sold/Indented by us specified and contained in the bill of sold do not contravene in any way the provision of section 23 of the drugs Act 1976.

Gross Amount :-	17,730.00
Disc.Amount :-	0.00
Net Amount :-	17,730.00

Abdul Khaliq Rajput

For M/s. Life Line Trading Company

LIFELINE

TRADING COMPANY
Distributors & Institutional Suppliers

Serve 'll Best

Delivery Challan

Invoice Date :

Order No. :- EDOH (MAT)Store/ 102

Ref No. :- 195

Party Name :- E.D.O (Health) Matari.

Address :- Matari

S#	P_Name	Qty	Batch #
1	Xylocain J e l l y	300	:
2	Dental Needle Block	25	:

Number of Items 2



For M/s. Life Line Trading



Gains Enterprises

Distributors / Sole Agent Pharmaceuticals,
Medical Equipments / Instruments, Electronics Items & General Order Supplier

Ref: _____

Date: _____

D.C #:02
Dated:

Executive District Officer (Health)
District Matiyari

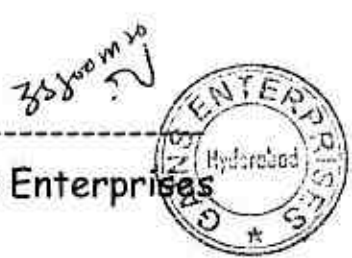
EDOH (MAT) /Store/152

Dated: 27/3/2012

S.No	Description	Quantity	Batch No.	MFG Date	Expiry Date
1	Tab: Diltiazem 30mg	10000	20	03-12	03-15
2	Tab: Phenairmen 20mg	116000	SK041	02-12	02-14
3	Syp: Salbutamol 2mg/ 5ml	10000	ZF 018	06-11	06-13
4	Syp: Mefnemic acid 60ml	20000	SF 017	05-12	05-14

Zafa
Standl
Exos.
Standl

Signature _____
M/S Gains Enterprises





OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

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Fax: 2760096


Phone: 2760092


INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Mefnamic Acid 60ml	Standard	SF017	05-2012	05-2014	20000	


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The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Solbutamol 2mg/5ml	Eros	IF018	06-2011	06-2013	10000	



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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Chlorophenramine 20mg	Standard	SF041	02-2012	02-2014	116000	



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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Diltiazem 30mg	Zafa	20	03-2012	03-2015	10000	



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The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj 5%D/Water 1000cc	Marrion	0205841	01-2012	01-2017	2500	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ceftriaxone 500mg	Pharmaceutical	Fs1-056	04-2011	03-2013	2000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Cefotaxium IG	Farmaceutical	Fsi-206	11-2011	11-2013	3000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Diclofenic	Pharmaceutics	253	04-2011	04-2014	25000	


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The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cap Omeprazol 20mg	Farmaceutical	Fc-732	02-2011	02-2013	3000	


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The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cap Cephadrin 500mg	Farmaceutical	Fc-193	11-2011	11-2013	3000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Betamethasone+Neomycin Cream	Karka	536	07-2011	07-2013	914	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ringer lactate 1000cc	Marrions	0505651	02-2011	02-2017	2000	


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The Inspection committee has inspected the following item(s) and found according to specification of order.


S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Paracetamol	Semos	12P11	01-2011	01-2014	100000	


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The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Metronidazol	Semos	11ZL11	10-2011	10-2013	10000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Metronidazol 100ml	China	110803	08-2011	08-2014	5000	


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The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ampicillin 500mg	China	111103	11-2011	11-2014	5000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Dexamethasone	China	111130	11-2011	11-2014	3150	



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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Chlorophenramine	Elko	016	09/2011	09/2014	10000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Cotrimexazole	Semos	11SZ02	02-2011	02-2013	10000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Amoxicillin 125mg	Pliva	058	01-2012	01-2014	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Ammonium Chloride	Zanctok	A0792	10-2011	09-2013	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Paracetamol	Zanctok	D106	01-2012	12-2013	5000	


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INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Anti D 10ML	ANTEC	32204	11-2011	11-2013	04	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Metronidazol 100cc	Mac&Rains	431-B	08-2011	08-2013	5000	

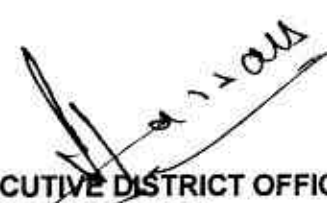

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Metronidazol	Semos	11ZL11	10-2011	10-2013	10000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ampicillin 500mg	China	111103	11-2011	11-2014	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Dexamethasone	China	111130	11-2011	11-2014	3150	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Chlorophenramine	Elko	016	09/2011	09/2014	10000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Cotrimexazole	Zanctok	AO275	12-2011	11-2013	10000	



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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Amoxicillin 125mg	Pliva	058	01-2012	01-2014	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Ammonium Chloride	Zanctok	A0792	10-2011	09-2013	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Paracetamol	Zanctok	D106	01-2012	12-2013	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Cotrimexazole	Zanctok	AO275	12-2011	11-2013	2345	



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1	Syp Metronidazol	Semos	11ZL11	10-2011	10-2013	2140	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Cotrimexazole	Zanctok	AO275	12-2011	11-2013	4000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Gentamycin	China	110825	08-2011	08-2014	22850	



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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj 5%D/Water 1000cc	Marrion	0205841	01-2012	01-2017	5000	


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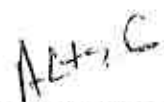
S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ceftriaxone 500 mg	Farmaceutical	Fs1-056	04-2011	03-2013	5000	


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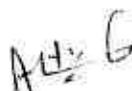
S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Cefotaxium 1G	Farmaceutical	Fsi-206	11-2011	11-2013	5000	



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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj 5%D/Saline 500cc	Ply Bottle	1307683	07-2011	07-2015	3000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cap Omeprazol 20mg	Farmaceutical	Fc-732	02-2011	02-2013	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cap Cephadrin 500mg	Farmaceutical	FL193	11-2011	11-2013	5000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Betamethasone+Neomycin Cream	Karka	536	07-2011	07-2013	750	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj 0.9%N/Saline 1000cc	Marion	0105241	02-2012	02-2017	2000	


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1	I/V Canulla	Hi-Life Pharma	ON096	11-2010	10-2015	2023	


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1	Tab Mefnamic Acid	EROS	AB012	02-2012	02-2015	25000	


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INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Brufen 200mg	ANKAZ	598	08-2011	07-2014	25000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Chloroquine	PLIVA	733	04-2011	04-2014	20000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Citrizen	M B L	22	05-2010	05-2013	10000	

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Solbutamol 4mg	EROS	OL030	12-2010	12-2013	10000	


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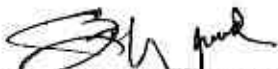
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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ranitidine 150mg	Pharmaceutical	FT-741	04-2011	04-2013	6000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Paracetamol	Pharmaceutics	D106	01/2012	12/2013	5000	

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Cotrimexazole D S	ANKAZ	503	08-2010	07-2013	30000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Paracetamol	Semos	12P11	01-2011	01-2014	100000	

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1	Tab Multivitamin	Reagent Lab	001	08-2010	08-2012	25000	

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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	X-Ray Fillims 12X15	IBF	11210/1	06-2011	11-2013	03 Packet	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	X-Ray Fillims 10X12	IBF	11210/1	06-2011	11-2013	2 Packet	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	X-Ray Fillims 08X10	IBF	11210/1	06-2011	11-2013	2 Packt	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Cefotaxium 1G	Farmaceutical	Fsi-206	11-2011	11-2013	6100	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj 5%D/Water 1000cc	Marrion	0205841	01-2012	01-2017	2000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ceftriaxone 500 mg	Farmaceutical	Fs1-056	04-2011	03-2013	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Diclofenic	Pharmaceutics	253	04-2011	04-2014	28400	



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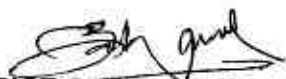
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cap Cephadrin 500mg	Farmaceutical	Fc-193	11-2011	11-2013	5000	


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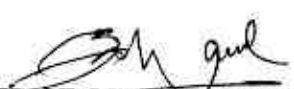
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Betamethasone+Neomycin Cream	Karka	536	07-2011	07-2013	950	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj 5%D/Water 1000cc	Marrion	0205841	01-2012	01-2017	1900	



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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Syntocinon	Novartis	0430	12-2011	12-2013	3000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Heparin					138	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Disposable Syringe 3CC	Master	1109273	12-09-2011	11-09-2015	7000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Disposable Syringe 5CC	Master	1109276	12-09-2011	11-09-2015	6400	


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1	Inj Chlorophenramine	Elko	016	09/2011	09/2014	10000	


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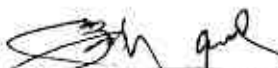
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The Inspection committee has inspected the following item(s) and found according to specification of order.

S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ringer lactate 1000cc	Marrions	0505651	02-2011	02-2017	2000	


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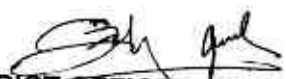
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	I/V Canulla 24No	China	20110926	09-2011	09-2016	580	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Plaster4.5cmx10m	china	MD0769503	11-2011	11-2016	500	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Dexamethasone	China	111130	11-2011	11-2014	25000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Vitamin K	Zafa	1065	10-2011	10-2015	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ranitidine 150mg	Pharmaceutical	FT-741	04-2011	04-2013	10000	

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab B/Complex	IDEAL	5918	08-2010	08-2013	25000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab ATENOLOL 25mg	JAWA Pharma	4932	12/2010	12/2012	10000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Disposable Syringe 5CC	Master	1109276	12-09-2011	11-09-2015	25000	

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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Disposable Syringe 3CC	Master	1109273	12-09-2011	11-09-2015	20488	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Anti D 10ML	ANTEC	32204	11-2011	11-2013	100	


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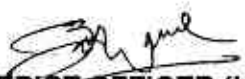
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Xylocaine Gel	Pharma Wise	027	11-2011	112014	379	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cap Tranexamic Acid 250mg	Bosch	12443	02-2012	01-2015	10000	


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1	Inj Dimenhydrinate	Elice Pharma	059	12-2011	12-2014	10000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Furasemide	B D H	320811	08-2011	07-2014	5000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Dimenhydrinate	Munawar Pharma	BH42	08-2011	07-2013	10500	

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Piroxicam 20mg	Pharmawise	328	01-2011	01-2014	10000	


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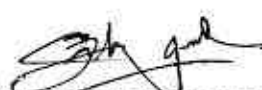
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1	Tab Piroxicam 20mg	Pharmawise	328	01-2011	01-2014	10000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Tranexamic 250mg	Elice Pharma	NX007	06-2011	06-2013	5000	


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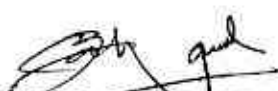
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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Cimitidin	Elice Pharma	054	02-2012	02-2015	6000	



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1	Syp Rifampicin	Pharmawise	822	05-2011	05-2014	2000	


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1	Inj Ranitidine 50mg	EPHARM	RS061	10-2011	10-2013	5000	


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1	Cap Cephradin 250mg	Farmaceutical	Fc-193	11-2011	11-2013	5000	


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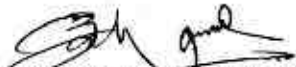
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1	Inj Dortavorin	EPHARM	ED281	08-2011	08-2014	2000	


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The Inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Cefotaxium 250 mg	Pharmaceutical	F-S1-198	06-2011	05-2013	2000	

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Be complex	Pliva	225	09/2011	09/2014	10000	

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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Atropin	Sinochim	090620	06-2011	06-2014	1000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Ampicillin 125mg	CKD Pharma	111002	01-2011	01-2013	2000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Cotrimexazole	ANKAZ	503	08-2010	07-2013	50000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ofloxin 400mg	Pharmaceutical	0452	01-2011	01-2014	10000	

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The Inspection committee has inspected the following item(s) and found according to specification of order.


S.:#	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ascorbic Acid 500mg	Lisko	042	04-2012	04-2014	50000	



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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Methyldopa250mg	IRZA	ADCK1	03/2011	02/2014	2000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Amikatom 500mg	Kenu Wha	09001	02-2011	02-2014	498	


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DELIVERY CHALLAN

Challan No. 1528

Date 12/1/2011

M/s EDD Health Martari

Order No. 011

Dated 05/1/2012

S #	Descriptions	Batch #	Qty	Remarks
01.	Dialyser with Sel. MFG - 08-210 Exp-08-2012	RC1752	50 nos.	Presinine
02.	Drip Sel. MFG - 08-2011 Exp-08-2016	110812	2750 nos.	China.
03.	Kit - Heparin MFG - OCT-2010 Exp-OCT-2013.	V2200198	50 nos.	medicare son
04.	Dialyser Solution MFG - 10-2011 - Exp-210-2013.	203.	50 nos.	Mac & Rain.
05.	Tab - Metformin MFG - Feb-2011 Exp-Feb-2014.	201	5000 nos.	ARDIN.
06.	Tab - Ciprofloxacin 500mg. MFG - 08-2011 Exp-08-2013.	FT-765	2000 nos.	Pharmaceutics.
07.	Tab. Ciprofloxacin 250mg. MFG - 08-2011 Exp-08-2013.	FT-764	5000 nos.	Pharmaceutics.
08.	Tab - Glimepride 1mg. MFG - 03-2010 Exp-03-2012.	9326	2000 nos.	Relco.
09.	D/Syringe 5cc MFG - 02-2011 Exp-02-2016	11.02.20	3000 nos.	China.
10.	D/Syringe 2cc MFG - 04-2011 Exp-04-2016.	4.04.20.	3000 nos.	China.

Goods received in good conditions


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Cefotaxium 250mg	Farmaceutical	Fs1-206	11-2011	11-2013	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Cefotaxium 1G	Farmaceutical	Fs1-206	11-2011	11-2013	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Disposable Syringe 3CC	Master	1109273	12-09-2011	11-09-2015	3000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Glimpiride 1mg	Reko	9675	07-2011	07-2013	2000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Disposable Syringe 5CC	Master	1109273	12-09-2011	11-09-2015	3000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ciprofloxin 250mg	Farmaceutical	Fs1-728	01-2011	01-2013	5000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ciprofloxin 500mg	Farmaceutical	Fs1-726	01-2011	01-2013	2000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Metformin 500mg	Reko	3512	02/2011	02/2014	5000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Dialyzer Solution					50	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Heparin					50	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Dialyzer With Set					50	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Drip Set	STAR	110325	03-2011	03-2016	2750	


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1	Tab Disprin Soluble 75mg	Reckt&	015	10-2011	10-2015	5000	


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1	Vitamin C	Zafa	1065	10-2011	10-2015	5000	


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INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Furasemide	Munawar Pharma	CN 72	07-2011	06-2016	2000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Relaxin 3mg	ANKAZ	1107	02-2012	02-2015	2000	


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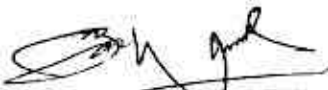
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ranitidine	Pharmaceutical	FT-741	04-2011	04-2013	3900	



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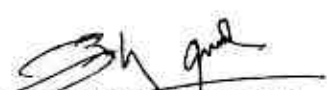
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Methyldopa250mg	IRZA	ADCK1	03/2011	02/2014	5000	



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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Adernallin	Sinochim	090620	06-2011	06-2014	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Drip Set	STAR	110325	03-2011	03-2016	2000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Disposable Syringe 5CC	Master	1109273	12-09-2011	11-09-2015	5000	


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S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab Amlodopin	Jawa	6078	03-2011	03-2014	10000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Atropin Sulphate	Sinochim	090620	06-2011	06-2014	2000	


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1	I/V Canulla	China	20110926	09-2011	09-2016	1000	

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	E C G Roll	Safety		10-2012	10-2015	200	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Plaster 4.5cmx10m	china	MD0769503	11-2011	11-2016	500	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cotton	Lloyd Health Care	0067144	01-2011	01-2015	100	


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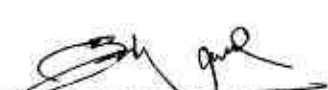
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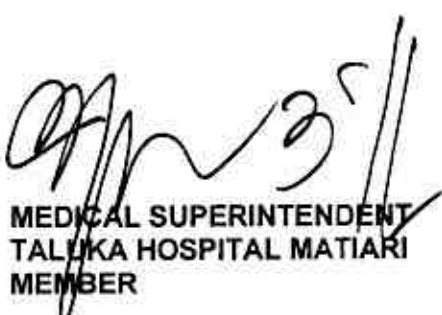
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cap Tranexamic Acid 250mg	Bosch	12443	02-2012	01-2015	1600	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Tranexamic 250mg	Elice Pharma	NX007	06-2011	06-2013	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Surgical Blade	Xinda	0904	04-2009	04-2014	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Cord Clamp	Safety	0505651	11-2010	11-2014	500	


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1	I/V Canulla	China	20110926	09-2011	09-2016	1000	


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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Metronidazol 100cc	Mac&Rains	431-B	08-2011	08-2013	1000	

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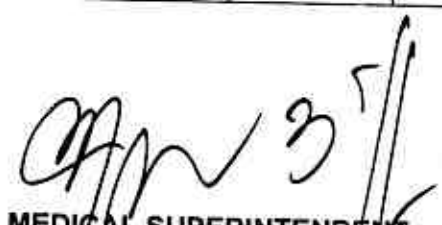
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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Syntocinon	Novartis	0430	12-2011	12-2013	1500	


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DELIVERY CHALLAN

Challan No. 1543

Date 9/01/2012

M/s EDO Health Matuari.

Order No. 008

Dated 05/01/2012

S #	Descriptions	Batch #	Qty	Remarks
01.	Drop. Ciprofloxacin MFG- 09-2011 EXP- 09-2013.	1671	1500-nos.	Relco.
0				
02.	Drop. Tobramycin. MFG- 10-2011 EXP- 10-2013.	2491	1500-nos.	Relco.
03.	Drop. Chlorophenicol Eye/Ear OSI MFG- OCT-2011 EXP- OCT-2013.		1500-nos.	MBSL
04.	Drop. Gentamycin Eye/Ear MFG- 12-2011 EXP- 12-2013.	110	1500-nos.	Amros.
05.	Oint Polypsan Eye. MFG- 03-2011 EXP- 03-2014.	6102	1365-nos.	Plus.

Goods received in good conditions

HTJ ENTERPRISES
AUTHORIZED SIGN

RECEIVER SIGN



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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Polyfax Eye Oint	Glaxo	2514	05-2011	05-2015	1365	

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1	Gentamycin Ear/ Eye Drop	MBL Pharma	050	07-2011	07-2013	1500	


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1	Chlorophenical Eye Drop	AMROS	089	03-2011	03-2014	1500	



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MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI

CHAIRMAN



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

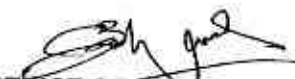
DISTRICT GOVERNMENT MATIARI

Email: edoh_mat@yahoo.com Fax: 2760096 Phone: 2760092

INSPECTION REPORT OF SUPPLY OF MEDICINE.


The Inspection committee has inspected the following item(s) and found according to specification of order.


S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Ciprofloxin Eye Drop	Recko	3345	10-2011	10-2013	1500	


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANING
MEMBER


MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATIARI
MEMBER


EX-NAZIM UC MATIARI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATIARI
MEMBER


MEDICAL SUPERINTENDENT
R. H. C. B. D KAKA
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
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INSPECTION REPORT OF SUPPLY OF MEDICINE.

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S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tobramycin Eye Drop	Recko	3342	10-2011	10-2013	1500	


DISTRICT OFFICER (HEALTH)
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MEMBER


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MEMBER


EX-NAZIM UC MATIARI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATIARI
MEMBER


MEDICAL SUPERINTENDENT
R. H. C. B. D KAKA
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI

CHAIRMAN



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

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INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order.


S. #:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ketolan	KYNG DONG PHARMA	KU012	02-06- 2011	01-06- 2013	160	



DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANING
MEMBER


MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATIARI
MEMBER


EX-NAZIM UC MATIARI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATIARI
MEMBER


MEDICAL SUPERINTENDENT
R. H. C. B. D KAKA
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
CHAIRMAN



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EXECUTIVE DISTRICT OFFICER
HEALTH

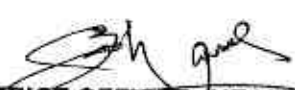
DISTRICT GOVERNMENT MATIARI

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INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Dobamin	KOREA PHARMA	1001	22-2-2011	21-2-2013	350	


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANING
MEMBER


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(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATIARI
MEMBER


MEDICAL SUPERINTENDENT
R. H. C. B. D KAKA
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
CHAIRMAN

11/12

Special Agent in Charge
No. 122/63 351

Date 2/17/47

Prepared by: [illegible]

COMPARATIVE STATEMENT FOR

DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS

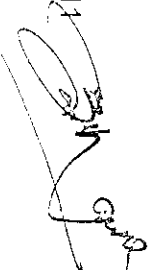
ITEMS 2011-12


OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/POSSIBLE & X-RAYS ITEMS 2011-12

S#	AU	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquns INTERNATIONAL	Graec Pharma	LOWEST
1	Tab	Aluminum+Mag+other Compounds strip/blister pack	100000	0.75						0.72							0.72
2	Tab	Ascorbic Acid 500mg Bottle/strip/blister pack	25000	1.85													0.00
3	Tab	Aspirin Soluble 75mg blister pack (Soluble)	2500														1.10
4	Tab	Atenolol 50mg Strip Pack	5000				2.50	1.90		2.50		1.10		1.15			2.40
5	Tab	Atenolol 25mg Strip Pack	5000							2.40							0.59
6	Tab	Vitamin-k 100mg strip/blister pack	25000														1.50
7	Tab	B-Complex Sugar Coated Strip/Blister Pack	50000							1.50							1.50
8	Tab	Bromazepam 3 mg Strip/Blister Pack	5000							1.50				1.65			0.30
9	Tab	Salbutamol 4mg Strip/Blister pack	50000						0.33	0.30				0.32			0.48
10	Tab	Cetirizine 10mg Strip/Blister Pack	5000					1.60		0.48		0.79		0.49			0.95
11	Tab	Chloroquin Phosphate 250mg Stip/Blister Pack	15000							0.95				1.00			1.10
12	Tab	Amledoprin 5mg Strip/Blister pack	10000				5.00	1.20	2.00			1.10					2.15
13	Tab	Ciprofloxacin 250 mg Strip/Blister Pack	2000				18.00	4.00			2.15	2.19					1.90
14	Tab	Ranitidine 150mg Strip/Blister pack	10000					2.35		1.90		1.95		1.95			1.90
15	Tab	Dexamethason strip/blister pack	25000							0.23				0.24			0.23



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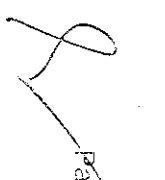

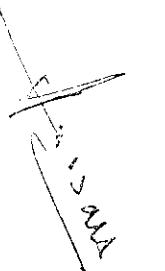





OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

#	A/U	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Servisos	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquns INTERNATIONAL	Graec Pharma	LOWEST
16	Tab	Diazepam 5mg. strip/blister pack	10000														0.00
17	Tab	Diclofenac Sodium 50mg Strip / Blister Pack	50000				3.20	1.50	0.40		0.39	0.65		0.49			0.39
18	Tab	Vitamina-c 100mg strip/blister pack	50000									0.35					0.35
19	Tab	Diltiazem 30mg Strip / Blister Pack	5000					1.30									1.30
20	Tab	Dimenhydrinate Strip / Blister Pack	5000														0.69
21	Tab	Erythronycin 250mg Strip/Blister Pack	5000							5.00				5.10			5.00
22	Tab	Erythromycin 500mg Strip/Blister Pack	5000							10.00							10.00
23	Tab	Femotidine 20mg Strip / Blister Pack	10000					1.20		0.78		0.80					0.78
24	Tab	Folic acid 5mg tire/Bottle of 1000 tabs	50000						0.06	0.06		0.11	0.16				0.058
25	Tab	Furacemide 40mg/Blister Pack	5000														0.68
26	Tab	Gilbendamide 5mg Strip/Blister Pack	20000								0.35			0.37			0.35
27	Tab	Glinpeptide 1mg Blister pack	2000					1.00			0.85						0.95
28	Tab	Ibuprofen 200mg Strip/Blister pack	25000							0.58		0.60		0.64			0.58
29	Tab	Ibuprofen 400mg Strip/Blister pack	25000							0.78		0.80		1.14			0.78
30	Tab	Iso-sorbide Dinitrate 10mg Strip pack	10000							2.00							2.00

OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

S#	A/U	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquons INTERNATIONAL	Graec Pharma	LOWEST
31	Tab	Lanoxin 0.25mg	5000														0.00
32	Tab	Levofloxacin 250mg Strip/Bluster pack	10000				21.00	4.60			2.65	2.70		5.38			2.65
33	Tab	Levofloxacin 500mg Strip/Bluster pack	10000				35.00	7.90			4.25	4.30		6.99			4.25
34	Tab	Mefernamic Acid 250mg	50000					1.50		0.52		0.54		0.58			0.52
35	Tab	Metformin 500mg Strip/Bluster pack	10000								1.04		1.10				1.04
36	Tab	Methyl Dopa 250mg Strip/Bluster pack	5000									4.00					4.00
37	Tab	Metachlopramide 10mg Strip/Bluster pack	20000							0.38				0.39			0.35
38	Tab	Piroxicam 20mg Strip/Bluster pack	10000				14.00	2.80				0.90		0.59			0.59
39	Tab	Metronidazole 400mg Strip/Bluster pack	50000				1.27	1.90			0.89	0.90		1.07			0.89
40	Tab	Multivitamin Sugar Coated tin	50000							2.00							2.00
41	Tab	Naproxen 500mg Strip/Bluster pack	10000				7.00	5.50			4.10	4.20		4.99			4.10
42	Tab	Norfloracin 400mg Strip/Bluster pack	5000								4.00	4.10		5.40			4.00
43	Tab	Ofloxacin 400mg Strip/ Bluster pack	10000				10.00					2.00	10.10				2.00
44	Tab	Cephalexin 500mg Strip/Blister Pack	8000								15.00						15.00
45	Tab	Paracetamol 500mg strip/blister pack	100000				0.65	0.42		0.40		0.55		0.62			0.40

[Handwritten signatures and initials]

OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12


S#	A/U	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquins INTERNATIONAL	Graec Pharma	LOWEST
46	Tab	Pheneramine 20mg Strip/Bluster pack	100000						0.06			0.08					0.06
47	Tab	Phenorbitione 30mg Strip/Bluster pack	20000				0.08										0.08
48	Tab	Cotramoxazole DSSStrip/Bluster pack	100000				1.20			1.15		2.15		2.59	2.00		1.15
49	Tab	Cotamoxazole Strip/Bluster pack	100000									1.10		1.49			1.10
50	Syp	Paracetamol 250mg/5ml Bottle of 60ml	10000	16.00				21.00		11.50				14.51	12.00		11.50
51	Syp	Ritampicin 2% 100mg/5ml Bottle of 60ml	1000											38.95			38.95
52	Syp	Solbitamol 2mg/5ml Bottle of 60ml	5000	14.00				9.50	10.50			11.00		12.15			9.50
53	Syp	Sodium Acid Citrate 120ml	5000	15.00				11.50	11.25			13.00		12.85			11.25
54	Syp	Vitamin B Complex 120ml	10000	16.00				17.50	10.20			13.00		10.23			10.20
55	Syp	Albendazole 100mg/5ml Botel of 30ml	5000									11.00		14.40			11.00
56	Syp	Aluminium+Mag+other Compounds Bottle of 120ml	10000	18.00				10.50	12.00					15.92			10.60
57	Syp	Ammonium Chloride 60ml	10000	11.80				17.50	10.85			14.00		10.99			10.35
58	Syp	Theophyllin 120ml	5000	18.90							29.00	23.99					18.00
59	Syp	Amoxicilin 125mg/5ml Bottle of 60ml	10000						26.00					26.15			26.00
60	Syp	Ampicilin 125mg/5ml	5000						26.00			22.00		26.15			22.00
61	Syp	Ampicilin 250mg/5ml	5000						36.50					36.92			36.50
62	Syp	Cephradin 125mg/5ml	5000	32.00							31.00			35.33	38.00		31.00

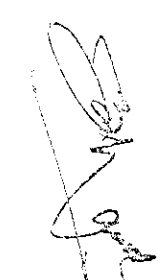
OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

S#	AU	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquins INTERNATIONAL	Graec Pharma	LOWEST
63	Syp	Cephadrin 250mg/5ml	5000	48.00							44.00	44.50		58.45			44.00
64	Syp	Cotrimoxazole	50000	14.80					11.20	11.00				13.86			11.00
65	Syp	Cotrimoxazole DS	25000	21.00										20.76	18.00		18.00
66	Syp	Chloroquin 50mg/5ml Bottle of 60ml	5000							13.50		14.00					13.50
67	Syp	Chlorpheniramine 60ml	5000	11.00					15.95	10.80		11.00		11.54			10.80
68	Syp	Erythromycine Bottle of 60ml	10000						39.00					39.90			39.00
69	Syp	Fosfomycin 250mg/60ml	5000	58.00						84.00				79.90			58.00
70	Syp	Metanamic Acid 60ml	10000	10.49					8.50	10.50		11.00		12.70			8.50
71	Syp	Metronidazole 200mg/5ml bottle of 60ml	20000	14.00					12.65	12.50				15.39			12.50
72	Syp	Multivitamins+Minerals Bottle of 120ml	10000	18.00					14.00	13.50							13.50
73	Inj	Ringers Lacted 1000ml	2000								55.00			89.90			55.00
74	Inj	Ringers Lacted 500ml	5000								55.00			86.90			55.00
75	Inj	Syntocinon	3000								15.00			NOT APPROVED			15.00
76	Inj	Tranexamic Acid 250mg/5ml	2000														11.54
77	Inj	Renitidin 50mg Amp of 2ml	5000									4.00		4.15			4.00
78	Inj	Vitamin K 10mg. Amp of 1ml	2000						3.50					3.90			3.50
79	Inj	0.45% Dextrose Saline 500ml	1500								56.00						56.00
80	Inj	A.T.S 1500 I/U Amp of 1.5ml	2000											117.80			117.80
81	Inj	Adrenaline 1mg Amp of 1ml	1000								10.00						10.00
82	Inj	Salubitanole 1ml	2000														0.00







OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

S#	AVU	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquns INTERNATIONAL	Graec Pharma	LOWEST
83	Inj	Ampicillin 250mg Vial	15000							7.50							7.50
84	Inj	Ampicillin 500mg Vial	10000							7.90		8.00					7.90
85	Inj	Anti Rabies Vaccine 0.5ml, 1.0ml	2000			423.00					580.00		465.60				423.00
86	Inj	Atropin 1mg/ml Amp of 1ml	~1000							8.00		2.00		2.70			2.00
87	Inj	3-Complex I/M I/V Amp of 2ml	10000							3.00		2.75					2.75
88	Inj	Blood Plasma Substitute: Botial of 500ml With giving set	500										275.00				275.00
89	Inj	Cefotaxime Sodium 1g	2500					58.00			29.00	29.50	34.65				29.00
90	Inj	Cefotaxime Sodium 500mg	2000								23.50	24.00	23.95				23.50
91	Inj	Cefotaxime Sodium 250mg	2000								21.00	19.00	21.95				19.00
92	Inj	Ceftriaxone 1g	2500				195.00	58.00			29.50	30.00	36.10				29.50
93	Inj	Ceftriaxone 500mg	2000				95.00				24.50	25.00	24.95				24.50
94	Inj	Ceftriaxone 250mg	2000				110.00				22.00	20.00	22.95				20.00
95	Inj	Cefuroxime Sodium 250mg	2500					38.00				25.00					25.00
96	Inj	Chloroquine 40mg/ Amp of 5ml	15000							10.00							10.00
97	Inj	Chlorophenramin Maleate 10mg/ml of 2ml	10000							2.95		3.00					2.95
98	Inj	Cimetidine 200mg Amp of 2ml 1 M /IV	3000									5.00					4.70
99	Inj	Dexamithasone Amp of 1ml	25000					5.20		4.50				4.70			4.50
100	Inj	10% Dextrose Water 1000ml	2000								55.00		94.95				55.00
101	Inj	5% Dextrose Water 1000ml	2000								45.00		49.50				45.00
102	Inj	5% Dextrose Saline 1000ml	2000								45.00		40.50				45.00





OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/ DISPOSIBLE & X-RAYS ITEMS 2011-12

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103	Inj	Diazepam 5mg/2ml	1000														5.10
104	Inj	Diclofenic Sodium 75mg/3ml	20000					5.80						5.10			5.10
105	Inj	Dimenhydrinate 50mg/ml	5000								2.20	2.90		3.95	2.30		2.20
106	Inj	Distill Water 5ml	20000				5.00				2.00	2.10		3.25			3.25
107	Inj	Dortavin 40mg/2ml	2500								2.00	2.10		3.25	2.10		2.00
108	Inj	Furazemide 1M/IV 20mg Amp of 2ml	3000							3.50		3.00		9.95			6.50
109	Inj	Gentamycin 80mg. Amp/Vial of 2ml	25000				14.00			3.10		3.15		3.25			3.00
110	Inj	Humulin Insulin 70/30 Vial of 10ml	200										389.50	5.54			3.10
111	Inj	Humulin Insulin Regular Vial of 10ml	200										389.90				389.90
112	Inj	0.9% Narmal Salin 1000ml	1000								45.00						389.90
113	Inj	Hydrocortisone Sodium 250mg With Solvent	2000					110.00					49.90				45.00
114	Inj	Hydrocortisone Sodium 100mg With Solvent	1000					65.00					95.85				95.85
115	Inj	Lignocaine 2% Solution Amp of 10ml	2000						10.00				53.85				53.85
116	Inj	Lignocaine 2% With Adrenalin Amp of 10ml	1000						10.00					10.75			10.00
117	Inj	Licomycin 600mg. Vial/Amp 1ml	5000						10.00			15.00		10.95			10.00
118	Inj	Methergin 2ml	1000						8.90					9.00			8.90
119	Inj	Metachlopramide 10mg/2ml Amp I.M./V	5000						2.60					2.70			2.00




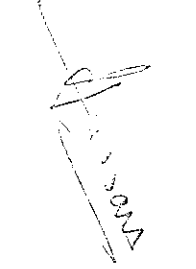





OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12


#	A/U	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquins INTERNATIONAL	Graec Pharma	LOWEST
120	Inj	Metronidazol 500mg / 100ml	5000							28.00				28.96			28.00
121		Disposable Syringe 5cc	25000			4.16				4.10			4.35				4.10
122		Disposable Syringe 3cc	25000			4.14				4.10			4.24				4.10
123		Hydrogen Per Oxide Solution. Bottle of 120ml	1000							22.00							22.00
124		Intra Ocular Lens	500										689.90				689.90
125		Dialyzer Solution	50							350.00			365.00				350.00
126		Dialyzer with Set	200							1250.00			1295.00				1250.00
127	Crea m	Betamethason + Neomycia. Tub of 15 gms	1000								26.00		26.95				26.00
128	Cap	Amoxicillin 250mg Strip/Bluster pack	20000					3.20		2.00		2.10		2.54			2.00
129	Cap	Amoxicillin 500mg Strip/Bluster pack	10000					4.80		3.25		3.40		4.07			3.25
130	Cap	Ampicillin 500mg Strip/Bluster pack	10000							3.25		3.40		4.07			3.25
131	Cap	Ampicillin 250mg Strip/Bluster pack	20000							2.00		2.10		2.54			2.00
132	Cap	Cephadrine 500mg Strip/Bluster pack	10000	6.80				9.50	7.00		6.25	5.50		8.45	8.00		5.25
133	Cap	Cephadrine 250mg Strip/Bluster pack	20000						5.90		4.50	4.00			4.90		4.00
134	Cap	Doxycycline 100mg Strip/Bluster pack	20000					2.20		1.15		1.25		1.34			1.15
135	Cap	Indomethracine 25mg Tin of 1000	25000							0.90				0.92			0.90







OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

S#	A/U	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquins INTERNATIONAL	Graec Pharma	LOWEST
136	Cap	Lincomycin 500mg Strip/Buster pack	10000	8.94						7.00		5.90			6.00		5.90
137	Cap	Omeprazole 20mg Strip/Buster pack	10000					2.76			1.35	1.80		1.35			1.35
138	Cap	Oxytetracycline 250mg	50000							0.89		0.90					0.89
139	Cap	Piroxicam 20mg Strip/Buster pack	5000									0.99					0.99
140	Cap	Tranexamic Acid 250mg Strip/Buster pack	10000											5.35			5.35
141	Drops	Tobramycin 0.3% Eye Drops	2000							59.00							59.00
142	Drops	Chloramphenicol Eye / Ear	2000						7.80	7.50		9.10					7.50
143	Drops	Gentamycin Eye / Ear Drops	5000						7.85	12.00		14.00					7.85
144	Crea m	Sulpher	5000														0.00
145	Gel	Xylocaine Gel	300											17.85			17.85
146	Lotion	Benzyl Benzovitol Lotion 25% Bottal of 60ml	1000	15.00						19.00		14.00		19.85			14.00
147		Neomycin Skin Ointment	3000							25.00							25.00
148		Polymyxin B Eye Ointment	2000														0.00
149	Powd er	Neomycin Powder	2000									12.00					12.00
150	Soln	Providon Iodin 7.5% (Solution) Bottle of 450ml	250							175.00				189.00			175.00









OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

S#	AU	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquins INTERNATIONAL	Graec Pharma	LOWEST
151	Tinct	Tr. Benzoin Co Bottle of 450ml	150						110.00	135.00				189.00			110.00
152	Tinct	Tr. Iodine. Bottle of 450ml	150						140.00	135.00				189.00			135.00
153		Adhesive Plaster 4"	1000							160.00			189.99				160.00
154		Blood Collecting Bag With Giving Set Bag of 500ml	200							185.00			189.99				185.00
155		Clove Oil	100										1085.00				1005.00
156		Cotton Roll 500gm	1000						150.00					159.00			150.00
157		Crep Bandage 6"	200						75.00								75.00
158		Block Needles Box of 100 each	50											495.00			495.00
159		LA Needles Box of 100 each	50											495.00			495.00
160		Serium Anti- A Vial of 10ml	25						275.00				290.00				260.00
161		Serium Anti- B Vial of 10ml	25						275.00				290.00				260.00
162		Serium Anti- D Vial of 10ml	25						275.00				290.00				275.00
163		IV Giving Set	10000						11.00				11.50				11.00
164		IV Canulla With Stoper 20,22,24 No	5000						35.00				36.92				35.00
165		ORS (Oral Rehydration Salt)	5000											5.10			5.10
166		Paper Plaster	300						23.00				24.20				23.00
167		Plaster of Paris 15cm x 2.7 metre	200						450.00								450.00
168		Scarbol Lotion	1000						85.00								55.00
169		Silk Thread in Dozens	100						35.00				36.00				35.00





OFFICE OF THE EXECUTIVE DISTRICT OFFICER HEALTH DISTRICT MATIARI.

COMPARATIVE STATEMENT FOR PURCHASE OF DRUG/MEDICINES/SURGICAL/DISPOSIBLE & X-RAYS ITEMS 2011-12

S#	AU	GENERIC NAME	QTY	Pharmaxone	Fuji Films	Hospital Sales & Services	Z.H.Traders	AJM Pharma	Gains Enterprises	RTJ Enterprises	Impirail Traders	Zam Trading	A To Zee	Life Line Trading	Macquins INTERNATIONAL	Graec Pharma	LOWEST
170		Surgical Bandages 10cm x 5meter	5000						8.60	6.50				6.70			6.50
171		Surgical Bandages 15cm x 5meter	5000						9.75	9.50				9.95			9.50
172		Xylastine S Cartridges with Adrenaline Tin of 50 cartridges	50											1695.00			1695.00
173		Xylastine S Cartridges without Adrenaline Tin of 50 cartridges	50											1695.00			1695.00
174		X-RAY DEVELOPER	50		770.00									1695.00			1695.00
175		X-RAY FIXER	50		770.00									1695.00			1695.00
176		X-RAY FILM SIZE 12 X 15	500		98.00									95.00			95.00
177		X-RAY FILM SIZE 10 X 12	500		64.00									63.00			63.00
178		X-RAY FILM SIZE 08 X 10	500		43.75									43.00			43.00
179		ULTRASOUND GEL	50								1100.00						1100.00

DISTRICT OFFICER HEALTH ADMIN & ACCOUNTS)
(MEMBER)

REPRESENTATIVE OF DMO MATIARI
(MEMBER)

DDO HEALTH (PROCUREMENT)
(MEMBER)

EDO HEALTH MATIARI
(CHAIRMAN)

~~EXECUTIVE DISTRICT OFFICER (HEALTH) MATIARI~~

Handwritten signature and date: 22/07/11

- Cc to:-
1. The Secretary to Govt. of Sindh, Health Department, Karachi.
 2. The Director General Health Services Sindh, Hyderabad.
 3. The Managing Director SPRA, Karachi.
 4. The Accountant General Sindh.
 5. The Member concerned.

EXECUTIVE DISTRICT OFFICER (HEALTH) MATIARI

purchased for Health Department District Matiari.

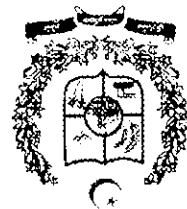
The above said committees shall inspect & examine the medicines.

- | | |
|----------|--|
| Chairman | 1. Executive District Officer (Health) District Matiari |
| Member | 2. District Officer (Health) (Admin & Accounts) District Matiari |
| Member | 3. Medical Superintendent/ THO Taluka Hospital Matiari |
| Member | 4. Medical Superintendent Rural Health Center Bhaledino Kaka |
| Member | 5. Deputy District Officer (RCH) Health Department, District Matiari |
| Member | 6. Syed Sikandar Ali Shah Chairman Health Committee District Council Matiari |

Inspection Committee:

The undersigned is pleased to constitute following committee for the purpose of inspection of medicines purchased for Health Department District Matiari with immediate effect and until further orders:

OFFICE ORDER.



OFFICE OF THE
 EXECUTIVE DISTRICT OFFICER
 HEALTH
 DISTRICT GOVERNMENT MATIARI
 NO EDO (H) MAT/Store/-7253/62 Dated 22/07/2011



OFFICE ORDER

In compliance to Government Notification NO: quoted above, the undersigned is pleased to constitute following committees for the purpose of Purchase of medicines, petty articles and other miscellaneous items for Health Department District Matiari with immediate effect and until further orders:

Purchase Committee:

- | | |
|----------|---|
| Chairman | 1. Executive District Officer (Health)
District Matiari |
| Member | 2. District Officer (Health)
(Admin & Accounts) District Matiari. |
| Member | 3. Deputy District officer (Procurement)
District Matiari. |
| Member | 4. The Representative of District Accounts Officer
District Matiari. |

The above said committees shall purchase the medicines, petty articles and other miscellaneous items for Health Department District Matiari on rate contract after completing all codal formalities as per SPRA Rules, 2010 and as mentioned in Government Notification NO: quoted above.

EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATIARI

- C.c. to:-
1. The Secretary to Govt. of Sindh, Health Department, Karachi.
 2. The Director General Health Services Sindh, Hyderabad.
 3. The Managing Director SPRA, Karachi.
 4. The Accountant General Sindh/
 5. The Member concerned.

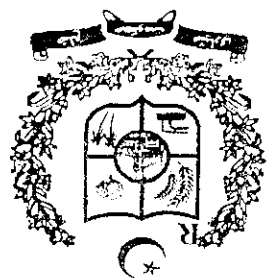
EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATIARI

(Handwritten signature and date)

OFFICE OF THE
EXECUTIVE DISTRICT OFFICE

HEALTH

DISTRICT GOVERNMENT MATIARI



1. Indenter's Name & Address
Executive District Officer (Health) Matari.
2. Indented Store
Drugs / Medicines
3. Tender Enquiries Issued on
11th January 2012
4. Tender Opened on
15th February 2012
5. Total Offers Received
15
6. Nature of Tender Enquire
Advised

PRUCHASE PROPOSAL

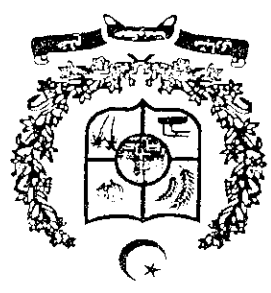
The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In respect to which 15 (fifteen) offers were received. The same were opened on due date. The detailed are attached. The Comparative Statement is at P/A, which has been duly graded.

In view of the recommendations of the Purchase Proposal is worked out as under
GAINS ENTERPRISES TENDER # 07

S #	A/ U	Generic Name	Qty	Rate	Total
19	Tab	Diltiazem 30mg Strip / Blister Pack	5000	1.30	6500.00
46	Tab	Phenaramine 20mg Strip/Blister pack	100000	0.06	6000.00
52	Syp	Solbutamol 2mg/5ml Bottle of 60ml	5000	9.50	47500.00
56	Syp	Aluminium+Mag+other Compounds Bottle of 120ml	10000	10.60	106000.00
70	Syp	Metnamic Acid 60ml	10000	8.50	85000.00
143	Drops	Gentamycin Eye / Ear Drops	5000	7.85	39250.00
151	Tinct	Tr. Benzain Co Bottle of 450ml	150	110.00	16500.00
Grand Total					306750.00

Total Three Lac Six Thousand Seven Hundred Fifty only.

OFFICE OF THE
 EXECUTIVE DISTRICT OFFICE
HEALTH
 DISTRICT GOVERNMENT MATIARI



Therefore case may kindly be sent to the purchase committee for approval of
 Purchase proposal accordingly.

DISTRICT OFFICER (HEALTH)
 ADMIN & ACCOUNTS MATIARI

DECISION OF PURCHASE COMMITTEE
 PURCHASE PROPOSAL APPROVED/DISAPPROVED

DISTRICT OFFICER (HEALTH)
 ADMIN & ACCOUNTS MATIARI
 (MEMBER)

DEPUTY DISTRICT OFFICER
 PROCUREMENT
 (MEMBER)

REPRESENTATIVE OF
 DISTRICT ACCOUNT OFFICE
 MATIARI (MEMBER)

EXICATIVE DISTRICT OFFICER
 (HEALTH) MATIARI
 (CHAIRMAN)

Handwritten signature and date '13/04/2014'



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

1. Indenter's Name & Address Executive District Officer (Health) Matlari.
2. Indented Store Drugs / Medicines
3. Tender Enquires Issued on 11th January 2012
4. Tender Opened on 15th February 2012
5. Total Offers Received 15
6. Nature of Tender Enquire Advertised

PRUCHASE PROPOSAL

The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In respect to which 15 (fifteen) offers were received. The same were opened on due date.

The detailed are attached. The Comparative Statement is at F/A, which has been duly graded.

