

ANNEXURE – 'A'

1. Name of the firm –
2. Address of the shop\firm-
3. Mobile No. \ Telephone No.
4. Vat \ Sales tax Regn. No.
5. PAN –
6. Bankers detail
 - i) Name of the bank –
 - ii) Name of the branch –
 - iii) Name of the Account –
 - iv) Account NO. –
 - v) Account Type –
 - vi) MICR Code –
 - vii) IFSC Code –

Certified that the rates quoted in the Annexure 'B' are not higher than the rates being charged from other Govt. Departments \ Hospital for supply of the same items.

Signature -

Name of the person –

Designation -