

MEMO NO- 9660/B.M.C- 42/15

Date- 14.08.2015

To
Director of SUDA
Health Wing
Ilgus Bhavan
H-C Block, Sector-III, Bidhannagar
Kolkata- 700091



SUB:- Regarding Fund for strengthening of MH Services for Fy-2012-2013
REF:- SUDA-Health / 527 (p-1) 11/262 dated 30.11.12

Sir,

In pursuance to above reference I am to inform you that the proposed amount of Rs 3,45,440/- for purchase and installation some equipments for Matrisadan Hospital has not been released till date in spite of our prior intimations.

However I am glad to inform you that all the equipments as suggested have already been purchased and installed in good condition through Tender system.

In this circumstances, I am again to request you to release the aforesaid fund immediately.


14/8/15

FINANCE OFFICER
BIDHANNAGAR MUNICIPAL CORPORATION
RAJARHAT FIELD OFFICE

Finance Officer
Bidhannagar Municipal Corporation



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/527(Pt.I)/11/358

Date 19.03.2015

From : Addl. Director &
Financial Advisor, SUDA

To : The Programme Officer
W.B.S.H.F.W. Samiti &
Addl. DIHS (FW)
Dept. of Health & Family Welfare
Swasthya Bhawan, 3rd Floor, Wing - "A"
GN - 29, Sector - V, Salt Lake City
Kolkata - 700 091.

Sub : Utilisation Certificate for the fund released during FY 2012-13 and FY 2014-15 (upto 3rd Quarter) for strengthening of MH services.

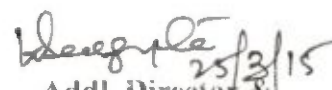
Sir,

Utilisation Certificate for the fund released during FY 2012-13 and FY 2014-15 (upto 3rd Quarter) are enclosed herewith.

Thanking you.

Yours faithfully,

Enclo. : As stated.


Addl. Director &
Financial Advisor, SUDA

SUDA-Health/527(Pt.I)/11/358/1(1)

Dt. .. 19.03.2015

Copy forwarded for kind information to :

Director of Finance, State Financial Management Group,
WBSH & FW Samiti, DIHFW.

Addl. Director &
Financial Advisor, SUDA

Utilisation Certificate

(Form No. S.R. 330 A)

Sl. No.	Letter No. & Date	Amount (in Rs.)
1.	Ch no. 012382 dt. 31.08.2012 on UBI, Salt Lake branch	47,98,776/-
	Total	47,98,776/-

Certified that out of Rs. 47,98,776/- of Grants-in-aid sanctioned during the year 2012-13 in favour of Director, SUDA towards strengthening of Maternity Home services by the Urban Local Bodies under this Ministry / Department letter no. given in the margin and Rs. 10,01,483/- on account of unspent balance of the previous year; thus total available amount of Rs. 58,00,259/-, UC (Part) was submitted for an amount of

Rs. 42,03,040/- vide memo no. SUDA-Health/527(Pt.I)/11/284 dt. 27.01.2014, a sum of Rs. 49,965/- has been utilized so far for the purpose it was sanctioned and the balance of Rs. 15,47,254/- remaining unutilized at the end of the 4th quarter of FY 2013-14.

Certified that I have satisfied myself that the conditions on which the Grant-in-aid was sanctioned has been duly fulfilled / are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

KINDS OF CHECK EXERCISED

1. Books of Accounts
2. Original Bill, Receipts & Vouchers.
3. Bank Statement
4. Physical Progress

Dipankar Chowdhury
DIPANKAR CHOWDHURY
Financial Officer
SUDA - Health

25/3/15
Signature of Addl. Director, &
Financial Advisor, SUDA

To

- The Director SUDA for information and necessary action

Ref . No :- HAU / 181 /RSM Dated 07.01.15

FORM SR -330A

of the Treasury Rules , West Bengal and the Subsidiary Rules made there under , Volume-1

FORM OF UTILISATION CERTIFICATE

Sl.No.	Letter No & Date	Draft Details	Amount
1	(a) SUDA -Health /527(Pt.-III) / 14/ 282 Dated - 24.12.2014	Fund released electronically in the account no.2106010017611 ,UBI	Rs. 2,98,557=00

Certified that amount of Rs. 2,98,557=00 as received as grant -in-aid during the year F. Y 2014-15 in connection with purchase of Equipments & Furnitures towards strengthening of MH services has been fully utilized and there is no un-utilised balance lying in hand.

Certified that I have satisfied myself that the conditions on which the grant -in-aid was sanctioned have been duly / are being fulfilled and that I have exercised the following check to see that the money was actually utilized for which it was sanctioned .

1. UC submitted by ULB
2. Original Bill,Receipt & Vouchers.
3. Physical Progress.


(Executive Officer)
Rajpur-Sonarpur Municipality.

Ref . No :- HAU / 181 (a) /RSM Dated 07.01.15

Copy forwarded to F.O , RSM for information and necessary action.

Executive Officer
Rajpur - Sonarpur Municipality


(Executive Officer)
Rajpur-Sonarpur Municipality.

Executive Officer
Rajpur - Sonarpur Municipality





MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 293/WC/14/2

Date : 28/01/2015

To
The Director SUDA,
Health Wing,
Ilgus Bhavan,
H.C. Block, Sector III
Bidhannagar, Kolkata - 700 011

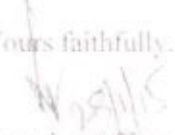
Sub :- Submission Utilisation Certificate

Sir,

I am to send herewith utilization certificate for the grant of Rs.2,48,687 - which was sanctioned vide your letter no. SUDA-Health/527(Pt-I)/11/301(4) dated 03/02/2014.