In view of the recommendations of the Purchase Proposal is worked out as under

RTJ ENTERPRISES TENDER # 08

S #	A/ U	Generic Name	Qty	Rate	Total
01	Tab	Aluminum+Mag+other Compounds strip/blister pack	100000	0.72	72000.00
05	Tab	Atenolol 50mg Strip Pack	5000	2.40	12000.00
07	Tab	B-Complex Sugar Coated Strip/Blister Pack	50000	1.50	75000.00
08	Tab	Bromazepam 3 mg Strip/Blister Pack	5000	1.50	7500.00
09	Tab	Solbutamol 4mg Strip/Bluster pack	50000	0.30	15000.00
10	Tab	CitriZen 10mg Strip/Blister Pack	5000	0.48	2400.00
11	Tab	Chloroquin Phosphate 250mg Stip/Blister Pack	15000	0.95	14250.00
14	Tab	Ranitidine 150mg Strip/Bluster pack	10000	1.90	19000.00
15	Tab	Dexamathasone strip/blister pack	25000	0.23	5750.00
21	Tab	Erythromycin 250mg Strip/Blister Pack	5000	5.00	25000.00
22	Tab	Erythromycin 500mg Strip/Blister Pack	5000	10.00	50000.00
23	Tab	Famotidin 20mg Strip / Blister Pack	10000	0.78	7800.00
24	Tab	Folic acid 5mg tine/Bottle of 1000 tabs	50000	0.058	2900.00
28	Tab	Ibuprofen 200mg Strip/Blister pack	25000	0.58	14500.00



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

HEALTH

DISTRICT GOVERNMENT MATIARI

S #	A/ U	Generic Name	Qty	Rate	Total
29	Tab	Ibuprofen 400mg Strip/Blister pack	25000	0.78	19500.00
34	Tab	Mefnamic Acid 250mg	50000	0.52	26000.00
37	Tab	Metachlopromide 10mg Strip/Bluster pack	20000	0.38	7600.00
40	Tab	Multivitamin Sugar Coated tin	50000	2.00	100000.00
45	Tab	Paracetamol 500mg strip/blister pack	100000	0.40	40000.00
48	Tab	Cotrimexazole DS Strip/Bluster pack	100000	1.15	115000.00
50	Syp	Paracetamol 250mg/5ml Bottle of 60ml	10000	11.50	115000.00
53	Syp	Sodium Acid Citrate 120ml	5000	11.25	56250.00
54	Syp	Vitamin B Complex 120ml	10000	10.20	102000.00
57	Syp	Ammonium Chloride 60ml	10000	10.85	108500.00
59	Syp	Amoxicillin 125mg/5ml Bottle of 60ml	10000	26.00	260000.00
61	Syp	Ampicillin 250mg/5ml	5000	36.50	182500.00
64	Syp	Cotrimexazole	50000	11.00	550000.00
66	Syp	Chloroquin 50mg/5ml Bottle of 60ml	5000	13.50	67500.00
67	Syp	Chlorophenairamine 60ml	5000	10.80	54000.00
68	Syp	Erythromycin Bottle of 60ml	10000	39.00	390000.00
71	Syp	Metronidazol 200mg/5ml bottle of 60ml	20000	12.50	250000.00
72	Syp	Multivitamin+Miniral Bottle of 120ml	10000	13.50	135000.00
78	Inj	Vitamin K 10mg. Amp of 1ml	2000	3.50	7000.00
83	Inj	Ampicillin 250mg Vial	15000	7.50	112500.00
84	Inj	Ampicillin 500mg Vial	10000	7.90	79000.00
96	Inj	Chloroquine 40mg/ Amp of 5ml	15000	10.00	150000.00
97	Inj	Chlorophenramine Maleate 10mg/Aml of 2ml	10000	2.95	29500.00
99	Inj	Dexamathasone Amp of 1ml	25000	4.50	112500.00
109	Inj	Gentamycin 80mg. Amp/Vial of 2ml	25000	3.10	77500.00

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OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

HEALTH

DISTRICT GOVERNMENT MATIARI

S #	A/ U	Generic Name	Qty	Rate	Total
115	Inj	Lignocaine 2% Solution Amp of 10ml	2000	10.00	20000.00
116	Inj	Lignocaine 2% With Adrenalin Amp of 10ml	1000	10.00	10000.00
117	Inj	Lincomycin 600mg. Vial/Amp 1ml	5000	8.90	44500.00
119	Inj	Metachlopromide 10mg/2ml Amp I.M/I.V	5000	2.60	13000.00
120	Inj	Metronidazol 500mg / 100ml	5000	28.00	140000.00
121		Disposable Syringe 5cc	25000	4.10	102500.00
122		Disposable Syringe 3cc	25000	4.10	102500.00
128	Cap	Amoxicillin 250mg Strip/Bluster pack	20000	2.00	40000.00
129	Cap	Amoxicillin 500mg Strip/Bluster pack	10000	3.25	32500.00
130	Cap	Ampicillin 500mg Strip/Bluster pack	10000	3.25	32500.00
131	Cap	Ampicillin 250mg Strip/Bluster pack	20000	2.00	40000.00
134	Cap	Doxycycline 100mg Strip/Bluster pack	20000	1.15	23000.00
135	Cap	Indomethasone 25mg Tin of 1000	25000	0.90	22500.00
137	Cap	Omeprazole 20mg Strip/Bluster pack	10000	1.35	13500.00
142	Drops	Chlorophenical Eye / Ear	2000	7.50	15000.00
147		Neomycin Skin Ointment	3000	25.00	75000.00
150	Soln	Providon Iodine 7.5 % (Solution) Bottle of 450ml	250	175.00	43750.00
152	Tinct	Tr. Iodine. Bottle of 450ml	150	145.00	20250.00
153		Adhesive Plaster 4"	1000	160.00	160000.00
154		Blood Collecting Bag With Giving Set Bag of 500ml	200	185.00	37000.00
156		Cotton Roll 500gm	1000	150.00	150000.00
157		Crep Bandage 6"	200	75.00	15000.00

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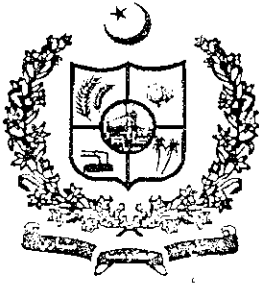
OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

S #	A/ U	Generic Name	Qty	Rate	Total
162		Serum Anti- D Vial of 10ml	25	275.00	6875.00
163		I.V Giving Set	10000	11.00	110000.00
164		I.V Canulla With Stopper 20,22,24 No	5000	35.00	175000.00
166		Paper Plaster	300	23.00	6900.00
167		Plaster of Paris 15cm x 2.7 meter	200	450.00	90000.00
168		Scabiol Lotion	1000	55.00	55000.00
169		Silk Thread In Dozens	100	35.00	3500.00
170		Surgical Bandages 10cm x 5meter	5000	6.50	32500.00
171		Surgical Bandages 15cm x 5meter	5000	9.50	47500.00

Grand Total 5149725.00

Total Fifty One Lac Forty Nine Thousand Seven Hundred Twenty Five only.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH
DISTRICT GOVERNMENT MATIARI


Therefore case may kindly be sent to the purchase committee for approval of Purchase proposal accordingly.



DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI

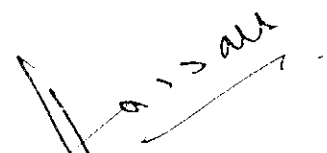
DECISION OF PURCHASE COMMITTEE

PURCHASE PROPOSAL APPROVED/ DISAPPROVED


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI
(MEMBER)


DEPUTY DISTRICT OFFICER
PROCUREMENT
(MEMBER)


REPRESENTATIVE OF
DISTRICT ACCOUNT OFFICE
MATIARI (MEMBER)


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
(CHAIRMAN)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

1. Indenter's Name & Address Executive District Officer (Health) Matari.
2. Indented Store Drugs / Medicines
3. Tender Enquires Issued on 11th January 2012
4. Tender Opened on 15th February 2012
5. Total Offers Received 15
6. Nature of Tender Enquire Advertised

PRUCHASE PROPOSAL

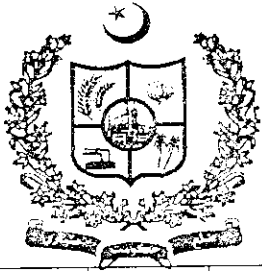
The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In respect to which 15 (fifteen) offers were received. The same were opened on due date.

The detailed are attached. The Comparative Statement is at F/A, which has been duly graded.

In view of the recommendations of the Purchase Proposal is worked out as under

IMPERIL TREDERS TENDER # 09

S #	A/ U	Generic Name	Qty	Rate	Total
13	Tab	Ciprofloxacin 250 mg Strip/Blister Pack	2000	2.15	4300.00
17	Tab	Diclofenic Sodium 50mg Strip / Blister Pack	50000	0.38	19500.00
26	Tab	Glibenclamide 5mg Strip/Blister Pack	20000	0.35	7000.00
27	Tab	Glimepride 1mg Blister pack	2000	0.95	1900.00
30	Tab	Isosorbide Dinitrate 10mg Strip pack	10000	2.00	20000.00
32	Tab	Levofloxacin 250mg Strip/Bluster pack	10000	2.65	26500.00
33	Tab	Levofloxacin 500mg Strip/Bluster pack	10000	4.25	42500.00
35	Tab	Metformin 500mg Strip/Bluster pack	10000	1.04	10400.00
39	Tab	Metronidazol 400mg Strip/Bluster pack	50000	0.89	44500.00
41	Tab	Naproxen 500mg Strip/Bluster pack	10000	4.10	41000.00
42	Tab	Norfloxacin 400mg Strip/Bluster pack	5000	4.00	20000.00
44	Tab	Cephalexin 500mg Strip/Blister Pack	8000	15.00	120000.00
62	Syp	Cephadin 125mg/5ml	5000	31.00	155000.00



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

HEALTH

DISTRICT GOVERNMENT HATARI

S #	A/ U	Generic Name	Qty	Rate	Total
63	Syp	Cephradin 250mg/5ml	5000	44.00	220000.00
73	Inj	Ringers Lacted 1000ml	2000	55.00	110000.00
74	Inj	Ringers Lacted 500ml	5000	55.00	275000.00
75	Inj	Syntocinon	3000	15.00	45000.00
79	Inj	0.45% Dextrose Saline 500ml	1500	55.00	82500.00
81	Inj	Adrenaline 1mg Amp of 1ml	1000	10.00	10000.00
89	Inj	Cefotaxium Sodium 1g	2500	29.00	72500.00
90	Inj	Cefotaxium Sodium 500mg	2000	23.50	47000.00
92	Inj	Ceftriaxone 1g	2500	29.50	73750.00
93	Inj	Ceftriaxone 500mg	2000	24.50	49000.00
100	Inj	10% Dextrose Water 1000ml	2000	55.00	110000.00
101	Inj	5% Dextrose Water 1000ml	2000	45.00	90000.00
102	Inj	5% Dextrose Saline 1000ml	2000	45.00	90000.00
104	Inj	Diclofenic Sodium 75mg/3ml	20000	2.20	44000.00
106	Inj	Distil Water 5ml	20000	2.00	40000.00
112	Inj	0.9% Normal Saline 1000ml	1000	45.00	45000.00
125		Dialyzer Solution	50	350.00	17500.00
126		Dialyzer with Set	200	125.00	25000.00
127	Cream	Betamethasone + Neomycin. Tub of 15 gms	1000	26.00	26000.00
132	Cap	Cephradin 500mg Strip/Bluster pack	10000	6.25	62500.00
137	Cap	Omeprazole 20mg Strip/Bluster pack	10000	1.35	13500.00
141	Drops	Tobramycin 0.3% Eye Drops	2000	59.00	118000.00

Grand Total 2403850.00

Total Twenty Four Lac Three Thousand Eight Hundred Fifty only.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH
DISTRICT GOVERNMENT MATIARI

Therefore case may kindly be sent to the purchase committee for approval of Purchase proposal accordingly.

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI

DECISION OF PURCHASE COMMITTEE
PURCHASE PROPOSAL APPROVED/ DISAPPROVED

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI
(MEMBER)

DEPUTY DISTRICT OFFICER
PROCUREMENT
(MEMBER)

REPRESENTATIVE OF
DISTRICT ACCOUNT OFFICE
MATIARI (MEMBER)

EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
(CHAIRMAN)

DISTRICT GOVERNMENT MATIARI

- 1. Tenderer's Name & Address Executive District Officer (Health) Matuari.
- 2. Tendered Items Drugs / Medicines
- 3. Tender Enquiries Issued on 11th January 2012
- 4. Tender Opening on 15th February 2012
- 5. Total Offers Received 15
- 6. Nature of Tender Enquiry Advertised

PURCHASE PROPOSAL

The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In response to which 15 (fifteen) offers were received. The same were opened on due date.

The details are attached. The Comparative Statement is at T/A, which has been duly graded.

Review of the recommendations of the Purchase Proposal is worked out as under

RECOMMENDED COMPREHENSIVE

Sl#	Sl#	Generic Name	Qty	Rate	Total
04	Tab	Aspirin 50mg Strip Pack	5000	1.10	5500.00
12	Tab	Amiodopn 5mg Strip/Blister pack	10000	1.10	11000.00
19	Tab	Vitamin-C 100mg strip/blister pack	50000	0.35	17500.00
30	Tab	Trichya Dopn 250mg Strip/Blister pack	5000	4.00	20000.00
43	Tab	Cloxacilin 400mg Strip/ Blister pack	10000	2.00	20000.00
44	Tab	Clarithromicin Strip/Blister pack	100000	1.10	110000.00
52	Syp	Amoxicillin 100mg/5ml Bottle of 50ml	5000	11.00	55000.00
59	Syp	Amplidolm 125mg/5ml	5000	22.00	110000.00
77	Inj	Ranitidine 50mg Amp of 2ml	5000	4.00	20000.00



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

S #	A/ U	Generic Name	Qty	Rate	Total
86	Inj	Atropin 1mg/ml Amp of 1ml	1000	2.00	2000.00
87	Inj	B-Complex I/M /I/V Amp of 2ml	10000	2.75	27500.00
91	Inj	Cefotaxium Sodium 250mg	2000	19.00	38000.00
94	Inj	Ceftriaxone 250mg	2000	20.00	40000.00
95	Inj	Cefuroxime Sodium 250mg	2500	25.00	62500.00
107	Inj	Dorzolamide 40mg /2ml	2500	6.50	16250.00
108	Inj	Furosemide IM/IV 20mg Amp of 2ml	3000	3.00	9000.00
133	Cap	Cephadrin 250mg Strip/Blister pack	20000	4.00	80000.00
136	Cap	Linecomycin 500mg Strip/Blister pack	10000	5.90	59000.00
146	Lotion	Benzyl Benzovite Lotion 25% Bottle of 60ml	1000	14.00	14000.00
149	Powder	Neomycin Powder	2000	12.00	24000.00

Grand Total 741250.00

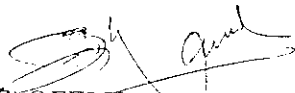
Total Seven Lac Forty One Thousand Two Hundred Eighty only.



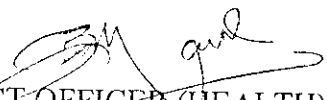
OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH


DISTRICT GOVERNMENT MATIARI


Therefore case may kindly be sent to the purchase committee for approval of Purchase proposal accordingly.



DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI

DECISION OF PURCHASE COMMITTEE
PURCHASE PROPOSAL APPROVED/ ~~DISAPPROVED~~


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI
(MEMBER)


DEPUTY DISTRICT OFFICER
PROCUREMENT
(MEMBER)


REPRESENTATIVE OF
DISTRICT ACCOUNT OFFICE
MATIARI (MEMBER)


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
(CHAIRMAN)

OFFICE OF THE
EXECUTIVE DISTRICT OFFICE



HEALTH

DISTRICT GOVERNMENT MATIARI

1. Indenter's Name & Address Executive District Officer (Health) Matiari.
2. Indented Store Drugs / Medicines
3. Tender Enquires Issued on 11th January 2012
4. Tender Opened on 15th February 2012
5. Total Offers Received 15
6. Nature of Tender Enquire Advertised

PRUCHASE PROPOSAL

The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In respect to which 15 (fifteen) offers were received. The same were opened on due date.

The detailed are attached. The Comparative Statement is at F/A, which has been duly graded.

In view of the recommendations of the Purchase Proposal is worked out as under

A TO ZEE INTERNATIOL TENDER # 11

S #	A/ U	Generic Name	Qty	Rate	Total
88	Inj	Blood Plasma Substitute Bottle of 500ml With giving set	500	275.00	137500.00
110	Inj	Humulin Insulin 70/30 Vial of 10ml	200	389.90	77980.00
111	Inj	Humulin Insulin Regular Vial of 10ml	200	389.90	77980.00
113	Inj	Hydrocortisone Sodium 250mg With Solvent	2000	95.85	191700.00
114	Inj	Hydrocortisone Sodium 100mg With Solvent	1000	53.85	53850.00
124		Intra Ocular Lens	500	689.90	344950.00
155		Clove Oil	100	1095.00	109500.00
160		Serum Anti- A Vial of 10ml	25	260.00	6500.00
161		Serum Anti- B Vial of 10ml	25	260.00	6500.00

Grand Total 1006060.00

Total Ten Lac Six Thousand Sixty only.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICE

HEALTH

DISTRICT GOVERNMENT MATIARI

Therefore case may kindly be sent to the purchase committee for approval of
Purchase proposal accordingly.

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI

DECISION OF PURCHASE COMMITTEE

PURCHASE PROPOSAL APPROVED/ DISAPPROVED

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI
(MEMBER)

DEPUTY DISTRICT OFFICER
PROCUREMENT
(MEMBER)

REPRESENTATIVE OF
DISTRICT ACCOUNT OFFICE
MATIARI (MEMBER)

EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
(CHAIRMAN)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

1. Indenter's Name & Address Executive District Officer (Health) Matiari.
2. Indented Store Drugs / Medicines
3. Tender Enquires Issued on 11th January 2012
4. Tender Opened on 15th February 2012
5. Total Offers Received 15
6. Nature of Tender Enquire Advertised

PURCHASE PROPOSAL

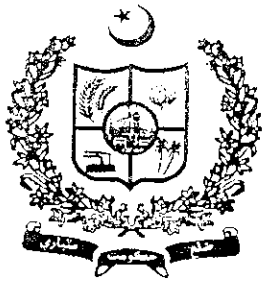
The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In respect to which 15 (fifteen) offers were received. The same were opened on due date.

The detailed are attached. The Comparative Statement is at F/A, which has been duly graded.

In view of the recommendations of the Purchase Proposal is worked out as under

LIFE LINE TRADING CO TENDER # 12

S #	A/ U	Generic Name	Qty	Rate	Total
06	Tab	Vitamin-k 100mg strip/blister pack	25000	0.69	17250.00
20	Tab	Dimenhydrinate Strip / Blister Pack	5000	0.69	3450.00
25	Tab	Furasemide 40mg/Blister Pack	5000	0.68	3400.00
38	Tab	Piroxicam 20mg Strip/Bluster pack	10000	0.59	5900.00
51	Syp	Rifampicin 2% 100mg/5ml Bottle of 60ml	1000	38.95	38950.00
76	Inj	Tranexamic Acid 250mg/5ml	2000	11.54	23080.00
98	Inj	Cimitidin 200mg. Amp of 2ml I M /IV	3000	4.70	14100.00
103	Inj	Diazepam 5mg/2ml	1000	5.10	5100.00
105	Inj	Dimenhydrinate 50mg/ml	5000	3.25	16250.00



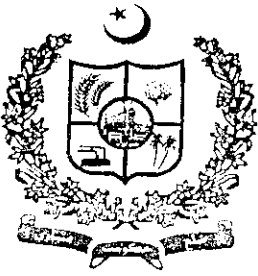
OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI

S #	A/ U	Generic Name	Qty	Rate	Total
139	Cap	Piroxicam 20mg Strip/Bluster pack	5000	0.59	2950.00
140	Cap	Tranexamic Acid 250mg Strip/Bluster pack	10000	5.35	53500.00
145	Gel	Xylocaine Gel	300	17.85	5355.00
158		Block Needles Box of 100 each	50	495.00	24750.00
159		LA Needles Box of 100 each	50	495.00	24750.00
165		ORS (Oral Rehydration Salt)	5000	5.10	25500.00
172		Xylestine S Cartridges with Adrenaline Tin of 50 cartridges	50	1695.0 0	84750.00
173		Xylestine S Cartridges without Adrenaline Tin of 50 cartridges	50	1695.0 0	84750.00

Grand Total 433785.00

Total Four Lac Thirty Tree Thousand Seven Hundred Eighty Five only.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH
DISTRICT GOVERNMENT MATIARI


Therefore case may kindly be sent to the purchase committee for approval of Purchase proposal accordingly.

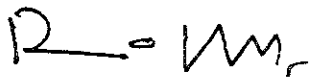

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI


DECISION OF PURCHASE COMMITTEE

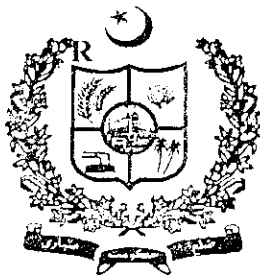
PURCHASE PROPOSAL APPROVED/ DISAPPROVED


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI
(MEMBER)


REPRESENTATIVE OF
DISTRICT ACCOUNT OFFICE
MATIARI (MEMBER)


DEPUTY DISTRICT OFFICER
PROCUREMENT
(MEMBER)


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
(CHAIRMAN)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICE

HEALTH

DISTRICT GOVERNMENT MATIARI

1. Indenter's Name & Address Executive District Officer (Health) Matiari.
2. Indented Store Drugs / Medicines
3. Tender Enquires Issued on 11th January 2012
4. Tender Opened on 15th February 2012
5. Total Offers Received 15
6. Nature of Tender Enquire Advertised

PRUCHASE PROPOSAL

The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In respect to which 15 (fifteen) offers were received. The same were opened on due date.

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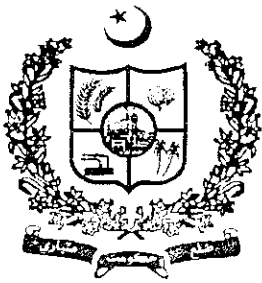
In view of the recommendations of the Purchase Proposal is worked out as under

MACQUNS PHARMA TENDER # 13

S #	A/ U	Generic Name	Qty	Rate	Total
65	Syp	Cotrimexazole DS	25000	18.00	4,50,000.00

Grand Total 450000.00

Total Four Lac Fifty Thousand only.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICE

HEALTH

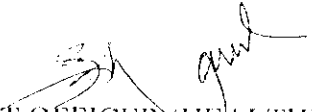
DISTRICT GOVERNMENT MATIARI


Therefore case may kindly be sent to the purchase committee for approval of
Purchase proposal accordingly.

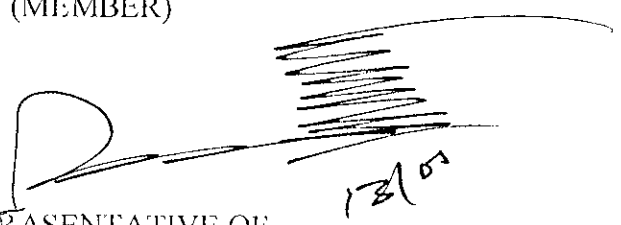

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI

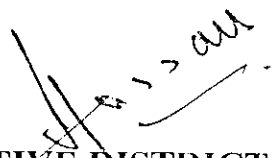
DECISION OF PURCHASE COMMITTEE

PURCHASE PROPOSAL APPROVED/ DISAPPROVED


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI
(MEMBER)


DEPUTY DISTRICT OFFICER
PROCUREMENT
(MEMBER)


REPRESENTATIVE OF
DISTRICT ACCOUNT OFFICE
MATIARI (MEMBER)


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
(CHAIRMAN)

OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH

DISTRICT GOVERNMENT MATIARI



1. Indenter's Name & Address Executive District Officer (Health) Matiari.
2. Indented Store Drugs / Medicines
3. Tender Enquires Issued on 11th January 2012
4. Tender Opened on 15th February 2012
5. Total Offers Received 15
6. Nature of Tender Enquire Advertised

PRUCHASE PROPOSAL

The matter pertains to the procurement of medicine, surgical sundries, disposable, X-ray films & chemicals the demand was advertised vide newspaper, the cutting of which is placed at page -03. In respect to which 15 (fifteen) offers were received. The same were opened on due date.

The detailed are attached. The Comparative Statement is at F/A, which has been duly graded.

In view of the recommendations of the Purchase Proposal is worked out as under

IMPERIL TREDERS TENDER # 01 X-RAY

S #	A/ U	Generic Name	Qty	Rate	Total
1		X-Ray Developer	50	700.00	35000.00
2		X-Ray Fixer	50	700.00	35000.00
3		X-Ray Films Size 12x15	500	95.00	47500.00
4		X-Ray Films Size 10x12	500	63.00	31500.00
5		X-Ray Films Size 8x10	500	43.00	21500.00
6	Gel	Ultrasound Gel	50	1100.00	55000.00

Grand Total 225500.00

Total Two Lac Twenty Five Thousand Five Hundred only.



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
HEALTH
DISTRICT GOVERNMENT MATIARI

Therefore case may kindly be sent to the purchase committee for approval of Purchase proposal accordingly.

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI

DECISION OF PURCHASE COMMITTEE
PURCHASE PROPOSAL APPROVED/ DISAPPROVED

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MATIARI
(MEMBER)

R - W
DEPUTY DISTRICT OFFICER
PROCUREMENT
(MEMBER)

[Signature]
REPRESENTATIVE OF
DISTRICT ACCOUNT OFFICE
MATIARI (MEMBER)

[Signature]
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI
(CHAIRMAN)

06 FEB 2012

M. S. Khan, Advocate,
Lot 2746, Karachi.

CONTRACT AGREEMENT

This agreement made this _____ day of _____, 2012 between the office of the Executive District Officer Health, Madani "The Purchaser" herein after and M/s. Pharmaxone Karachi herein after "The Supplier".

Where as, the purchaser is desirous that certain medicine (As mentioned below in the table) should be provided by supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the supply the quoted medicine.

S.No.	Qty	Description Of Items	Rate (Rs)
01	100	Vanilic Acid 50mg/5ml Syring Bottle Strip/Blister pack.	185
02	100	Syn. Theophyllin 120mg	18
03	100	Stop. Fusidic acid 250mg/60ml	88

The delivery period will commence from the date of acceptance of the contract by the bidder. Now this agreement witnessed as follows:

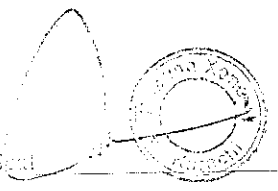
- In this agreement word and expression shall have the same meaning as are respectively assigned to them in the term & conditions of tender enquiry referred to.
- Following documents shall be deemed to form and be read and construed as part of this agreement viz:
 - Contract Agreement.
 - Price Schedule.
 - Technical Specifications.
 - Terms & Conditions of Tender Enquiry.
 - Terms & Condition of the Tender.
 - Schedule of requirement.
 - Bidder's file including the relevant correspondence with all annexes made before signing the contract agreement.
- In consideration of the payments to be made by the purchaser to the, the supplier as herein after mentioned, the supplier here by covenants with the purchaser to provide the goods and services and to remedy the defects therein in conformity in all respects with the provision of the contract.
- The purchaser hereby covenant to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.



Contd..... P 2

In witness where of 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.

SUPPLIER



Signature & Seal

Name: Mushtaque Ahmed Khan
Add: B-441, Block-13, F.D. Area, Khl.
CNIC No. 42101-1490752-1
Designation: Proprietor

PURCHASER

Signature & Seal

Name: Dr. Hassan Murad Shah
Add: Executive District Officer (II) Matiari
CNIC No. 41305-0554246-3
Designation: Executive Dist. Off. (II) Matiari

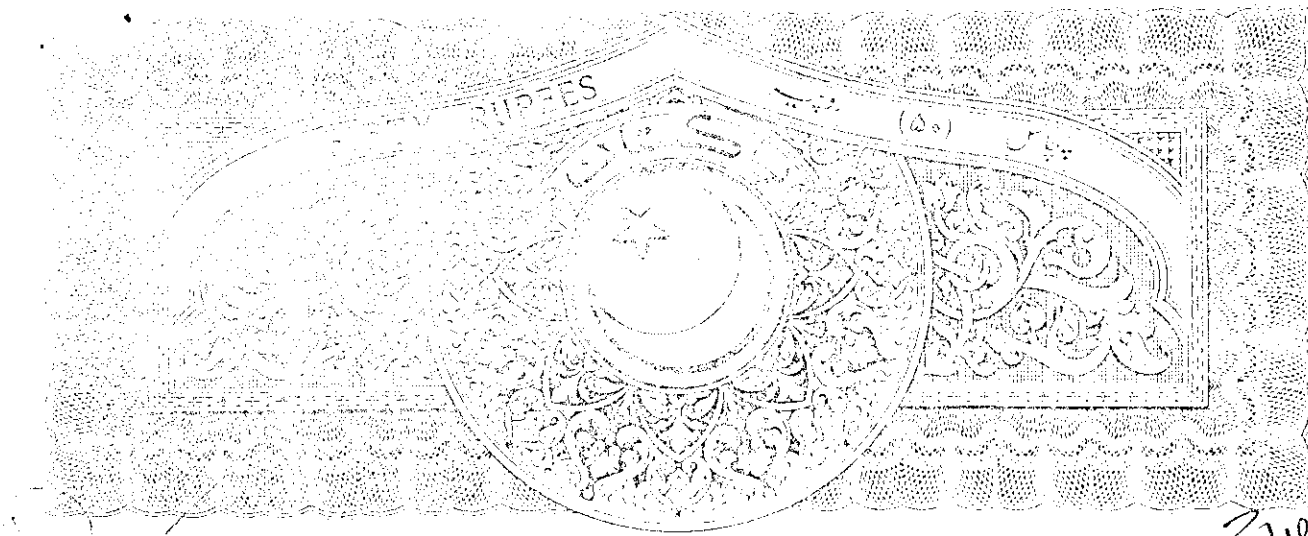
WITNESS (SUPPLIER)

Name: Asghar Ali
Add: H.F568, Hussainabad Khl.
CNIC No. 42000-0866775-9
Designation: Manager

WITNESS (PURCHASER)

Name: Dr. (Capt) Bashir Ahmed Solangi
Add: Executive District Officer (II) Matiari
CNIC No. 41306-9215806-9
Dist. Dist. Off. (II) (Admn & Accts) Matiari

Handwritten signature and official stamp of the witness for the purchaser.



Contract Agreement (inter-uptal)

3118

08-02-2012

This agreement made this _____ day of _____ 2012 between the Office of the Executive District Officer (Health) and the "The purchaser" herein after and M/S A TO ZEE INTERNATIONAL HYDERABAD herein after (The supplier).

Where as, the purchaser desires that certain medicine (As mentioned below in the table) should be provided by supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser fit the supply the Quoted Medicine.

S.N	A/U	DESCRIPTION OF ITEMS	Rate / A/U
88	inj	Blood Plasma Substitute Bottle of 500ml With giving set	275.00
110	inj	Humulin Insulin 70/30 Vial of 10ml	389.90
111	inj	Humulin Insulin Regular Vial of 10ml	389.90
112	inj	Hydrocortisone Sodium 250mg With Solvent	95.85
113	inj	Hydrocortisone Sodium 100mg With Solvent	55.85
121		Intra Ocular Lens	689.90
122		Clove Oil	1095.00
130		Serum Anti- A Vial of 10ml	260.00
131		Serum Anti- B Vial of 10ml	260.00

A to Zee International
A-26-1721 Civil Hospital Road, Hyd.

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

- In this agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Inquiry referred to.
- Following documents shall be deemed to form and be read and construed as part of this agreement viz:
 - Contract Agreement.
 - Price Schedule
 - Technical Specifications
 - Terms & Conditions of Tender Inquiry.
 - Terms & Condition of the Contract.
 - Schedule of requirement.
 - Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.

3. In consideration of the payments to be made by the purchaser to the, we supplier as herein after mentioned, the supplier here by covenants with the purchaser to provide the goods and services and to remedy the defects therein in conformity in all respects with the provision of the contract.

4. The purchaser hereby covenant to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the Contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.

Witness of the parties here to have caused this agreement in accordance with their respective hands and on the day, the month and the year first above written.

SUPPLIER

PURCHASER

SIGNATURE & SEAL

SIGNATURE & SEAL

[Signature]
Dr. Hassan Murad Shah
CNIC NO: 41305-0554246-3
Designation: Executive District Officer (Health) Matiari

[Signature]
DR HASSAN MURAD SHAH
NAME: DR HASSAN MURAD SHAH
Address: Executive District Officer (Health) Matiari
CNIC NO: 41305-0554246-3
Designation: - Executive District Officer (Health) Matiari

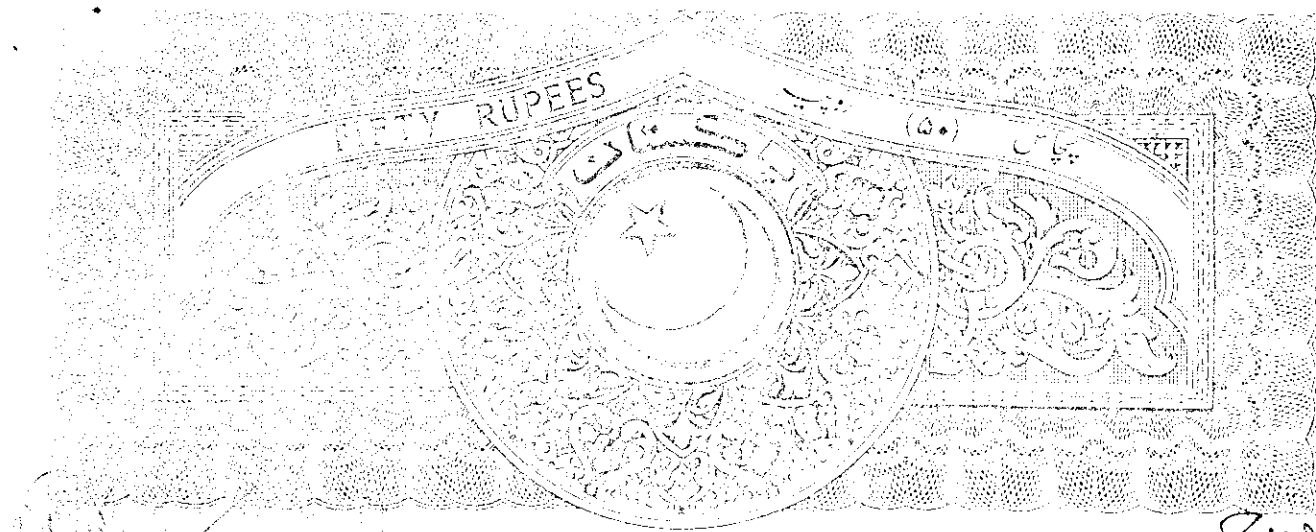
Witness (Supplier)

Witness (Purchaser)

Name: _____
Address: _____
CNIC NO: _____
Designation: _____

[Signature]
NAME: DR (Capt) Basher Ahmed Solangi
Address: Executive District Officer (Health) Matiari
CNIC NO: 41306-9215806-9
Designation: - District Officer Health (Admin & Accounts) Matiari

DISTRICT OFFICER HEALTH
MATIARI



Office No. 08-02-2012 Life Line Trading Co.


Contract Agreement

3118
08-02-2012

This agreement made this _____ day of _____ 2012 between the Office of the Executive District Officer _____ District "The Purchaser" herein after and M/S LIFE LINE TRADING CO HYDERABAD herein after "The Supplier".

Where as, the purchaser is desirous that certain medicines (As mentioned below in the table) should be provided by the supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the supply of the Quoted Medicine.

S#	A/U	DESCRIPTION OF ITEMS	Rate / A/U
06	Tab	Vitamin-k 100mg strip/blister pack	0.69
20	Tab	Dibrenhydrinate Strip / Blister Pack	0.69
25	Tab	Furosemide 40mg/Blister Pack	0.68
28	Tab	Piroxicam 20mg Strip/Blister pack	0.59
31	Syp	Rikampicin 2% 100mg/5ml Bottle of 60ml	38.95
34	inj	Tranexamic Acid 250mg/5ml	11.54
38	inj	Cimilidin 200mg. Amp of 2ml I/M/IV	4.70
40	inj	Diazepam 5mg/2ml	5.10
43	inj	Dibrenhydrinate 50mg/ml	3.25
47	Cap	Piroxicam 20mg Strip/Blister pack	0.59
49	Cap	Tranexamic Acid 250mg Strip/Blister pack	5.35
45	Gel	Nyloquine Gel	17.85
183		Block Needles Box of 100 each	495.00
189		LA Needles Box of 100 each	495.00
195		ORS (Oral Rehydration Salt)	5.10


 LIFE LINE Trading Company
 Shop No. 10 A/5/1725
 23-10-17 Road, H. Id

Sl. No	DESCRIPTION OF ITEMS	Rate / A/U
102	Xyloestine S Cartridges with Adrenaline Tin of 50 cartridges	1695.00
103	Xyloestine S Cartridges without Adrenaline Tin of 50 cartridges	1695.00

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

- In this agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Enquiry referred to.
- Following documents shall be deemed to form and be read and construed as part of this agreement viz:
 - Contract Agreement.
 - Price Schedule
 - Technical Specifications
 - Terms & Conditions of Tender Enquiry.
 - Terms & Condition of the Contract.
 - Schedule of requirement.
 - Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.
- In consideration of the payments to be made by the purchaser to the, we supplier as herein after mentioned, the supplier here by covenants with the purchaser to provide the goods and services and to remedy the defects therein in conformity in all respects with the provision of the contract.
- The purchaser hereby covenant to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the Contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.

All witness here of 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.

SUPPLIER
SIGNATURE & SEAL

NAME: Sahib Ahmad Khan
Address: Shirani Rd. Dist 5 (at) Faisalabad Wgd
CNIC NO: 2123044-5223725-9
Designation: _____

PURCHASER
SIGNATURE & SEAL

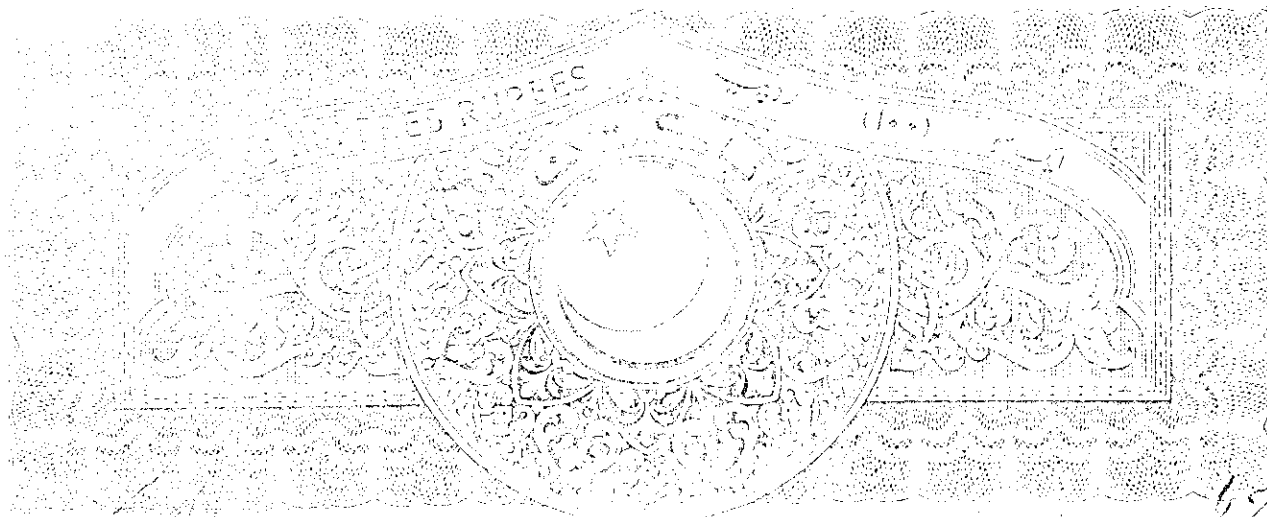
NAME: DR HASSAN MURAD SHAH
Address: Executive District Officer (Health) Matiari
CNIC NO: 41305-0554246-3
Designation: - Executive District Officer (Health) Matiari

Witness (Supplier)

NAME: _____
Address: _____
CNIC NO: _____
Designation: _____

Witness (Purchaser)

NAME: DR (Capt) Basim Ahmed Solangi
Address: Executive District Officer (Health) Matiari
CNIC NO: 41306-9215806-9
Designation: - District Officer Health (Admin & Accounts) Matiari
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS
MATIARI.



Contract Agreement

Gains Enterprises

65/3/2012

This agreement made this 20th day of June 2012 between the Office of the Executive District Officer Hyderabad, India "The Purchaser" herein after and M/S GAINS ENTERPRISES HYDERABAD herein after "The Supplier".

Where as, the purchaser is desirous that certain medicine (As mentioned below in the table) should be provided by supplier, and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the supply for Quoted Medicine.

S#	A/U	DESCRIPTION OF ITEMS	Rate / A/U
19	Tab	Diltiazem 30mg Strip / Blister Pack	1.30
46	Tab	Phenamine 20mg Strip/Blister pack	0.06
52	OPP	Seduxamol 2mg/5ml Bottle of 60ml	9.50
86	OPP	Alkalium Magnother Compounds Bottle of 120ml	10.60
70	OPP	Methamio Acid 60ml	8.50
13	Drops	Gentamycin Eye / Ear Drops	7.85
151	Distri	Tr. Eenzain Co Bottle of 450ml	110.06

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

1. This agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Enquiry referred to.
2. Following documents shall be deemed to form and be read and construed as part of this agreement viz:
 - a. Contract Agreement.
 - b. Price Schedule
 - c. Technical Specifications
 - d. Terms & Conditions of Tender Enquiry.
 - e. Terms & Condition of the Contract.
 - f. Schedule of requirement.
 - g. Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.

3. In consideration of the payments to be made by the purchaser to me, the supplier as herein after mentioned, the supplier hereby covenants with the purchaser to provide the goods and services and to remedy the defects therein in conformity in all respects with the provision of the contract
4. The purchaser hereby covenants to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the Contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.

All witness where of 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.

SUPPLIER

SIGNATURE & SEAL _____

NAME: Ashfaq, M. Nadeem
 Address: B-10, Unit # 83, Lohpheed
 CNIC NO: 41304-2109245-9
 Designation: D/O

Witness (Supplier)

NAME: Fahim Ali
 Address: Proprietor, Hussainabad
 CNIC NO: 43203-5649947-5
 Designation: Asst. Consultant

PURCHASER

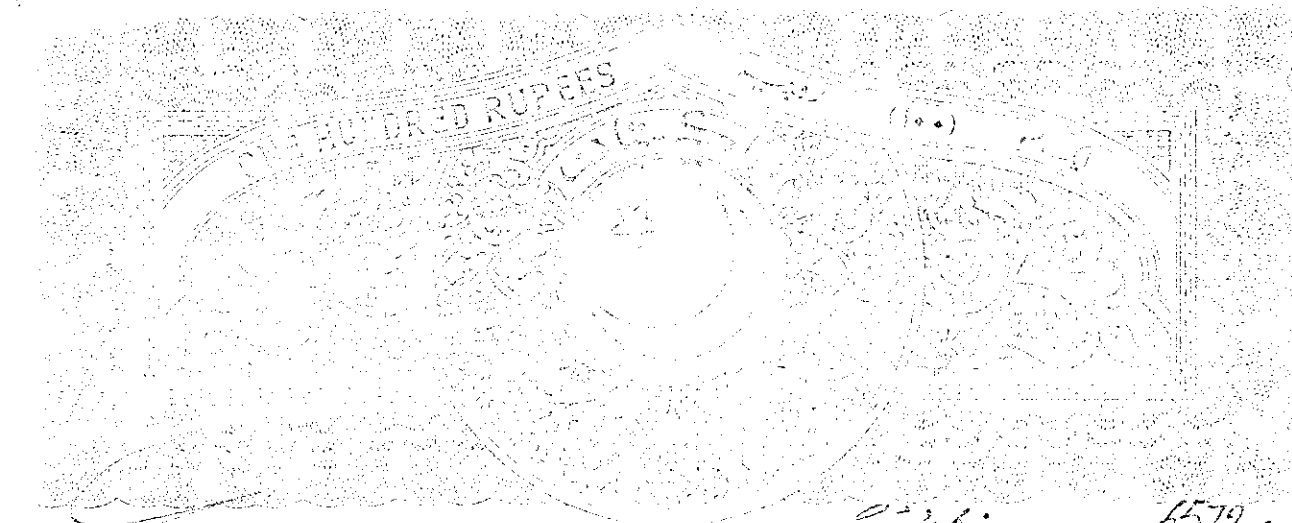
SIGNATURE & SEAL _____

NAME: DR HASSAN MURAD SHAH
 Address: Executive District Officer (Health) Matiari
 CNIC NO: 41305-0554246-3
 Designation: Executive District Officer (Health) Matiari

Witness (Purchaser)

NAME: DR (Capt) Bashir Ahmed Solangi
 Address: Executive District Officer (Health) Matiari
 CNIC NO: 41306-9215806-9
 Designation: District Officer Health (Admin & Accounts) Matiari

DISTRICT OFFICER HEALTH
 ADMIN & ACCOUNTS
 MATIARI.



Contract Agreement

05 MAR 2012

This agreement made this 05 day of MAR 2012 between the Office of the Executive District Officer Health Medical "The Purchaser" herein after and M/S ZAM TRADERS HYDERABAD herein after "The Supplier". Where as, the purchaser is desirous that certain medicine (As mentioned below in the table) should be provided by supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the supply the Quoted medicine.

Sl. No	Form	DESCRIPTION OF ITEMS	Rate / A/U
01	Tab	Atenolol 50mg Strip Pack	1.10
02	Tab	Antidopin 5mg Strip/Blister pack	1.10
03	Tab	Vitamin-C 100mg strip/blister pack	0.35
04	Tab	Methyl Dopa 250mg Strip/Blister pack	4.00
05	Tab	Gofloxacin 400mg Strip/ Blister pack	2.00
06	Tab	Cotrimoxazole Strip/Blister pack	1.10
08	Syp	Albendazol 100mg/5ml Bottle of 30ml	11.00
09	Syp	Ampicillin 125mg/5ml	22.00
17	Inj	Ranitidine 50mg Amp of 2ml	4.00
18	Inj	Atropin 1mg/ml Amp of 1ml	2.00
17	Inj	B-Complex I/M /IV Amp of 2ml	2.75
21	Inj	Cefotaxim Sodium 250mg	19.00
24	Inj	Ceftriaxone 250mg	20.00
25	Inj	Cefuroxim Sodium 250mg	25.00

Sl. #	Lot / U	DESCRIPTION OF ITEMS	Rate / A/U
	Inj	Dorzolam 40mg /2ml	6.50
103	Inj	Paracetamol IM/IV 20mg Amp of 2ml	3.00
103	Cap	Cephadrin 250mg Strip/Blister pack	4.00
103	Cap	Lincomycin 500mg Strip/Blister pack	5.90
105	Lotion	Beazyl Benzoyl Lotion 25% Bottle of 60ml	14.00
107	Powder	Neomycin Powder	12.00

The effective period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

1. In this agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Enquiry referred to.
2. Following documents shall be deemed to form and be read and construed as part of this agreement viz:
 - a. Contract Agreement.
 - b. Price Schedule
 - c. Technical Specifications
 - d. Terms & Conditions of Tender Enquiry.
 - e. Terms & Condition of the Contract.
 - f. Schedule of requirement.
 - g. Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.
3. In consideration of the payments to be made by the purchaser to the, we supplier as herein after mentioned, the supplier here by covenants with the purchaser to provide the goods and services and to remedy the defects therein in conformity in all respects with the provision of the contract.
4. The purchaser hereby covenant to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the Contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.

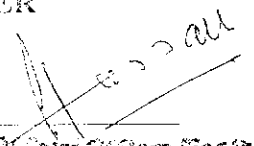
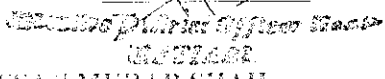
All witness where of the parties here to have caused this agreement in accordance with their respective hands and seals, the day, the month and the year first above written.

SUPPLIER

SIGNATURE & SEAL 

NAME: Dr Hassan Murad Shah
Address: 91-5, Model Town Hyd
CNIC NO: 42000-4670578-7
Designation: Dr Hassan

PURCHASER


SIGNATURE & SEAL 


NAME: **DR HASSAN MURAD SHAH**
Address: Executive District Officer (Health) Matiari
CNIC NO: 41305-0554246-3
Designation: - Executive District Officer (Health) Matiari

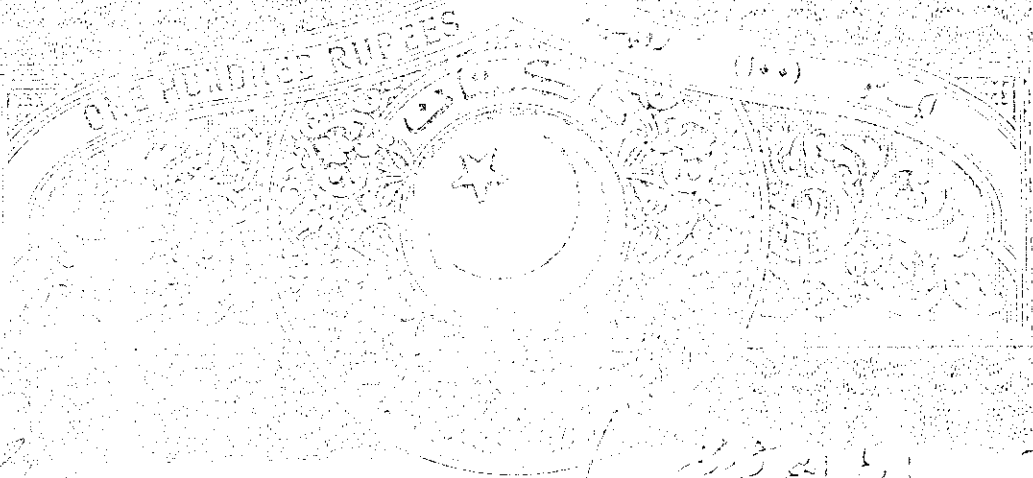
Witness (Supplier)

NAME: Dr Hassan Murad Shah
Address: 91-5, Model Town Hyd
CNIC NO: 42000-4670578-7
Designation: Dr Hassan

Witness (Purchaser)


NAME: **DR (Capt) Basim Ahmed Solangi**
Address: Executive District Officer (Health) Matiari
CNIC NO: 41366-9215806-9
Designation: - District Officer Health (Admin & Accounts) Matiari

DISTRICT OFFICER HEALTH
ADMIN & ACCOUNTS
MATIARI.



Contract Agreement

3681
05 MAR 2012

This agreement made this 05 day of March 2012 between the Office of the Executive District Officer in Madurai "The Purchaser" herein after and M/S Z H BROTHERS HYDERABAD herein after "The Supplier". Where as, the purchaser is desirous that certain medicine (As mentioned below in the table) should be provided by supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the supply the Quoted Medicine.

Sl. No	DESCRIPTION OF ITEMS	Rate / AU
01	Phenelzidine 30mg Strip/Blister pack	0.08

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

- In this agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Enquiry referred to.
- Following documents shall be deemed to form and be read and construed as part of this agreement.
 - Contract Agreement.
 - Price Schedule
 - Technical Specifications
 - Terms & Conditions of Tender Enquiry.
 - Terms & Condition of the Contract.
 - Schedule of requirement.
 - Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.
- In consideration of the payments to be made by the purchaser to the, the supplier as herein after Mentioned, the supplier hereby covenants with the purchaser to provide the goods and / or / services and to remedy the defects therein in conformity in all respects with the provision of the contract.
- The purchaser hereby covenant to pay the supplier in consideration of the provision of the goods and / or / services and the remedying of the defects therein, the Contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.

[Handwritten signature]

[Handwritten signature]

Witness where of the parties here to have caused this agreement in accordance with their respective hands and
date, the day, the month and the year first above written.

SUPPLIER

PURCHASER

SIGNATURE & SEAL

SIGNATURE & SEAL

NAME: ELISSA N BUX

NAME: DR HASSAN MURAD SHAI

Address: ANIS, Camp, Matiari

Address: Executive District Officer (Health) Matiari

CNIC NO: 41306-5137097-0

CNIC NO: 41305-0554246-3

Designation: Proprietor

Designation: - Executive District Officer (Health) Matiari

Witness (Supplier)

Witness (Purchaser)

NAME: DR Bashir Ahmed Solangi

NAME: DR (Capt) Bashir Ahmed Solangi

Address: ANIS, Camp, Matiari

Address: Executive District Officer (Health) Matiari

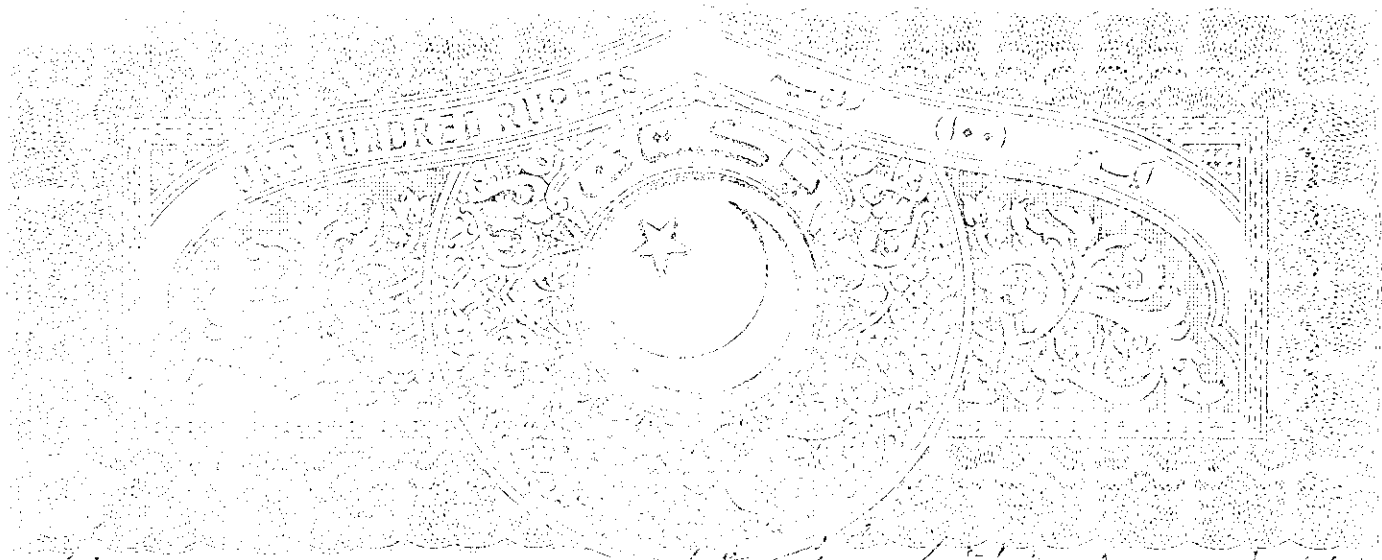
CNIC NO: 41306-9215806-9

CNIC NO: 41306-9215806-9

Designation: S.O. (A) Health

Designation: - District Officer Health (Admin & Accounts) Matiari

DISPATCHED BY: DR (Capt) Bashir Ahmed Solangi
DATE: 10/10/2018
TIME: 10:00 AM



Contract Agreement

This agreement made this _____ day of _____ 2012 between the Office of the Executive District Officer
Hyderabad, the Purchaser" herein after and M/S IMPERIL TRADERS HYDERABAD herein after "The
Supplier".

Where as, the purchaser is desirous that certain medicine (As mentioned below in the table) should be provided by
supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the
supply the Quoted Medicine.

S#	QTY	DESCRIPTION OF ITEMS	Rate / A/U
1		X-Ray Developer	700.00
2		X-Ray Fixer	700.00
3		X-Ray Films Size 12x15	95.00
4		X-Ray Films Size 10x12	63.00
5		X-Ray Films Size 8x10	43.00
6	Gel	Ultrasound Gel	1100.00

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

1. In this agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Enquiry referred to.
2. Following documents shall be deemed to form and be read and construed as part of this agreement viz:
 - a. Contract Agreement.
 - b. Price Schedule
 - c. Technical Specifications
 - d. Terms & Conditions of Tender Enquiry.
 - e. Terms & Condition of the Contract.
 - f. Schedule of requirement.
 - g. Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.
3. In consideration of the payments to be made by the purchaser to the, we supplier as herein after

4. The purchaser hereby covenant to pay the supplier in consideration of the provision of the goods and services and the remedying of the defects therein, the Contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.

All witness where of 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.

SUPPLIER

PURCHASER

SIGNATURE & SEAL

SIGNATURE & SEAL

NAME: Fauzan Bhatti
Address: 10/10-1, D.G.
CNIC NO: 9201-92587-5
Designation: Proprietor

NAME: DR HASSAN MURAD SHAIKH
Address: Executive District Officer (Health) Matiari
CNIC NO: 41305-0554240-3
Designation: - Executive District Officer (Health) Matiari

Witness (Supplier)

Witness (Purchaser)

NAME: Imam Akbar
Address: 10/10-1, D.G.
CNIC NO: 9201-92587-5
Designation: Proprietor

NAME: DR (Capt) Basher Ahmed Solangi
Address: Executive District Officer (Health) Matiari
CNIC NO: 41306-9215806-9
Designation: - District Officer Health (Admin & Accounts) Matiari

DISTRICT OFFICER HEALTH &
ADMIN & ACCOUNTS
MATIARI.

Contract Agreement

2394

This agreement made this 08 day of Oct 2012 between the Office of the Executive District Officer Health, Mahabubnagar "The Purchaser" herein after and M/S RTJ ENTERPRISES HYDERABAD herein after "The Supplier".

Where as, the purchaser is desirous that certain medicine (As mentioned below in the table) should be provided by supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser for the supply the Quoted Medicine.

S#	TA/U	DESCRIPTION OF ITEMS	Rate / A/U
01	Tab	Aluminum+Mag--other Compounds strip/blister pack	0.72
02	Tab	Aerobio 250mg Strip Pack	2.50
07	Tab	B-Complex Sugar Coated Strip/Blister Pack	1.50
08	Tab	Bromazepam 3 mg Strip/Blister Pack	1.50
09	Tab	Soitatumol 4mg Strip/Bluster pack	0.30
10	Tab	Cefixon 10mg Strip/Blister Pack	0.48
11	Tab	Chloroquin Phosphate 250mg Strip/Blister Pack	0.95
14	Tab	Ramildine 150mg Strip/Bluster pack	1.50
15	Tab	Dexamethasone strip/blister pack	0.23
16	Tab	Erythro mycin 250mg Strip/Blister Pack	5.00
17	Tab	Erythro mycin 500mg Strip/Blister Pack	10.50
18	Tab	Paralodin 20mg Strip / Blister Pack	0.78
24	Tab	Folic acid 5mg tin/bottle of 1000 tabs	0.058
28	Tab	Ibuprofen 200mg Strip/Blister pack	0.58
29	Tab	Ibuprofen 400mg Strip/Blister pack	0.78
34	Tab	Metformin Acid 250mg	0.52
37	Tab	Metastilopromide 10mg Strip/Blister pack	0.38
40	Tab	Multivitamin Sugar Coated tin	2.00
45	Tab	Paracetamol 500mg strip/blister pack	0.40

S#	A/U	DESCRIPTION OF ITEMS	Rate / A/U
50	Syp	Paracetamol 250mg/5ml Bottle of 60ml	11.50
53	Syp	Sodium Acid Citrate 120ml	11.25
54	Syp	Vitamin B Complex 120ml	10.20
57	Syp	Ammonium Chloride 60ml	10.85
59	Syp	Amoxicillin 125mg/5ml Bottle of 60ml	26.00
61	Syp	Ampicillin 250mg/5ml	36.50
62	Syp	Clofenoxazole	11.00
65	Syp	Chloroquine 50mg/5ml Bottle of 60ml	13.50
67	Syp	Chloropheniramine 60ml	10.80
68	Syp	Erythromycin Bottle of 60ml	39.00
71	Syp	Miconidazol 200mg/5ml bottle of 60ml	12.50
72	Syp	Multivitamin+Miniral Bottle of 120ml	13.50
78	Inj	Vitamin K 10mg Amp of 1ml	3.50
83	Inj	Ampicillin 250mg Vial	7.50
84	Inj	Ampicillin 500mg Vial	7.90
90	Inj	Chloroquine 40mg/ Amp of 5ml	10.00
91	Inj	Chloropheniramine Mixture 10mg/Amil of 2ml	2.95
92	Inj	Dexamethasone Amp of 1ml	4.50
109	Inj	Gentamycin 90mg, Amp/Vial of 2ml	3.10
115	Inj	Lignocaine 2% Solution Amp of 10ml	10.00
116	Inj	Lignocaine 2% With Adrenalin Amp of 10ml	10.00
117	Inj	Lincomycin 600mg, Vial/Amp 1ml	3.90
119	Inj	Ivabradipromide 10mg/2ml Amp 1ML/V	2.60
120	Inj	Miconidazol 500mg / 100ml	28.00
121		Disposable Syringe 5cc	4.10
122		Disposable Syringe 3cc	4.10
128	Cap	Amoxicillin 250mg Strip/Blaster pack	2.00
129	Cap	Amoxicillin 500mg Strip/Blaster pack	3.25

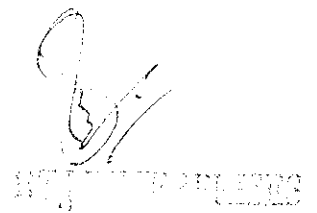
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D#	A/U	DESCRIPTION OF ITEMS	Rate / A/U
134	Cap	Doxycycline 100mg Strip/Blister pack	1.15
135	Cap	Hydrocortisone 25mg Tin of 1000	0.90
137	Cap	Omeprazole 20mg Strip/Blister pack	1.35
142	Drops	Chlorophenical Eye / Ear	7.50
147		Neomycin Skin Ointment	25.00
150	Soln	Povidone Iodine 7.5 % (Solution) Bottle of 450ml	175.00
152	Tinct	Povidone Iodine, Bottle of 450ml	135.00
153		Adhesive Plaster 4"	1.60.00
154		Blood Collecting Bag With Giving Set Bag of 500ml	185.00
158		Cotton Roll 500gm	150.00
157		Cryp Bandage 6"	75.00
162		Serum And- B Vial of 10ml	275.00
163		I.V Giving Set	11.00
164		I.V Canula With Stepper 20,22,24 No	35.00
166		Paper Plaster	23.00
167		Plaster of Paris 15cm x 2.7 meter	450.00
168		Sensitol Lotion	55.00
169		SH. Thread In Dozens	35.00
170		Surgical Bandages 10cm x 5meter	6.50
171		Surgical Bandages 15cm x 5meter	9.50

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

1. In this agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Enquiry referred to.



- d. Terms & Conditions of Tender Inquiry.
- e. Terms & Condition of the Contract.
- f. Schedule of requirement.
- g. Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.

3. In consideration of the payments to be made by the purchaser to the, we supplier as herein after mentioned, the supplier here by covenants with the purchaser to provide the goods and services and to remedy the defects therein in conformity in all respects with the provision of the contract

4. The purchaser hereby covenant to pay the supplier in consideration of the provision of the goods and Services and the remedying of the defects therein, the Contract price payable under the provision of the contract at the time and in the manner prescribed in the contract.

In witness where of 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.

SUPPLIER

PURCHASER

SIGNATURE & SEAL 

SIGNATURE & SEAL 

NAME: M. Khan Rajput.
 Address: Matiali, Matiali.
 CNIC NO: 41306-9215806-9
 Designation: Asst. Manager.

NAME: DR HASSAN MURAD BIAH
 Address: Executive District Officer (Health) Matiali
 CNIC NO: 41305-0554246-3
 Designation: Executive District Officer (Health) Matiali

Witness (Supplier)

Witness (Purchaser)

NAME: Imam Solangi.
 Address: Matiali, Matiali.
 CNIC NO: 41306-7164158-5
 Designation: Asst. Manager.

NAME: DR (Capt) Basher Ahmed Solangi
 Address: Executive District Officer (Health) Matiali
 CNIC NO: 41306-9215806-9
 Designation: District Officer Health (Admin & Accounts) Matiali

DISTRICT OFFICER
 ADMIN & ACCOUNTS
 MATIALI.



Contract Agreement

This agreement made this _____ day of _____ 2012 between the Office of the Executive District Officer
 Main Market "The Purchaser" herein after and M/S IMPERIAL TREDERS HYDERABAD herein after "The
 Supplier".

Where as the purchaser is desirous that certain medicine (As mentioned below in the table) should be provided by
 supplier and where as the supplier has agreed to provide and quoted the rates which has accepted by purchaser fir the
 supply the Quoted Medicine.

S#	A/U	DESCRIPTION OF ITEMS	Rate / A/U
1	Tab	Ciprofloxacin 250 mg Strip/Blister Pack	2.15
17	Tab	Diclofenac Sodium 50mg Strip / Blister Pack	0.39
23	Tab	Gilbenclamide 5mg Strip/Blister Pack	0.35
27	Tab	Gilmepride 1mg Blister pack	0.95
30	Tab	Isosorbide Dinitrate 10mg Strip pack	2.00
34	Tab	Levofloxacin 250mg Strip/Bluster pack	2.65
35	Tab	Levofloxacin 500mg Strip/Bluster pack	4.25
38	Tab	Metformin 500mg Strip/Bluster pack	1.04
39	Tab	Metronidazol 400mg Strip/Bluster pack	0.89
41	Tab	Naproxen 500mg Strip/Bluster pack	4.10
42	Tab	Norfloxacin 400mg Strip/Bluster pack	4.00
47	Tab	Cephalexin 500mg Strip/Blister Pack	15.00
52	Syp	Cephradin 125mg/5ml	31.00
53	Syp	Cepnradin 250mg/5ml	44.00
54	Inj	Ringers Lacted 1000ml	55.00
55	Inj	Ringers Lacted 500ml	55.00
58	Inj	Syntocinon	15.00
67	Inj	0.45% Dextrose Saline 500ml	55.00
81	Inj	Adrenaline 1mg Amp of 1ml	10.00
89	Inj	Cefotaxium Sodium 1g	29.00

ATTESTED
 ALLIANCE OF DD
 Hyderabad

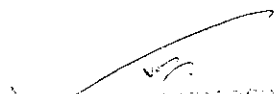
Sl. No	A/U	DESCRIPTION OF ITEMS	Rate / A/U
128	inj	Cefotaxium Sodium 500mg	23.50
129	inj	Ceftriaxone 1g	29.50
130	inj	Ceftriaxone 500mg	24.50
131	inj	10% Dextrose Water 1000ml	55.00
132	inj	5% Dextrose Water 1000ml	45.00
133	inj	5% Dextrose Saline 1000ml	45.00
134	inj	Diclofenac Sodium 75mg/3ml	2.20
135	inj	Distil Water 5ml	2.00
136	inj	0.9% Normal Saline 1000ml	45.00
137		Dialyzer Solution	350.00
138		Dialyzer with Set	1250.00
139	Cream	Belametasone + Neomycin. Tub of 15 gms	26.00
140	Cap	Cephradin 500mg Strip/Bluster pack	6.25
141	Cap	Ornepazole 20mg Strip/Bluster pack	1.35
142	Drops	Tobramycin 0.3% Eye Drops	59.00

The delivery period will commence from the date of acceptance of the contract by the bidder.

Now this agreement witnessed as follows:

1. In this agreement word and expression shall have the same meaning as are respectively assigned to them in the Term & Conditions of Tender Enquiry referred to.
2. Following documents shall be deemed to form and be read and construed as part of this agreement viz:
 - a. Contract Agreement.
 - b. Price Schedule
 - c. Technical Specifications
 - d. Terms & Conditions of Tender Enquiry.
 - e. Terms & Condition of the Contract.
 - f. Schedule of requirement.
 - g. Bidders offer including the relevant correspondence with all annexes made before signing the Contract agreement.

3. In consideration of the payments to be made by the purchaser to the, we supplier as herein after mentioned, the supplier here by covenants with the purchaser to provide the goods and services and to remedy the defects therein in conformity in all respects with the provision of the contract.


IMPERIAL TRADERS (PAC)
 SINGAPORE

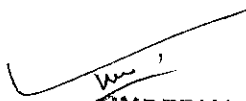
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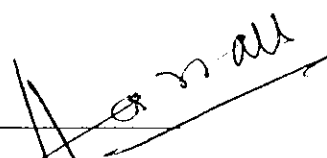
SUPPLIER

PURCHASER

SIGNATURE & SEAL


IMPERIAL TRADERS (INC)
HYDERABAD.

SIGNATURE & SEAL


Executive District Officer Health
MATIARI.

NAME: Farrukh Atique Rajput.

NAME: **DR HASSAN HURAD SHAH**

Address Latifabad. Hyd.

Address: Executive District Officer (Health) Matiari

CNIC NO 42201-9265671-5

CNIC NO: 41305-0554246-3

Designation proprietor

Designation: - Executive District Officer (Health) Matiari

Witness (Supplier)

Witness (Purchaser)

NAME: Imran Istiaque

NAME: **DR (Capt) Basher Ahmed Solangi**

Address Latifabad.

Address: Executive District Officer (Health) Matiari

CNIC NO 41304-7164158-5

CNIC NO: 41306-9215806-9

Designation Asst. Manager.

Designation: - District Officer Health (Admin & Accounts) Matiari

DISTRICT OFFICER HEALTH
ADMIN & ACCOUNTS
MATIARI.



Handwritten notes and numbers: 85, 21-2-12

R.L.J. ENTERPRISES
HYDRABAD

Supply of medicines for the year 2011-12.

Cost-Related rates for the following items have been approved for the purchase of various medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

Sl. No.	QTY	DESCRIPTION	Rate	Value	Remarks
1	10000	Acetaminophen (Blister Pack)	50000	500000	
9	10000	Paracetamol (Blister Pack)	50000	500000	
10	10000	Paracetamol (Blister Pack)	50000	500000	
14	10000	Paracetamol (Blister Pack)	25000	250000	
15	10000	Paracetamol (Blister Pack)	10000	100000	
17	10000	Paracetamol (Blister Pack)	25000	250000	
21	10000	Paracetamol (Blister Pack)	5000	50000	
23	10000	Paracetamol (Blister Pack)	10000	100000	
28	10000	Ibuprofen 200mg (Blister Pack)	25000	250000	
31	10000	Ibuprofen 400mg (Blister Pack)	25000	250000	
34	10000	Aspirin 75mg (Blister Pack)	50000	500000	
37	10000	Aspirin 100mg (Blister Pack)	20000	200000	
40	10000	Aspirin 150mg (Blister Pack)	10000	100000	
45	10000	Aspirin 200mg (Blister Pack)	10000	100000	
		GRAND TOTAL		6233000	

Period of delivery: 30 days
 Place of delivery: Store at L.D.O. (H.M.A.H.A.P.)
 Dispatch Instructions: Free delivery to consignee
 Name and Address of consignee: L.D.O. (H.M.A.H.A.P.)

~~EXCISE DIVISION, DISTRICT HEADQUARTERS, DISTRICT PRATYAKH.~~



No. 100/2011
 Date: 27-2-12
 286
 DATE 27-2-12

RTI ENTERPRISES
 HYDERABAD

Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	QUANTITY	DESCRIPTION	QTY	RATE	AMOUNT
1	2896	Paracetamol	2896	11.50	33240.00
2	5000	Ammonium Chloride	5000	10.00	50000.00
3	5000	Amoxicillin 125mg	5000	20.00	100000.00
4	5000	Contraoxazole	5000	17.00	85000.00
5	5000	Nicotinamide	5000	17.00	85000.00
6	50000	Amoxicillin 500mg	50000	17.00	850000.00
7	2000	Procainamide	2000	40.00	80000.00
8	2200	Metronidazole 500ml	2200	40.00	88000.00
GRAND TOTAL					1500000.00

Period of delivery: 30 days
 Place of delivery: Store at E.D.O (H) MATHUR
 Dispatch In from: Free delivery to consignee
 Name and Address of consignee: E.D.O (locality) MATHUR

EXECUTIVE DISTRICT COMMISSIONER
 DISTRICT MATHUR



DEPARTMENT OF
 PUBLIC HEALTH
 DISTRICT MATARU
 287-11
 27-2-12

PUBLIC ENTERPRISES
 HYDRI KARNATAKA

Supply of medicines for the year 2011-12.

Your quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill

S.No	Sl. No	Description	QTY	Rate	Amount
1	11	Trichomycinide 1%	7500	2.00	15000.00
2	12	Neomycin Skin	10000	2.00	20000.00
3	13	Synican with antiseptic	500	30.00	15000.00
4	14	Chlorthalopromide	5000	2.00	10000.00
5	15	Chlorthalopromide 1% Drop	2000	2.00	4000.00
6	16	Neomycin Skin	1000	20.00	20000.00
7	17	1/2 Galing Sol	2000	11.00	22000.00
8	18	1/2 Galing Sol	514	8.00	4112.00
GRANT TOTAL					207300.00

To be supplied within
 30 days of date of order
 To be supplied at
 District Mataru, District Mataru

30 days
 Store at District Mataru
 District Mataru, District Mataru

EXECUTIVE DISTRICT OFFICER HEALTH
 DISTRICT MATARU



EDDHEALTH/2011-12/088
 27-2-12

To

IMPERIAL TRADERS (INC.)
 HYDRABAD

Subject: Supply of medicines for the year 2011-12.

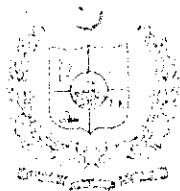
Your quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill

S.No	Qty	DESCRIPTION	QTY	RATE	AMOUNT
001	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
002	2000	Paracetamol 500mg Tablets	2000	20.00	40000.00
003	2000	Paracetamol 500mg Tablets	2000	20.00	40000.00
004	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
005	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
006	20000	Aspirin 500mg Tablets	20000	15.00	300000.00
007	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
008	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
009	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
010	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
011	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
012	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
013	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
014	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
015	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
016	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
017	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
018	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
019	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
020	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
021	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
022	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
023	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
024	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
025	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
026	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
027	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
028	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
029	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
030	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
031	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
032	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
033	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
034	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
035	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
036	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
037	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
038	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
039	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
040	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
041	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
042	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
043	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
044	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
045	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
046	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
047	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
048	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
049	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
050	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
051	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
052	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
053	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
054	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
055	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
056	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
057	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
058	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
059	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
060	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
061	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
062	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
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064	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
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066	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
067	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
068	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
069	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
070	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
071	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
072	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
073	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
074	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
075	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
076	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
077	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
078	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
079	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
080	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
081	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
082	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
083	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
084	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
085	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
086	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
087	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
088	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
089	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
090	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
091	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
092	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
093	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
094	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
095	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
096	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
097	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
098	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
099	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
100	1000	Aspirin 500mg Tablets	1000	15.00	15000.00
GRAND TOTAL					600000.00

Period of validity: 30 days
 Place of supply: District Hospital
 Transport charges: Free
 Name and Address of consignee: E.D.O Health, HAFSARI

30 days
 District Hospital
 Free delivery to consignee
 E.D.O Health, HAFSARI

~~EXECUTIVE DISTRICT OFFICER (H.P.),
 DISTRICT HAFSARI~~
 (S) SAM



To,

IMPERIAL TRAILERS (INC.)
 HYDERABAD

Subject: Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

Sl. No.	QTY	DESCRIPTION	QTY	Rate	Amount
150	2000	Cefotriaxone 500mg (Blistor Pack)	2000	2.00	4000.00
151	20000	Amoxicillin 500mg (Blistor Pack)	20000	0.20	4000.00
152	2000	Carbamazepine 100mg (Blistor Pack)	2000	2.00	4000.00
153	2000	Neo-Sorbide Dinitrate 10mg (Blistor Pack)	2000	2.00	4000.00
154	5000	Levofloxacin 200mg (Blistor Pack)	5000	2.00	10000.00
155	50000	Moromidazole 400mg (Blistor Pack)	50000	0.10	5000.00
156	2000	Magnesium 500mg (Blistor Pack)	2000	4.00	8000.00
157	5000	Merfloxacin 400mg (Blistor Pack)	5000	4.00	20000.00
158	5000	Cephalexin 500mg (Blistor Pack)	5000	14.00	70000.00
159	1000	Amoxicillin 500mg	1000	15.000	15000.00
GRAND TOTAL:					233000.00

Period of delivery: 30 days
 Place of delivery: Store at H.O. (Health) M.A. (M)
 Dispatch Instruction: Free delivery to consignee
 Name and Address of consignee: H.O. (Health) M.A. (M)

(Signature)
 EXECUTIVE DISTRICT OFFICER (Health)
 DISTRICT MATERNAL



A to ZEE
 HYDERABAD

Supply of medicines for the year 2011-12.

Your granted rates for the following items have been approved for the supply of drugs/ medicine for the year 2011-2012 by the committee. You are hereby notified to please supply the following medicines and submit three copies of bill.

Sl. No	QTY	DESCRIPTION	QTY	RATE	AMOUNT
1	200	Insulin (H.P. 30 Vial 10ml)	200	385.00	77000
2	200	Insulin (H.P. 30 Vial 10ml)	200	650.00	130000
3	200	Insulin (H.P. 30 Vial 10ml)	200	650.00	130000
4	200	Insulin (H.P. 30 Vial 10ml)	200	650.00	130000
GRANT TOTAL					367000

Period of delivery: _____
 Place of delivery: _____
 Dispatch Instruction: _____
 Name and Address of consignee: _____

All days
 Store No. 2304, B.M.H.A. H.
 Free delivery to consignee
 H.D.O. (Health Material)

EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT HEADQUARTERS



To

LIFE LINE TRADING
HYDRABAD.

Supply of medicines for the year 2011-12.

Your Quoted rates for the following items have been approved for the purchase of drugs/ medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill

S.NO	Z.C	DESCRIPTION	QTY	RATE	AMOUNT
1	173	Vitamin K 1mg (Blister Pack)	26000	0.69	18140
2	173	Diamorphide 2mg (Blister Pack)	6000	0.39	2340
3	173	Timonide 1mg (Blister Pack)	10000	0.38	3800
4	173	Procainamide 1mg (Blister Pack)	10000	0.55	5500
5	173	Ampicillin 250mg/5ml (500ml Bottle)	1200	34.91	41892
6	173	Tranexama Acid 250mg/5ml	2500	1.54	3850
7	173	Clonidine 0.1mg amp of 1ml	3000	1.76	5280
8	173	Diamorphide 2mg (Blister Pack)	3000	0.77	2310
9	173	Tranexama Acid 250mg (Blister Pack)	3000	0.54	1620
10	173	Tranexama Acid 250mg (Blister Pack)	10000	0.54	5400
11	173	Cyclosporin 250	500	11.50	5750
12	173	Blebsin 1mg (Box of 100) each	50	300.00	15000
13	173	Black VA 30 (Box of 10) each	50	300.00	15000
14	173	Nyctinone 500 (Box of 50)	50	100.00	5000
15	173	Cardilipin	50	100.00	5000
16	173	Nyctinone 500 (Box of 50)	50	100.00	5000
17	173	Cardilipin	50	100.00	5000
GRAND TOTAL					444958.00

Period of delivery
 Place of delivery
 Dispatch instruction
 Name and Address of consignee

MYSURU
 Street: EDDO, MYSURU
 Free delivery in compliance
 EDDO, Mysuru, KARNATAKA

EXECUTIVE DISTRICT OFFICER, MYSURU
 DISTRICT HEADQUARTERS



GOVERNMENT OF KARNATAKA
 DEPARTMENT OF PUBLIC HEALTH
 DISTRICT MATERNAL & CHILD HEALTH OFFICE
 DISTRICT MATERNAL & CHILD HEALTH OFFICE
 DATED: 6/3/12

**GAINS ENTERPRISES
 HYDERABAD.**

Subject: Supply of medicines for the year 2011-12.

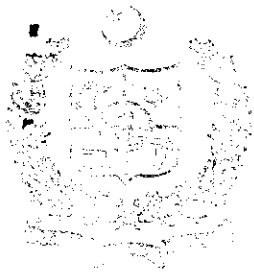
Your quoted rates for the following items have been approved for the purchase of drugs/medicine for the year 2011-2012 by the committee. You are hereby directed to please supply the following medicines and submit three copies of bill.

S.NO	AMT	DESCRIPTION	QTY	RATE	AMOUNT
1	1.00	Chl. Acid (Bottle of 1000 tabs)	50000	0.06	5000.00
2	1.00	Diltiazem (Bottle of 100 tabs)	5000	1.70	8500.00
3	1.00	Phenamine (Bottle Blister Pack)	100000	0.06	6000.00
4	1.00	Salsolam	5000	9.50	47500.00
5	1.00	Aspirin (Bottle Other Compound Bottle of 20 tabs)	5000	10.00	50000.00
6	1.00	Mefenamic Acid (Bottle)	6000	4.50	27000.00
7	1.00	Gentacin (Bottle of drops)	5000	7.85	39250.00
8	1.00	H. Benzoin (Bottle)	125	110.00	13750.00
GRANT TOTAL					220000.00

19
46
52
56
70
78
151

Period of delivery: 30 days
 Place of delivery: Store at HANCOCK, MYSURU
 Dispatch instruction: Free delivery to consignee
 Name and address of consignee: IED, HANCOCK, MYSURU

EXECUTIVE DISTRICT OFFICER (HEALTH)
 DISTRICT MATERNAL & CHILD HEALTH OFFICE



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

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SUBJECT: REPORT PURCHASES

The Inspector has submitted the following information
found according to specified provisions.

Sl. No.	Description of Item	Quantity	Rate	Total	Remarks
1	Tobacco	100	1000	100000	

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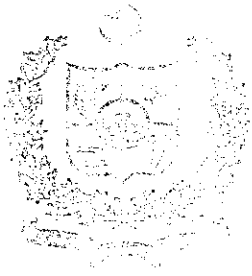
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GOVERNMENT OF MADHYA PRADESH
MINISTER FOR REVENUE DEPARTMENT

GOVERNMENT OF MADHYA PRADESH
MINISTER FOR REVENUE DEPARTMENT
LAKHIMPUR, DISTRICT OF UNNAO

UNNAO DISTRICT

The Revenue Department has reported the following details of land found according to the following order.

No.	Description of land	Area	Revenue	Remarks
1

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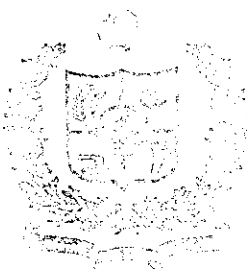
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STATE OF KARNATAKA
DEPARTMENT OF DISTRICT ADMINISTRATION

STATE OF KARNATAKA
DEPARTMENT OF DISTRICT ADMINISTRATION
BANGALORE
Date: 27/08/2024

MEMORANDUM

The following information is furnished for the purpose of recording in the file of order.

S.No.	Description of Item	Note	Particulars	Date of Issue	Date of Expiry	Quantity Issued	Remarks
1

DISTRICT OFFICER
ADMINISTRATIVE ACCOUNTS
MEMBER

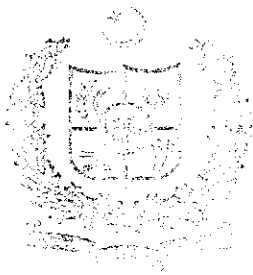
MEMBER

MEMBER

MEMBER

DEPUTY DISTRICT CLERK
(NON) DISTRICT HEADQUARTERS
MEMBER

MEMBER



OFFICE OF THE
EXECUTIVE DIRECTOR OF FOOD

INDIA
MADHYA PRADESH
BHOJPAUR DISTRICT
BHOJPAUR

INSPECTION REPORT WHEAT SEEDS

The inspection carried out as requested the following results were found according to the following details:

Sr.	Description of Area	Area	Quantity	Quality	Remarks
1	Tr. Disin	10000	400	100%	100%

INSPECTOR GENERAL
AGRI. & FISH. DEPT.
BHOJPAUR

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OFFICE OF THE
EXECUTIVE SECRETARY OF P.W. DEPT.

Government of Punjab
Punjab
Lahore


DISTRICT GOVERNMENT HEALTH DEPT.
District Government Health Dept.
District Government Health Dept.

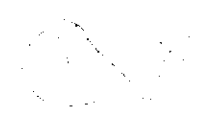
INSPECTION REPORT - WATER SUPPLY

The Inspector has inspected the following water supply
found according to specifications.


S.No.	Description of Item	Quantity	Rate	Amount	Date of Supply	Inspector's Signature
1	Trichloride 0.15mg	1000	1000	1000	1/1/19	


DISTRICT OFFICER
ADMIN. ACCOUNTS
MEMBER


MEDICAL OFFICER
HEALTH DEPT.
MEMBER


EM-NAZIR UDDIN KHAN
(CHAIRMAN HEALTH
ZILA COUNCIL) EMPTV
MEMBER


DISTRICT ENGINEER
P.W. DEPT.
MEMBER


DEPUTY DISTRICT OFFICER
(P.W. DEPT.)
MEMBER


HEALTH INSPECTOR
HEALTH DEPT.
MEMBER




MINISTRY OF HEALTH AND FAMILY WELFARE
GOVERNMENT OF INDIA

OFFICE OF THE GOVERNMENT ACCOUNTANT
MINISTRY OF HEALTH AND FAMILY WELFARE
New Delhi, India. Phone: 2760001, 2760002


INSPECTION OF ANTI-BIOTIC VIALS IN MEDICAL STORES


The undersigned has inspected the following stores and found the following details:

Sr.	Description of Item	Make	Date of Receipt	Date of Expiry	Batch No.	Quantity
1	Tab. Vial C	...	...	...	...	...

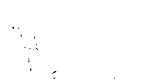

DISTRICT OFFICER
ADMINISTRATIVE SERVICES
MUMBAI



DISTRICT OFFICER
MUMBAI


DISTRICT OFFICER
MUMBAI



DISTRICT OFFICER
MUMBAI

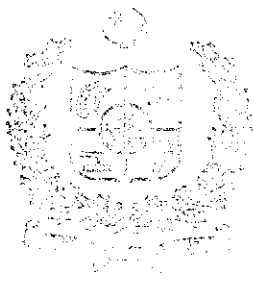

DISTRICT OFFICER
MUMBAI


DISTRICT OFFICER
MUMBAI


DISTRICT OFFICER
MUMBAI


DISTRICT OFFICER
MUMBAI


DISTRICT OFFICER
MUMBAI




OFFICE OF THE
COMMISSIONER DISTRICT COCHIN

STATEMENT OF THE
REVENUE OFFICER, DISTRICT COCHIN
IN REGARD TO THE


INVESTIGATION INTO THE ACCOUNTS OF THE


The Special Committee has inspected the accounts of the
Board according to the following details:


Sl. No.	Description	Amount	Date	Particulars	Remarks
1	To Salary	10000	1950	...	...
2	By Salary	10000	1950	...	...



DISTRICT COUNCIL
ADMINISTRATIVE
MEMBER


DISTRICT COUNCIL
MEMBER


MEDICAL OFFICER
R. N. O. P. DISTRICT
MEMBER


EMANUEL UGIAN
(CHAIRMAN ZILA COUNCIL) MEMBER

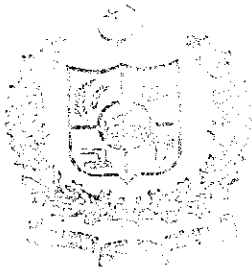

DISTRICT COUNCIL
MEMBER


MEDICAL OFFICER
R. N. O. P. DISTRICT
MEMBER


DISTRICT COUNCIL
MEMBER


DISTRICT COUNCIL
MEMBER


MEDICAL OFFICER
R. N. O. P. DISTRICT
MEMBER



OFFICE OF THE
DISTRICT COLLECTOR, MANGALURU

DISTRICT GOVERNMENT, MANGALURU
The District Collector's Office Mangaluru, Dist. Mangaluru, Karnataka
Ph: 2500006 Fax: 2500006

INSTRUCTION BOOK FOR THE MANGALURU DISTRICT

The following is the list of the items to be included in the
Inventory of the District.

S.No.	Description of Item	Unit	Quantity	Rate	Total	Remarks
1	Polys Eye Chart	1000	50	05.00	05.00	

DISTRICT OFFICER,
ADMIN & PROCEEDS
MANGALURU

1000
50
05.00

DISTRICT COLLECTOR,
MANGALURU

EMILY J. J. MATHIAS
(CHIEF) HEALTH
ZILA COLLECTOR'S OFFICE
MANGALURU

1000

DISTRICT GOVERNMENT
MANGALURU

DEPUTY DISTRICT
(CH) DISTRICT
MANGALURU

1000

DISTRICT GOVERNMENT
MANGALURU



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

GOVERNMENT OF WEST BENGAL
DEPARTMENT OF HEALTH AND FAMILY WELFARE
MEDICAL SUPERVISION
MEDICAL OFFICER (M.S.)

INSTRUCTION NO. 118/1971 (M.S.)

The selection committee has reported the following names and found according to the following criteria:

No.	Description of Post	Name	Qualification	Age	Grade	Remarks
1	Medical Officer (M.S.)	[Name]	[Qualification]	[Age]	[Grade]	[Remarks]
2	Medical Officer (M.S.)	[Name]	[Qualification]	[Age]	[Grade]	[Remarks]

DISTRICT OFFICE
MEDICAL SUPERVISION
MEDICAL OFFICER (M.S.)

UNIT 1
MEDICAL SUPERVISION
MEDICAL OFFICER (M.S.)

[Signature]
MEDICAL SUPERVISION
MEDICAL OFFICER (M.S.)

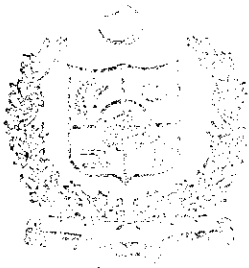
EMENDMENT NO. 1
(CHANDIAN HEALTH COMMITTEE
ZILA COUNCIL) MEMBER

[Signature]
R. K. GHOSH
MEMBER

[Signature]
MEDICAL SUPERVISION
MEDICAL OFFICER (M.S.)

[Signature]
MEDICAL SUPERVISION
MEDICAL OFFICER (M.S.)

[Signature]
MEDICAL SUPERVISION
MEDICAL OFFICER (M.S.)



OFFICE OF THE
 DISTRICT COLLECTOR, DUDURU

DISTRICT GOVERNMENT

Duduru, Karnataka

LIST OF WORKS RECORDED IN THE OFFICE

The following works are recorded in the office as per the list found recording in specification of order.

S.No	Description	Year	Order	Date of Mtg	Date Recd	Date of Approval	Remarks
1	1st Floor 1st	1971	1000	10/11/71	10/11/71	11	

DISTRICT OFFICE
 ADMIN. BRANCH
 OFFICER

HEALTH
 OFFICER

DISTRICT OFFICE
 HEALTH BRANCH
 MEMBER

EXAMINING OFFICER
 (HEALTH BRANCH)
 OFFICER

HEALTH
 OFFICER

DISTRICT OFFICE
 HEALTH BRANCH
 MEMBER

DISTRICT OFFICE
 (HEALTH BRANCH)
 OFFICER

DISTRICT OFFICE
 (HEALTH BRANCH)



GOVERNMENT OF MADHYA PRADESH
DISTRICT ADMINISTRATION

DISTRICT ADMINISTRATION
Bhopal
No. 27600/14
27/10/2014

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspector has submitted the following information found according to the inspection of medicines.

S.No.	Description of Item	Make	Quantity	Value	Remarks
1	Dilysone Solution	...	...	...	...

DISTRICT OFFICER
ADMIN & ACCOUNTS
MEMBER

EMANET DO BASTI
(CHAIRMAN HEALTH
& LA COUNCIL)
MEMBER

DEPUTY DISTRICT OFFICER
(M&A) DISTRICT ADMINISTRATION
MEMBER

DISTRICT OFFICER
MEDICAL
MEMBER

DISTRICT OFFICER
M&A
MEMBER

DISTRICT OFFICER
M&A
MEMBER




OFFICE OF THE
EXECUTIVE DISTRICT COMMISSIONER

GOVERNMENT OF KARNATAKA
BANGALORE


INSPECTION OF GOVERNMENT


The collection committee has inspected the following land and found recording specifications as follows:


Sl. No.	Description	Area	Remarks
1	Melyar...	...	...



DISTRICT DEPT.
ADDITIONAL
MEMBER


...


...


MEMBER
(CHAIRMAN)
MILITARY COUNCIL
MEMBER


...


...


DEPUTY DISTRICT OFFICER
(MILITARY)
MEMBER


...



OFFICE OF THE
DISTRICT COLLECTOR

DISTRICT: CHANNarayana
Taluk: Channarayana
Post: Channarayana

INSTRUCTION FOR THE REVENUE OFFICERS

For the purpose of the above mentioned, the following instructions are issued for the guidance of the Revenue Officers.

S.No	Description	Rate	Area	Date of	Order	Value
1	Cap. Tax	150	100	09-2011	01-2011	15000

DISTRICT COLLECTOR
CHANNARAYANA
MEMBER

CHIEF
OFFICER
MEMBER

DEPUTY
COMMISSIONER
MEMBER

MEMBER

MEMBER

MEMBER



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT MALAYA

INVESTIGATION REPORT ON...

The report is enclosed for inspection of the... found according to specification of...

S.N.	Description	Model	Quantity	Date of	...
1	Inj. Tuberc...	Z...A	150	08-2011	...

DISTRICT OFFICER
ADMINISTRATIVE
OFFICER

HEALTH
& PLANNING

MEDICAL
TALKING
MEMBER

EN...
CHAIRMAN
ZILA COUNCIL
MEMBER

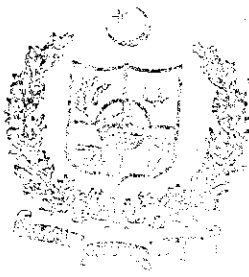
...

...

DEPUTY DISTRICT
(RCH) DISTRICT
MEMBER

...

...



OFFICE OF THE
DEPUTY DISTRICT OFFICER

INSTRUCTION NO. 188

INSTRUCTION NO. 188

The inspection committee has reported the following Part (B) items found according to the order of the District Officer.

S.No.	Description of Item	Location	Date of Inspection	Inspector	Remarks
1	Deficiency of Sanitation	At the village of [illegible]	02-2014	[illegible]	[illegible]

[Signature]
DISTRICT OFFICER (HEALTH
ADMIN & ACCOUNTS) &
MEMBER

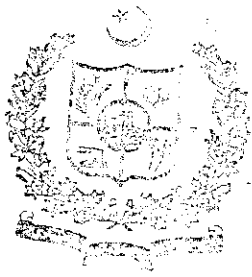
[Signature]
MEMBER

[Signature]
M. NAZIM MOHAMMAD
(CHAIRMAN HEALTH COMMITTEE
OF A COUNCIL) MATTA
MEMBER

[Signature]
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(PH) DISTRICT MATTA
MEMBER

[Signature]
MEMBER



DEPARTMENT OF HEALTH
EXECUTIVE DISTRICT MATIARI


DISTRICT GOVERNMENT MATIARI
District Office, Matiar Road, Matiar
Dist. Matiar, F.W.P. 754000


INSPECTION REPORT


The inspection committee inspected the following items found according to the list of orders.


S.#:	Description of It.	Make	Batch #	Exp. of	Date of	Quantity	Remarks
				Use	Supply	Supplied	
1	500D. Water 2000	Mediate	455181	20-02-00	20-02-00	1000	


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS &
MEMBER


MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATIARI
MEMBER


EX-NAZIM UC MATIARI
(CHAIRMAN HEALTH CC)
ZILA COUNCIL MATIARI
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
HEALTH MATIARI



OFFICE OF THE
DEPUTY DISTRICT MAGISTRAR

DISTRICT GOVERNMENT

Howrah, West Bengal

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The quantity administered during the period of inspection found according to specification of order is

S.No.	Description	Quantity	Rate	Total	Date of Issue	Date of Receipt	Quantity
1	Syp. M. Acron	10	500	5000	02-20-11	02-20-14	5000

DISTRICT OFFICE
ADMIN. & ACCOUNTS
MEMBER

HEALTH
& PLANNING

MEDICAL OFFICER
R. A. G. B. D. Y. 101
MEMBER

EX-NAZIM UC MAT
(CHAIRMAN HEALTH
ZILA COUNCIL) III
MEMBER

COMMITTEE

MEDICAL OFFICER
R. A. G. B. D. Y. 101
MEMBER

DEPUTY DISTRICT
(RCH) DISTRICT M.
MEMBER

HEALTH

MEDICAL OFFICER
R. A. G. B. D. Y. 101
MEMBER



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER


DISTRICT GOVERNMENT HEALTH

Health and Family Welfare Department


INSPECTION REPORT ON THE
SANITATION OF THE

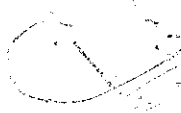
The joint committee has inspected the following places and
found according to specification of order.

S. No.	Description	Major	Minor	Remarks	Date of	Grade
1	Tab. Person	Series	Source	M.P.S.	1950	CLASS


DISTRICT OFFICER
ADMIN. & ACCOUNTS
MEMBER


HEALTH
OFFICER


MEDICAL OFFICER
TALUKA HEALTH OFFICER
MEMBER



EX-NAT. UO. NAT.
(CHAIRMAN HEALTH
SILA COUNCIL) MEMBER

HEALTH
OFFICER


MEDICAL OFFICER
TALUKA HEALTH OFFICER
MEMBER


DEPUTY DISTRICT
(TCH) DISTRICT HEALTH
MEMBER

HEALTH
OFFICER


MEDICAL OFFICER
TALUKA HEALTH OFFICER
MEMBER



OFFICE OF THE
DISTRICT MEDICAL OFFICER

DISTRICT GOVERNMENT MATFHE

Health and Family Welfare Department

INSPECTION REPORT ON SUPPLY OF MEDICINE

This report is submitted to the District Medical Officer, Bangalore, for the purpose of the supply of medicine.

S.No.	Description of Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity	Remarks
1	Tel. Meas.	KODAK	1006	09-2-1963	09-2-1963	1000	

DISTRICT OFFICER HEALTH
ADMIN & ACCOUNTS
MEMBER

MEDICAL OFFICER
TALUKA HOSPITAL
MEMBER

EMERGENCY
MEMBER

MEMBER

DEPUTY DISTRICT OFFICER
(RCH) DISTRICT
MEMBER

MEMBER




OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

GOVERNMENT OF PUNJAB
District of Faisalabad
District Office, Faisalabad


INSPECTION STATE SUPPLY OF MEDICINE.

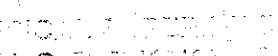
Inspection committee has inspected the stock of the medicine and found according to specification of order.


S.#	Description	Brand	Quantity	Batch No.	Exp. Date	Price	Remarks
1	Cap Doxycycline	Shargal	100000	05-2011	05-2011	10000	


DISTRICT OFFICER
ADMIN & ACCOUNTS
MEMBER

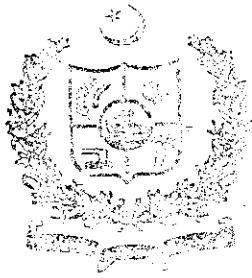

DISTRICT OFFICER
MEMBER


EX-WAZIR UCH
(CHAIRMAN HEALTH
ZILA COUNCIL)
MEMBER


MEMBER
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT
MEMBER


MEMBER
MEMBER



STATE OF KARNATAKA
DISTRICT GOVERNMENT, MATAPI

Health & Family Welfare Officer, Matapi
Phone: 2760000 Fax: 2760000

INSPECTION REPORT

The member committee has inspected the ... and found according to specification of order.

S.#	Description	Year	Make	Date	Date of	Date of	Quantity	Remarks
				
1

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

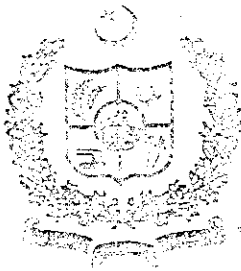
[Signature]
MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATAPI
MEMBER

[Signature]
EX-MAZIN (COMMITTEE)
ZILA COORDINATOR
MEMBER

[Signature]
...

[Signature]
DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATAPI
MEMBER

[Signature]
EXECUTIVE OFFICER
...



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT HOSPITAL

Health of the people is our first concern. Date: 25/09/13 Page: 01/01

INSPECTION REPORT ON COMPLIANCE OF AMR-GINE

The inspection report on the compliance of AMR-GINE was found according to the specification of order.

S.#	Descriptive	Unit	Name	Batch No.	Date of Mfg.	Date of Expiry	Quantity
1	Tel-Der	100	PNK Pharma	021	08-2010	09-2013	40000

DISTRICT OFFICER
ADMIN & ACCOUNTS
MEMBER

HEALTH
PLANNING

MEDICAL SUPERVISOR
TALUKA HOSPITAL
MEMBER

EX-WAZIR HO
(CHAIRMAN)
ZILA COUNCIL
MEMBER

MEMBER

MEMBER

DEPUTY DISTRICT
(RCH) DISTRICT
MEMBER

OFFICER
TEAM

EXECUTIVE DISTRICT OFFICER
(HEALTH)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT, LAHORE

INSPECTION OF PUBLIC SUPPLY OF MEDICINE.

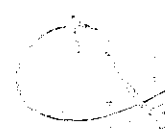
The inspection committee has inspected the following brands and found according to specification of order.

S.No.	Description	Lot No.	Batch No.	Expiry Date	Price	Date of Issue	Quantity
1	Betamethasone Cream		C 2 D Pibemid	04/53111	13-09-11	03-2011	2000

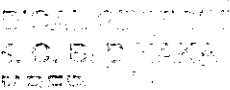

DISTRICT OFFICER
ADMIN & ACCOUNTS
MEMBER


HEALTH
PLANNING


MEDICAL OFFICER
MEMBER


EX-NAZIM UO MA
(CHAIRMAN HEALTH
ZILA COUNCIL) MEMBER

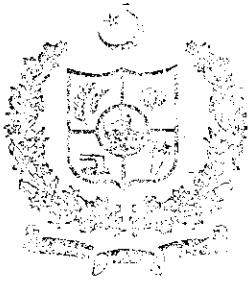
COMMITTEE


MEDICAL OFFICER
R. K. G. D. NAKA
MEMBER


DEPUTY DISTRICT
(FCM) DISTRICT
MEMBER

WAGER


MEDICAL OFFICER
MEMBER



EXECUTIVE DISTRICT OFFICE

DISTRICT GOVERNMENT MATHUR

Health and Family Welfare Department, Taluk Office, Taluk

INSPECTION REPORT

The inspection committee has inspected the following and found according to specification of the

S. No.	Description	Item	Name	Address	Date of	Date of	Quantity
					Mfg.	Expiry	Required
1	Tab. Met	500			2020/11	2022/11	

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS
MEMBER

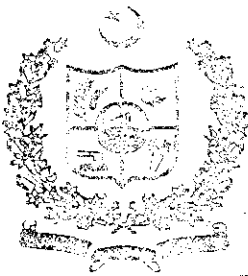
MEDICAL SUPERINTENDENT
TALUK HOSPITAL
MEMBER

EXAMINING OFFICER
(CHAIRMAN HEALTH COMMITTEE
EILA COUNCIL)
MEMBER

MEMBER

DEPUTY DISTRICT OFFICER
(FCM) DISTRICT
MEMBER

EXECUTIVE DISTRICT OFFICER
(HEALTH)



DISTRICT GOVERNMENT TALUKA
 District Health Officer, Faisalabad Phone: 3766006 District: 3760002


INSPECTION REPORT ON THE QUALITY OF ENGINE


The inspection committee has inspected the following and found according to specification of order.

S.No.	Description Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity Supplied	Quantity
1	100cc	MacPaine	431-3	01-2011	03-2011	3000	


 DISTRICT OFFICER
 ADMIN & ACCOUNTS
 MEMBER


EMILY
 MEMBER


 MEDICAL SUPERINTENDENT
 TALUKA HOSPITAL
 MEMBER

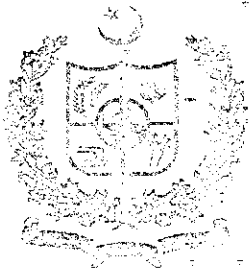

 EX-NAZIM UC MAY
 (CHAIRMAN NEALY
 ZILA COUNCIL) MEMBER

MEMBER

MEMBER


 DEPUTY DISTRICT OFFICER
 (RCH) DISTRICT HEALTH
 MEMBER

EXECUTIVE DISTRICT OFFICER
 (HEALTH) TALUKA



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT

Head Office: Lahore Cantt. Phone: 3733333-3733334

INSPECTION REPORT ON SUPPLY OF MEDICINE.

The inspection committee has inspected the following hospitals and found accurate supply of medicine.

S.#:	Description of Item	Quantity	Rate	Date of Issue	Date of Receipt	Quantity
1	Inj Syntocinon	Needles	0198	09-2011	02-2012	0222

DISTRICT OFFICER
ADMIN & ACCOUNTS
MEMBER

MEMBER

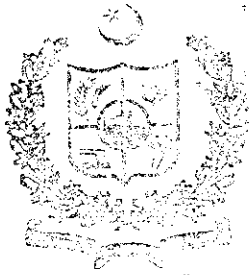
EX-LAZIM UC
(CHAIRMAN HEALTH
ZILA COUNCIL)
MEMBER

MEMBER

MEDICAL SUPERVISOR
R. S. S. BHAKAR
MEMBER

DEPUTY DISTRICT OFFICER
(S.O.) DISTRICT OFFICE
MEMBER

MEMBER



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT

INSPECTION REPORT OF SUPPLY IN PHARMACY

The inspection committee has inspected the following item(s) and found according to specification of order.

S.#.	Description of Item	Category	Order No.	Date of Issue	Expiry Date	Quantity
1	Syn Pharmacology	Pharmaceuticals	0087	08-2011	07-2012	0000

DISTRICT OFFICER
ADMIN. & ACCOUNTS
MEMBER

HEALTH
DEVELOPMENT
MEMBER

MEDICAL SUPERVISOR
TALUKA HOSPITAL
MEMBER

EX-MEMBER U.C.M.
(CHAIRMAN NE
ZILA COUNCIL)
MEMBER

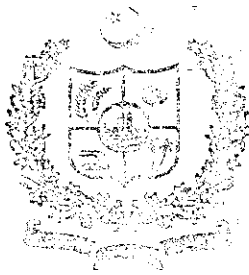
U.C.M.
COMMITTEE
MEMBER

MEMBER OF THE
R.A.O. BOARD
MEMBER

DEPUTY DISTRICT
(RCH) DISTRICT
MEMBER

OFFICER
HEALTH

MEMBER OF THE
(HEALTH)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER


DISTRICT GOVERNMENT HANARI


Email: eddo@karnataka.gov.in Phone: 08342222222


INSPECTION REPORT ON SUPPLY OF MEDICINE

The inspection committee has inspected the supply of medicine and found according to specification of order.


S.No	Description	Quantity	Unit	Batch No	Date of Mfg	Date of Expiry	Quantity Available	Remarks
1	Syp Cefixime Expectorant	2000	Tablet	AT774	05-2011	04-2013	2000	



DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER


MEDICAL SUPERINTENDENT
TALUKA HOSPITAL HANARI
MEMBER


EX-NAZIM HANARI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL)
MEMBER


MEDICAL OFFICER
TALUKA HOSPITAL HANARI
MEMBER


DEPUTY DISTRICT OFFICER
(ROI) DISTRICT HANARI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) HANARI



OFFICE OF THE
ENGINEER DISTRICT TALIARI

DISTRICT GOVERNMENT TALIAZI

Telephone: 2711000 Fax: 2710001 E-mail: 2711000

INSPECTION REPORT SUPPLY OF MEDICINE

Inspection carried out by members of the Taliazi Health Committee
found according to specification of tender.

S.No.	Description of Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Tab Of ...	...	...	01-2011	01-2013	10000	

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

[Signature]
MEDICAL SUPERINTENDENT OF
TALIAZI HOSPITAL TALIAZI
MEMBER

[Signature]
EN-NAZIM NOOR
CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL TALIAZI
MEMBER

[Signature]
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(FOR DISTRICT TALIAZI)
MEMBER

[Signature]
EXECUTIVE DISTRICT OFFICER
(HEALTH TALIAZI)



OFFICE OF THE
HINDOOBIA DISTRICT OFFICER


DISTRICT GOVERNMENT MATIARI


Phone: 0814-2512500 Fax: 2512501 Email: 2512502


INSPECTION REPORT OF SUPPLY OF MEDICINE

The inspection conducted was inspected the following details and found according to specification of order.


S.#:	Description of Item	Make	Batch #	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Tab Ciprol 500mg	Pharmaceutics	174726	01-2011	01-2013	10000	



DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

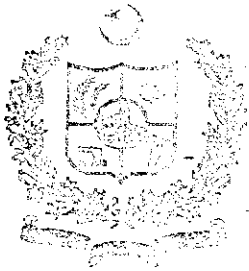

MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATIARI
MEMBER


EX-MAIN MC
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL)
MEMBER


MEDICAL SUPERINTENDENT
P. H. C. D. MATIARI
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT


Distt. Office, Ferozpur


INSPECTION REPORT OF SUPPLY OF MEDICINE.


The District Committee has inspected the following list (A) and found according to specification of order.


S.#	Description	Unit	Make	Quantity	Date of Issue	Date of Receipt	Quantity	Remarks
1	Tab Dufen	100	GEN. CO. S.7	100	10-1-44	10-2-44	10000	


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS
MEMBER

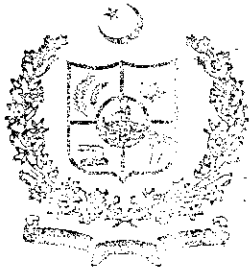

MEDICAL SUPERINTENDENT
TALUKA HOSPITAL, TALUKA
MEMBER


EK-NAZIM UC MAJIDI
(CHAIRMAN HEALTH
ZILA COUNCIL) MEMBER


MEDICAL SUPERINTENDENT
R. H. C. B. D. KAKA
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT OFFICER
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MEMBER



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

RAJOURI DISTRICT


DISTRICT GOVERNMENT RAJOURI


Health and Family Welfare Deptt. Form 250001 (Rev. 07/2005)


INSPECTION REPORT OF SUPPLY COMMITTEE

The inspection committee has inspected the following item(s) and found according to specification of order.

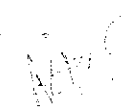
S.No.	Description of Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity Supplied	Signature
1	Syp Sodium Citrate	Tru-Dart	012110	01-01-11	03-01-11	1000	



DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS MEMBER

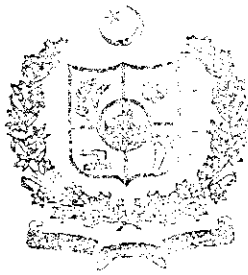

MEDICAL SUPERINTENDENT
TALUKA HOSPITAL RAJOURI
MEMBER


EX-NAZIM UC MATI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MEMBER


MEDICAL OFFICER
R.H.C. D. RAJOURI
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATN
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) RAJOURI



OFFICE OF THE
DISTRICT TENDERS OFFICER

DISTRICT GOVERNMENT MATRAN

www.punjab.gov.pk Phone: 2760000 Fax: 2760001

INSPECTION REPORT

OFFICE OF TENDERS OFFICER

The inspection was conducted on 08-20-11
found according to the specifications of the

S.#	Description	Qty	Make	Batch #	Date of Mfgt	Date of Expiry	Quantity Supplied	Remarks
1	inj Dexta	10	EPIDERM	110001	08-2011	08-2011	100%	

DISTRICT OFFICER
ADMIN & ACCOUNTS
MEMBER

HEALTH
& PLANNING
MEMBER

MEDICAL SUPERVISOR
TALUKA HOSPITAL MATRAN
MEMBER

EX-MAZIM UO K
(CHAIRMAN HE
ZILA COUNCIL)
MEMBER

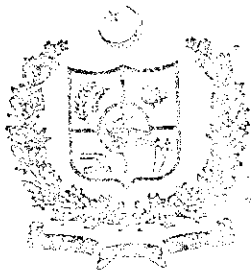
HEALTH
& PLANNING
MEMBER

MEDICAL SUPERVISOR
P.H.C.E. MATRAN
MEMBER

DEPUTY DISTRICT
(RCH) DISTRICT
MEMBER

OFFICER
HEALTH

EXECUTIVE OFFICER
(HEALTH MATRAN)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT HALL
Small and Central Buildings, Feroz Road, Lahore. Phone: 6511000

INSPECTOR GENERAL REPORT OF SUPPLY OF MEDICINE.

Inspector General has inspected the following items and found according to specifications of drugs.

S.No	Description of Item	Make	Expiry Date	Batch No.	Quantity	Remarks
1	Tub Control Tablets	Genos	11/3/11	08-2011	08-2011	31150

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

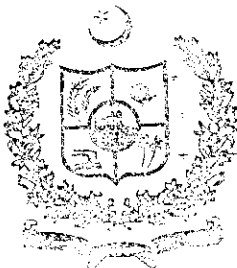
DISTRICT OFFICER (HEALTH)
MEMBER

EX-NAZIM UC
(CHAIRMAN)
ZILA COUNCIL
MEMBER

DISTRICT OFFICER (HEALTH)
MEMBER

DEPUTY DISTRICT OFFICER
(RCH) DISTRICT
MEMBER

DISTRICT OFFICER (HEALTH)
MEMBER



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT MATIARI

Phone: 3462222/3462223 Fax: 3462224 E-mail: 3462225

INSPECTION REPORT REQUIRED VACCINATION

The inspection committee inspected the following facility and found according to specification of order.

S.#	Description of Item	Make	Batch #	Date of Mfg.	Date of Expiry	Quantity	Remarks
1	Sp. Ch. ...	Sony	...	02-00	...	...	...

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACC. DIVS & PLANNING
MEMBER

[Signature]
MEDICAL SUPERINTENDENT
TALUQA HOSPITAL MATIARI
MEMBER

[Signature]
EX-NAZIM MATIARI
(CHAIRMAN) HEALTH COMMITTEE
ZILA COUNCIL MATIARI
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER

[Signature]
EXECUTIVE DISTRICTS OFFICER
HEALTH MATIARI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

GOVERNMENT OF PUNJAB

INSPECTION REPORT ON SUPPLY OF MEDICINE.

The inspection committee has inspected the following form(s) and found according to specification of order.

S.No.	Description	Name of the Firm	Address	Quantity	Value	Date	Signature
1	Tab Aip 0.5	...	...	...	...	...	...

DISTRICT OFFICER
ADMIN & ACCO
MEMBER

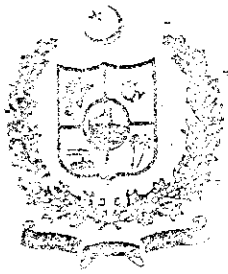
EX-NAZIM UC
(CHAIRMAN H
ZILA COUNCIL)
MEMBER

DEPUTY DISTRICT
(R.O.) DISTRICT
MEMBER

MEMBER
...

MEMBER
...

MEMBER
...



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT, MANGALURU

Mangaluru, Karnataka, India. Pin: 575001

INSPECTION REPORT

The inspection committee has inspected the following items and found accordingly:

S.#:	Description of Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Tab Piracetam	Dr. V's Pharmaceutical	152	08-2011	08-2014	950 Pcs	

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

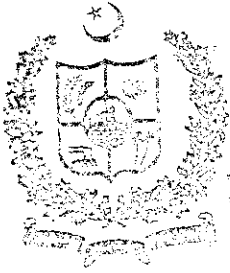
MEMBER
MEDICAL SUPERVISOR
TALUKA HOSPITAL, MANGALURU
MEMBER

EX-NAZIM UCC
(CHAIRMAN)
ZILA COUNCIL
MEMBER

MEMBER
MEDICAL SUPERVISOR
TALUKA HOSPITAL, MANGALURU
MEMBER

DEPUTY DISTRICT OFFICER
(ECH) DISTRICT
MEMBER

EXECUTIVE DISTRICT OFFICER
(HEALTH)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT, LAHORE

INSPECTION REPORT ON QUALITY OF MEDICINE

The inspection committee has inspected the following lot(s) and found according to specification of O.P.S.

S.No	Description of Item	Batch	Quantity	Date of Mfg.	Date of Expiry	Quantity Available
1	ECG PAPER	700		5/11/55	5/15/55	40

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN. & ACCOUNTS
MEMBER

[Signature]
MEDICAL SUPERVISOR
MEMBER

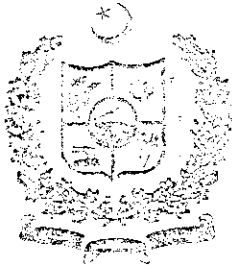
[Signature]
EX-NAZIM U.C. LAHORE
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MEMBER

[Signature]
MEDICAL SUPERVISOR
R.H.C. B. DWAKA
MEMBER

[Signature]
DEPUTY DISTRICT
(RCH) DISTRICT
MEMBER

CHIEF
CLERK

[Signature]
EXECUTIVE DISTRICT OFFICER
LAHORE



OFFICE OF THE
DEPUTY DISTRICT MAGISTRAR


DISTRICT GOVERNMENT MATRAN


House No. 1, Main Road, Ferozpur, Punjab - 143001, Pakistan


INSPECTION REPORT OF SUPPLY OF MEDICINE

The Inspector has inspected the following supply and found according to the following order.


S.#:	Description of Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Inj. Atropine	Sinochem	090000	06-0011	06-2014	800	

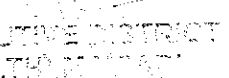

DISTRICT OFFICER HEALTH -
ADMIN & ACCOUNTS & PLANNING
MEMBER

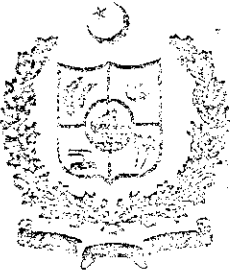

MEDICAL SUPERINTENDENT
TALUQA HOSPITAL MATRAN
MEMBER


EX-NAZIM UC MATRAN
(CHAIRMAN HEADQUARTERS COMMITTEE
ZILA COUNCIL) MATRAN
MEMBER


MEDICAL SUPERINTENDENT
R. H. Q. S. T. MATRAN
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATRAN
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH MATRAN)



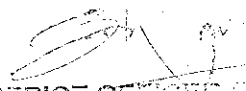
OFFICE OF THE
EXECUTIVE DISTRICT OFFICER


STATE GOVERNMENT

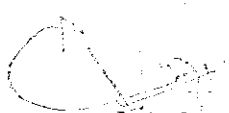
INSPECTION REPORT OF SUPPLY OF MEDICINE.


The Inspection committee has inspected the following item(s) and found according to specification of order.


S.No.	Description of Item	Make	Batch No.	Serial No.	Date of Supply	Quantity supplied
1	D/Syringe Set	STAR	11.02.20	02-2011	02-2016	20000


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS
MEMBER

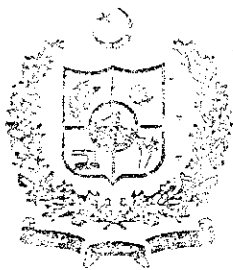

MEDICAL OFFICER
TALUKA/DCS
MEMBER


EX-NAZIM UC MATIA
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATIA
MEMBER


MEDICAL SUPERINTENDENT
P.H. CHAUDHARY
MEMBER


DEPUTY DISTRICT OFFICER
(F&A) DISTRICT MATIA
MEMBER


MEDICAL OFFICER
TALUKA/DCS
MEMBER



OFFICE OF THE
TALUKA DISTRICT OFFICER

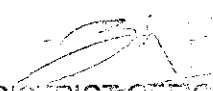
DISTRICT GOVERNMENT
MATHURA


Email: edoh_smt@yahoo.com Fax: 2760036 Phone: 2760033


INSPECTION REPORT GENERAL MEDICINE

The inspection committee has inspected the following medicines found according to specification of the list.

S.#	Description	Form	Trade	Batch #	Date of Mfgt	Date of Expiry	Quantity Supplied	Remarks
1	Orin		SPAR	110205	02-0011	03-00-03	500	

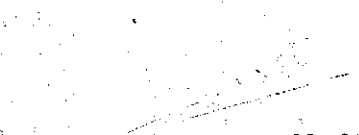

DISTRICT OFFICER HEALTH
ADMIN & ACCOUNTS & PLANNING
MEMBER

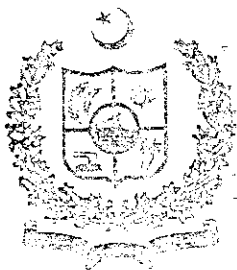

MEMBER
TALUKA HOSPITAL MATURA
MEMBER


EX-NAZIM UC MATURA
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL)
MEMBER


MEMBER
TALUKA HOSPITAL MATURA
MEMBER


DEPUTY DISTRICT OFFICER
(RCO) DISTRICT MATURA
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH MATURA)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

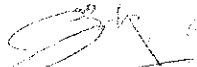
DISTRICT GOVERNMENT, BAFER


District Head Office, Bafra


INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the following item(s) and found according to specification of order.


S.#	Description of Item	Make	Batch No.	Exp. Date	Date of Receipt	Quantity
1	- IV Can	Ningbo	2011015	27/03/2011	24/03/2011	2000


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS
MEMBER

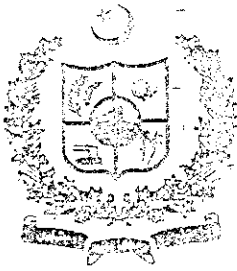

MEDICAL SUPERINTENDENT
TALKHAR HOSPITAL
MEMBER


EX-NAZIM UC MEMBER
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL)
MEMBER


MEDICAL OFFICER
TALKHAR HOSPITAL
MEMBER


DEPUTY DISTRICT OFFICER
(RO) DISTRICT OFFICE
MEMBER


DISTRICT OFFICER
(HEALTH)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT, MANTARA

Email: edoh@peshawar.com

Fax: 07400001

Phone: 07400002

INSPECTION REPORT SUPPLY OF MEDICAL

The inspection conducted has inspected the following items found according to specification of order.

S.#:	Description	Item	Make	Batch #	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	D/Syring	Fee	Master	11.8.05	03-2011	03-2015	10000	

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

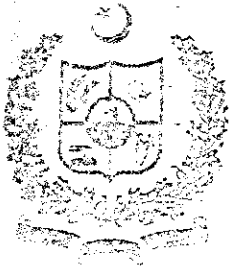
MEDICAL SUPERINTENDING
TALUKA HOSPITAL PATRIANA
MEMBER

EX-NAZIM UO MANTARA
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) PATRIANA
MEMBER

MEDICAL SUPERINTENDING
R.M.C. PATRIANA
MEMBER

DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MANTARA
MEMBER

EXECUTIVE DISTRICT OFFICER
(HEALTH) PATRIANA




OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

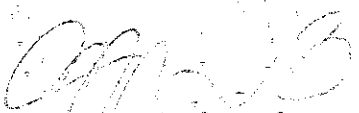
DISTRICT GOVERNMENT PATIALA


INSPECTION REPORT ON SUPPLY OF MEDICINE

The inspection committee has inspected the following item(s) and found according to specification of order.


S.No	Description	Quantity	Make	Batch No.	Date of Issue	Date of Receipt	Quantity Received	Remarks
1	Tobramycin Drops	20	Dr. Bho	3312	12-2010	12-2010	20	


DISTRICT OFFICER HEALTH,
ADMIN & ACCOUNTS & PLANNING
MEMBER


MEDICAL SUPERVISOR
TALUK HOSPITAL PATIALA
MEMBER


EX-NAZIM LICHAH
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) PATIALA
MEMBER


MEDICAL SUPERVISOR
R. G. O. PATIALA
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT PATIALA
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) PATIALA



OFFICE OF THE
EXCISE AND DISTRICT OFFICER

DISTRICT GOVERNMENT PATIALKA
E-mail: dgpatialka@govt.punjab.gov.in Fax: 9762266 Phone: 9762267

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the supply of medicine and found according to specification of order.

S.No.	Description of Item	Make	Rate per unit	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Chlorofluoride Drops	Patel	20/-	12-2010	12-2012	2000	

DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

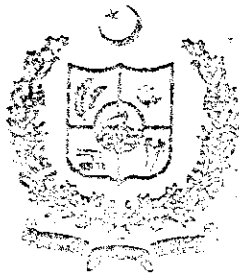
MEDICAL SUPERINTENDENT
TALUKA HOSPITAL, PATIALKA
MEMBER

EX-MEMBER ZILA COUNCIL
(CHAIRMAN HEALTH COMMITTEE)
MEMBER

MEDICAL OFFICER
TALUKA HOSPITAL, PATIALKA
MEMBER

DEPUTY DISTRICT OFFICER
(RCM) DISTRICT
MEMBER

EXECUTIVE DISTRICT OFFICER
(HEALTH) PATIALKA



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT MALAWI


Phone: 011-2262400

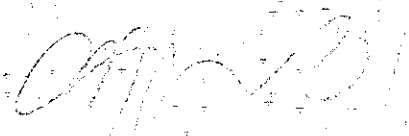
Fax: 011-2262400


INSPECTION REPORT ON SUPPLY OF MEDICINE.


The inspection committee has inspected the following item(s) and found according to specification of order.


S/It	Description	Quantity	Make	Serial No.	Date of Mfg	Date of Expiry	Quantity Supplied	Remarks
1	Inj N/Saline	100cc	B/No	0505	02-2011	02-2015	3000	


DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER


MEDICAL OFFICER IN CHARGE
TALIMA HOSPITAL
MEMBER


EX-MAZIMBO MANKWANDA
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MCHARI
MEMBER


MEDICAL OFFICER IN CHARGE
R.H.C. B.L. MANKA
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT OFFICER
MEMBER


MEDICAL OFFICER IN CHARGE
MEMBER



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER


DISTRICT GOVERNMENT MATANGI

Website: gdoh.mati.gov.my Fax: 276 486 Phone: 276096


INSPECTION REPORT SUPPLY OF MEDICINE

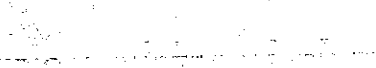
The inspection committee has inspected the following (s/s) and found according to specification of order.

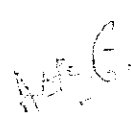
S.#:	Description of Item	Make	Batch #	Date of Mfg:	Date of Expiry:	Quantity Supplied	Remarks
1	Tab Glisamide	Becko	2185	12-2010	12-2015	72500	



DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

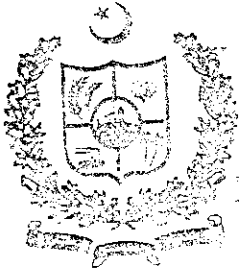

MEDICAL SUPPLY COMMITTEE
TALUK HOSPITAL MATANGI
MEMBER


EN-NAZIM UDDIN
(CHAIRMAN HEALTH COMMITTEE)
ZILA COUNCIL MATANGI
MEMBER


MEDICAL SUPPLY COMMITTEE
TALUK HOSPITAL MATANGI
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATANGI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATANGI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT RAJOURI

INSPECTION REPORT OF SUPPLY OF MEDICINE

The inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description of Item	Make	Batch #	Date of Mfg.	Date of Expiry	Quantity	Remarks
1	Tab Metformin Acid	Pakistan Pharma	13007	10-2010	10-2010	100000	

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

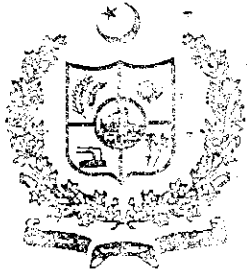
[Signature]
MEMBER
TALUKA HOSPITAL
MEMBER

[Signature]
EX-NAZIM UC M...
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) ...
MEMBER

[Signature]
MEMBER
...
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(RCH) DISTRICT ...
MEMBER

[Signature]
MEMBER
...
MEMBER



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT MALAWI

Dist. Office (Health) (Mwanza) Fax: 01760086 Phone: 2163002

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the following health centres and health centres and health centres

No.	Name of Health Centre	Location	Health Centre	Health Centre	Health Centre	Health Centre
1	Chitima	CCP	1999	1999	1999	1999

DISTRICT OFFICE (HEALTH) ADMIN & ACCOUNTS MEMBER

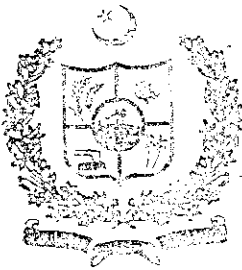
MEDICAL SUPERINTENDENT TALINGA HOSPITAL MEMBER

EX-NAZIM LG MA (CHAIRMAN HEALTH ZILA COUNCIL) MEMBER

MEDICAL SUPERINTENDENT R. H. G. S. D. MEMBER

DEPUTY DISTRICT OFFICER (RCH) DISTRICT MEMBER

EXECUTIVE DISTRICT OFFICER (HEALTH) MALAWI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT HATIAN
District Government Hatian
District Government Hatian

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the following item(s) and found according to specification of order:

S.#:	Description of Item	Make	Batch No.	Date of Issue	Date of Expiry	Quantity	Remarks
1	Inj Ampicillin 500mg	Tayvira	20150403	04-2011	09-2014	6000	

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS PLANNING
MEMBER

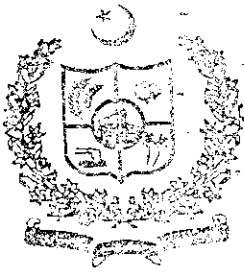
[Signature]
MEDICAL SUPERINTENDENT
TALUKA HOSPITAL HATIAN
MEMBER

[Signature]
EX-RAZIM UO MANAGER
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) HATIAN
MEMBER

[Signature]
MEDICAL SUPERINTENDENT
R.H.C. B. DYAKA
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(RCH) DISTRICT HATIAN
MEMBER

[Signature]
EXECUTIVE DISTRICT OFFICER
(HEALTH) HATIAN



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER
MATTARI

DISTRICT GOVERNMENT - MATTARI

Dist: mat@karnataka.gov Fax: 2760096 Email: 2760096

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the following medicine and found according to specification of order.

S.No	Description of	Make	Batch #	Date of Mfg	Date of expiry	Quantity Supplied	Remarks
1	Inj Gentamycin	Taiyab	20110501	03-2011	03-2015	5010	

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS PLANNING
MEMBER

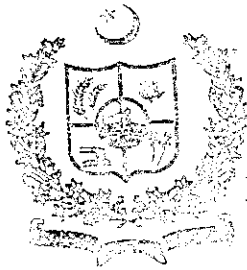
[Signature]
MEDICAL SUPERINTENDING
TALUKA HOSPITAL MATTARI
MEMBER

[Signature]
EN-NAZIM UG MAHMOOD
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATTARI
MEMBER

[Signature]
MEDICAL SUPERINTENDING
R.M.C. B. HOSPITAL
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATTARI
MEMBER

[Signature]
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATTARI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT, WAFAR

Distt. Health Officer, Wafar, Distt. Wafar, Punjab

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order

S.#:	Description of	Make	Batch No.	Date of	Date of	Quantity	Remarks
				Supply	Expiry	Inspected	
1	Inj Gentamycin	Tajvan	20110301	03-2011	03-2015	5000	

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

[Signature]
MEDICAL SUPERINTENDENT
TALUKA HEALTH OFFICER
MEMBER

[Signature]
EX-NAZIM UG MATRUJI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MEMBER

[Signature]
MEDICAL SUPERINTENDENT
R.H.C. B. DWYKA
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(RCH) DISTRICT HEALTH OFFICER
MEMBER

[Signature]
GENERAL SUPERINTENDENT
(HEALTH) DISTRICT OFFICER



GOVERNMENT OF PUNJAB
HEALTH DEPARTMENT

DISTRICT GOVERNMENT MATIARI
District Health Officer, Matiarri, Distt. Matiarri, Punjab
Date: 15/11/2016

INSPECTION REPORT

The inspection of the premises was conducted on 15/11/2016 and was found according to the following details:

S.No.	Description of Item	Quantity	Date of Issue	Defect	Date of Expiry	Remarks
1	Card Clamp	50 Nos				

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

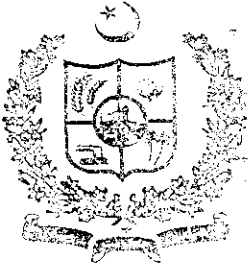
[Signature]
MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATIARI
MEMBER

[Signature]
EX-NAZIM UC MATIARI
(CHAIRMAN HEALTH OF DISTRICT
ZILA COUNCIL) MATIARI
MEMBER

[Signature]
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(RCH), DISTRICT MATIARI
MEMBER

[Signature]
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT, MATIARI

Email: edo@matiaridistrict.gov.in Fax: 2761096 Ph: no: 2760993

INSPECTION REPORT OF SUPPLY OF MEDICINE

The Inspection committee has inspected the following (item/s) and found according to specification of order.

S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Amoxicillin 125mg	C.K.D Mumbai	11002	01-2011	01-2013	0000	

[Signature]
DISTRICT OFFICER (HEALTH)
ADMIN & ACCOUNTS & PLANNING
MEMBER

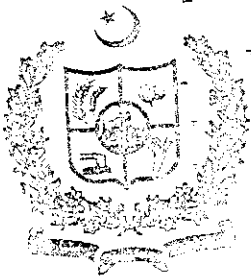
[Signature]
MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATIARI
MEMBER

[Signature]
EX-NAZIM UC MATIARI
(CHAIRMAN HEALTH COMMITTEE
ZILA CCOUNCIL) MATIARI
MEMBER

[Signature]
MEDICAL SUPERINTENDENT
D. H. OFFICE MATIARI
MEMBER

[Signature]
DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER

[Signature]
EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER


DISTRICT GOVERNMENT DISTRICT


Head Office: Government College Phone: 2740006 Fax: 2740007


INSPECTION REPORT OF SUPPLY OF MEDICINE.


The Inspection committee has inspected the following item(s) and found according to specification of order.


S.#:	Description of Item	Make	Batch #	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Cap Oxytetracycline	Taiyar	1109401	04-2011	04-2014	100000	


DISTRICT OFFICER (HEALTH)
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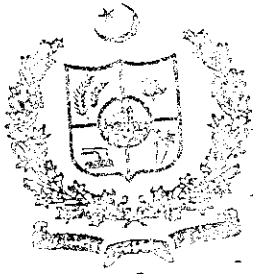

MEDICAL SUPERINTENDENT
TALUKA HOSPITAL
MEMBER


EX-NAZIM UC MAJHI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MEMBER


MEDICAL SUPERINTENDENT
R. H. Q. B. D. H. H.
MEMBER


DEPUTY DISTRICT OFFICER
(RCH) DISTRICT HEALTH
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH)



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER

DISTRICT GOVERNMENT - MATIARI

Small: 04081 04081.com Fax: 2740096 Phone: 2762076

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the following item(s) and found according to specification of order.

S.N:	Description of Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Syp Ampicillin - 125mg	Absorps Drug	D24	04-2011	04-2015	2000	

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ZILA COUNCIL MATIARI
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(RCH) DISTRICT MATIARI
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(HEALTH) MATIARI



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DISTRICT GOVERNMENT MATIARA

Health: 2013/2014/2015/2016/2017/2018/2019/2020/2021/2022/2023

INSPECTION REPORT RESUPPLY OF MEDICINE

The Inspection committee has inspected the following item(s) and found according to specification of order:

S.#:	Description of Item	Make	Batch#:	Date of Mfg:	Date of Expiry	Quantity	Remarks
1	Cap Omeprazol	Pharmaceutics	B-C-607	07-2010	07-2012	1000	

[Signature]
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TALUKA HOSPITAL
MEMBER

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(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATIARA
MEMBER

[Signature]
MEDICAL SUPERINTENDENT
R. H. C. B. D KAKA
MEMBER

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DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARA
MEMBER

[Signature]
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(HEALTH) MATIARA



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DISTRICT GOVERNMENT, MASTARA

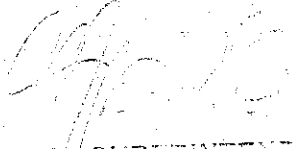
Email: ehd_mast@punjab.gov.pk Fax: 2760896 Phone: 2760885


INSPECTION REPORT OF SUPPLY OF MEDICINE.


The Inspection committee has inspected the following lot (s) and found according to specification of order:


S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Distle Water 5cc	Pharmaceuticals	1107101	03-2011	01-2014	20000	


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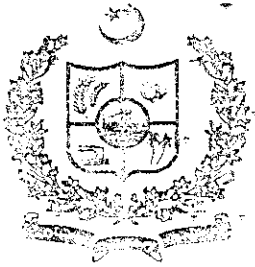

MEDICAL SUPERINTENDENT
TALUK HOSPITAL MASTARA
MEMBER


EX-NAZIM UC MASTARA
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MASTARA
MEMBER


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MEMBER


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(RCH) DISTRICT MASTARA
MEMBER


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DISTRICT GOVERNMENT, MATIARI

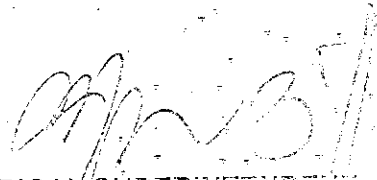
Matari, District Government, Karnataka - 576206. Phone: 2532326


INSPECTION REPORT ON SUPPLY OF MEDICINE.


The Inspection committee has inspected the following item(s) and found according to specification of order.

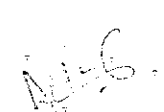
S.N.	Description of Item	Category	Batch No.	Date of Recd.	Date of Expiry	Quantity Supplied	Remarks
1	Inj Diclofenic	Pharmaceuticals	253	01-2013	01-2013	7000	



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ZILA COUNCIL) MATIARI
MEMBER


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R. H. C. B. D KAKA
MEMBER


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(RCH) DISTRICT MATIARI
MEMBER


EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI



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DISTRICT GOVERNMENT MATIARI

Email: edo_matiari@yahoo.com Fax: 2760006 Phone: 2760002

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Tab. Chloroquine	Phexo Lab	733	04-2011	04-2014	5000	

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ZILA COUNCIL) MATIARI
MEMBER

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R. H. C. B. TYAKA
MEMBER

DEPUTY DISTRICT OFFICER
(RCH) DISTRICT MATIARI
MEMBER

EXECUTIVE DISTRICT OFFICER
(HEALTH) MATIARI



INSPECTION REPORT OF SUPPLY OF MEDICINE

The inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description	Item	Make	Batch #	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Syp Cephalosporin	125mg	EM ARM	EM2239	10-2010	10-2013	200	

[Signature]
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 (CHAIRMAN HEALTH COMMITTEE
 ZILA COUNCIL MATIARI)
 MEMBER

[Signature]
 MEMORIAL SUPERINTENDENT
 T.S. Q. MATIARI
 MEMBER

[Signature]
 DEPUTY DISTRICT OFFICER
 (RCH) DISTRICT MATIARI
 MEMBER

[Signature]
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 (HEALTH) MATIARI



EXECUTIVE DISTRICT OFFICER
MATHUR

DISTRICT GOVERNMENT MATUR
Email: eodh_mur@karnataka.gov.in Fax: 08360063333

INSPECTION REPORT OF SUPPLY OF MEDICINE

The inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description of item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Ceftaxone 1G	Pharmaceuticals	61-137	03-2011	03-2016	3000	

[Signature]
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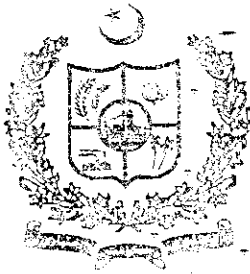
[Signature]
MEDICAL SUPERINTENDENT
TALUKA HOSPITAL
MEMBER

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EX-NAZIM UC MATUR
(CHAIRMAN) HEALTH COMMITTEE
ZILA COUNCIL MATUR
MEMBER

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MEDICAL SUPERINTENDENT
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MEMBER

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(RCH) DISTRICT MATUR
MEMBER

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MATHUR



OFFICE OF THE
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DISTRICT GOVERNMENT MATIARI

Matari, District Matari, Punjab. Phone: 3760986 Fax: 3760987

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order.

S.#	Description of Item	Make	Batch #	Date of Mfg.	Date of Expiry	Quantity	Remarks
1	Inj Cefotaxium 250mg	Pharmaceutics	F-81-175	12-2010	12-2013	4000	

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ZILA COUNCIL) MATARI
MEMBER

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R.H.C.B. DISTRICT
MEMBER

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(RCH) DISTRICT MATARI
MEMBER

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(HEALTH) MATARI



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DISTRICT GOVERNMENT MATIARI


Email: edoh.matari@yahoo.com Fax: 2760006 Phone: 2760002


INSPECTION REPORT OF SUPPLY OF MEDICINE.


The inspection committee has inspected the following item(s) and found according to specification of order.


S.No.	Description of Item	Make	Batch No.	Date of Mfg.	Date of Supply	Quantity Supplied	Remarks
1	Tab Levofloxacin 250mg	Pharmaceutics	FT-635	02-2011	09-2013	10000	



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ZILA COUNCIL MATARI)
MEMBER


MEDICAL SUPERINTENDENT
R.M.C.B.D. KAKA
MEMBER


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MEMBER


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(HEALTH) MATARI



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DISTRICT GOVERNMENT MATIARI

Distt: (doh, matari) punjab.com

Fax: 3748096

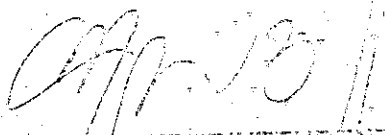
Phone: 3748096


INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order:

S.#:	Description of Item	Make	Batch	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	Cap Cephradine 500mg	Pharmaceutics	10000	01-2011	01-2011	5000	

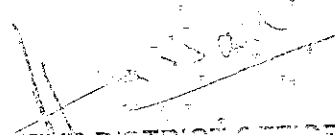

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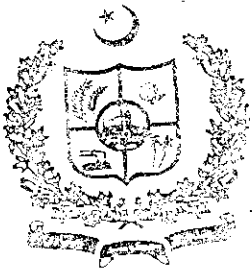

MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATARI
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MEMBER


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(RCH) DISTRICT MATARI
MEMBER


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(HEALTH) MATARI



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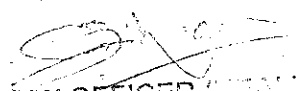
DISTRICT GOVERNMENT MATANG


Email: edof_matang@mah.gov.my Fax: 2760006 Phone: 2760005


INSPECTION REPORT OF SUPPLY OF MEDICINE


The Inspection committee has inspected the following item(s) and found according to specification of order.


S. #:	Description of Item	Make	Batch	Date of Mfg.	Date of Expiry	Quantity Supplied	Remarks
1	X-Ray Film 8x10	IBF Medix	F8480/1	10-2010	12-2012	08Packt	


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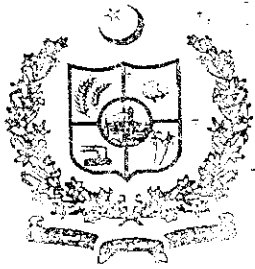

MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATANG
MEMBER


EX-NAZIM UC MATANG
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATANG
MEMBER


MEDICAL SUPERINTENDENT
R. H. C. B. DYAKA
MEMBER


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(RCH) DISTRICT MATANG
MEMBER


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(HEALTH) MATANG



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HEALTH
DISTRICT GOVERNMENT MATIARI

Email: eoh_matiari@gov.punjab.gov.pk Fax: 2760096 Phone: 2760097

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item (s) and found according to specification of order.

S.#:	Description of Item	Make	Batch No.	Date of Mfg.	Date of Expiry	Quantity Supplier	Remarks
1	X-Ray Films 10x12	IBF Medix	112100	10-2010	12-2010	26 Packs	

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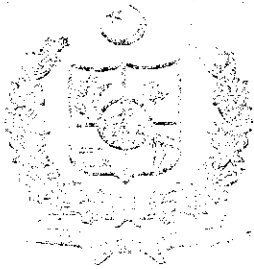
MEDICAL SUPERINTENDENT
TALUKA HOSPITAL MATIARI
MEMBER

EX-NAZIM UC MATIARI
(CHAIRMAN HEALTH COMMITTEE
ZILA COUNCIL) MATIARI
MEMBER

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MEMBER

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OFFICE OF THE
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HEALTH

DISTRICT GOVERNMENT MATIARI

Email: matari@karnataka.gov.in Fax: 2760001 Phone: 2760002

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The Inspection committee has inspected the following item(s) and found according to specification of order:

Sr:	Description of Item	Make	Batch #:	Date of Mfg:	Lot of Expiry	Quantity Supplied	Remarks
1	X-Ray Films 12x15.	IBF Medix	148341	03-2011	12-2013	40Packt	

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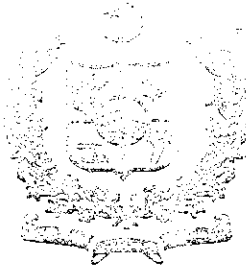
MEDICAL SUPERINTENDENT
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 ZILA COUNCIL) MATIARI
 MEMBER

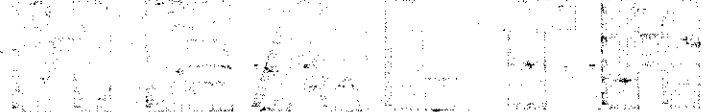
MEDICAL SUPERINTENDENT
 R. H. C. B. TALUKA
 MEMBER

DEPUTY DISTRICT OFFICER
 (RCH) DISTRICT MATIARI
 MEMBER

DEPUTY DISTRICT OFFICER
 (HEALTH) MATIARI



OFFICE OF THE
EXECUTIVE DISTRICT OFFICER



DISTRICT - GOVERNMENT MATIARI

Email: ehd@matari.nabob.com Fax: 2750992 Phone: 2750992

INSPECTION REPORT OF SUPPLY OF MEDICINE.

The inspection committee has inspected the following item(s) and found according to specification of order.

S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Exp.:	Quantity Supplied	Remarks
1	100 Humidifier 70/30	Lilly	840275A	02-2011	01-2013	121 Vials	

DISTRICT OFFICER (HEALTH)
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MEDICAL SUPERINTENDENT
 TALUKA HOSPITAL MATIARI
 MEMBER

CHAIRMAN HEALTH COMMITTEE
 TALUKA HOSPITAL MATIARI
 MEMBER

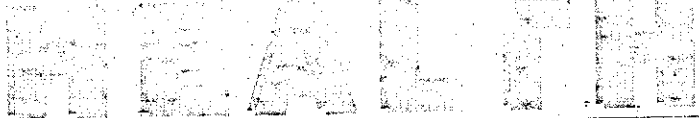
MEDICAL SUPERINTENDENT
 R. H. C. B. KAKA
 MEMBER

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 (RCH) DISTRICT MATIARI
 MEMBER

EXECUTIVE DISTRICT OFFICER
 (HEALTH) MATIARI



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DISTRICT GOVERNMENT MATIARI

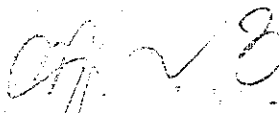
Email: eddo_mari@yahoo.com Fax: 2760092 Phone: 2760092

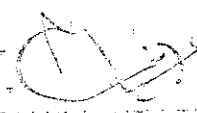
INSPECTION REPORT OF SUPPLY OF MEDICINE.


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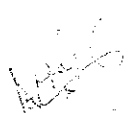
S.#:	Description of Item	Make	Batch #:	Date of Mfg:	Date of Expiry	Quantity Supplied	Remarks
1	Inj Rabio	CDBIO	201012149-5	02-2011	01-2013	120 Ampule	


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