Encls : as stated

Yours faithfully,


Executive Officer
Maheshtala Municipality



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No.

793/11/14/12

Date : 28/01/2015

Utilisation Certificate

(Form no. S.R. 330 A)

Certified that out of Rs.2,48,687/- of Grant-in-aid sanctioned during the year 2013-14 in favour of Maheshtala Municipality under this Department letter no. given in the margin has been utilized for the purpose it was sanctioned.

Sl.No.	Letter No.	Date	Amount (in Rs.)
1	SUDA-HW-527(Pt-I) 11-301(4)	03/02/2014	2,48,687/-

Certified that I have satisfied myself that the conditions on which the grant-in-aid was sanctioned has been duly fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

KINDS OF CHECK EXERCISED

- 1) Books of Accounts
- 2) Originally Bill, Receipts & Vouchers
- 3) Bank Statement
- 4) Physical Progress

Secretary
28/01/2015
Maheshtala Municipality

Health Officer
28/01/15
Maheshtala Municipality

Executive Officer
28/01/15
Maheshtala Municipality

E-mail

[Signature]

Memo No. SDDM / Health / 170 / 14-15

Phone No- 2551-2357
2743

Office of the Administrator of South Dum Dum Municipality

NAGER BAZAR, KOLKATA - 700 074



To
The Director,
SUDA,
Salt Lake, Kolkata

Date: 05.01.2015

POCH)
[Signature]
27.1.15

Sir

Sub: Utilisation Certificate for Procurement of Equipment, Furniture & Drug.
for Strengthening of M.H.

Enclosed please find herewith Utilisation Certificate towards procurement of Equipment, Furniture & Drug for Strengthening of M.H.

Kindly acknowledge receipt.

Thanking you,

Yours faithfully,

[Signature]
6/1/15

Executive Officer,
Executive Officer
South Dum Dum Municipality

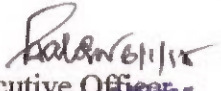
SOUTH DUM DUM MUNICIPALITY

NAGER BAZAR, KOLKATA – 700 074

STATUS ON FUND RECEIVED & SOE SUBMITTED :- (Amount Rs)

FY - 2014-15

	A / C Head				Total
B / F Balance	Nil	Nil	Nil	Nil	Nil
Fund Received	5,55,050/-				5,55,050
Total Available Fund	5,55,050/-				5,55,050/-
SOE Submitted	5,55,050/-				5,55,050/-
Balance in hand	Nil				Nil


 Executive Officer
 Executive Officer
 South Dum Dum Municipality

SOUTH DUM DUM MUNICIPALITY

NAGERBAZAR, KOLKATA – 700 074

Utilisation Certificate (Form No, S. R. 330 A)

Sl. No.	Letter No. & Date	Amount (in Rs.)
1.	SUDA-Health/527(pt-III)/284(10) Date; 24.12.2014	5,55,050/-
	Total -	5,55,050/-

Certified that out of Rs .5,55,050/- of Grants-in-aid sanctioned during the year 2014 - 15 in favour of South Dum Dum Municipality under this Ministry / Department letter no. given in the margin and Rs. Nil of account of unspent balance of the previous year, a sum of Rs.Nil. Has been utilized for the purpose it was sanctioned and the balance of Rs. Nil remaining Unutilized at the end of the A/ C of next quarter of FY . 2014-2015.

Certified that I have satisfied myself that the conditions on which the Grant-in-aid was sanctioned has been duly fulfilled / are being fulfilled and that I have exercised that following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

KINDS OF CHECK EXERCISED

- (1) Books of Accounts.
- (2) Original Bill, Receipts & Vouchers.
- (3) Bank Statements.
- (4) Physical Progress.


Executive Officer.
Executive Officer
South Dum Dum Municipality



FORM SR-330A

of the Treasury Rules, West Bengal and the Subsidiary Rules
made thereunder, Volume- I

FORM OF UTILISATION CERTIFICATE

Sl no.	Sanction Letter no. & Date	Purpose	Amount (Rs)
1.	Letter No. SUDA -Health /527(Pt.-III/14/81(3) Dt.27.06.2014	STRENGTHENING OF MATERNITY HOME - Equipment and Furniture	25794/-
	Total :		25794/-

Certified that out of Rs. **25794/-**Rs. (Twenty five thousand seven hundred ninety four) of grants in aid received during year 2013- 2014 in favour of Name of organization **Dum Dum Municipality** under this Department Letter No. given in the margin and **Rs. Nil** on account of unspent balance of the previous year, a sum of Rs. **25794/-** (Twenty five thousand seven hundred ninety four) has been utilized for the **purpose of STRENGTHENING OF MATERNITY HOME** Equipment and Furniture for which it is sanctioned and the balance of **Rs. NIL**. If remaining unutilized at the end of the year will be adjusted towards the grants -in-aids payable during the next year.

2.Certified that I have satisfied myself that the conditions on which the grants -in-aids was sanctioned have been duly fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned .

Kinds of checks exercised:

1. Vouchers enclosed.
2. Order Copies

Signature with date

Designation:

Stamp of the authorized signatory

F.O.

Dum Dum Municipality

Finance Officer

Dum Dum Municipality

Mr. Sallen Das Sarani

Dum Dum, Kolkata-700028

Phone : 2551 3017/2549 5214 (O)
Fax : (033) 2549 5214

OFFICE OF THE COUNCILLORS
DUM DUM MUNICIPALITY
44, Dr. Sailen Das Sarani, Dum Dum, Kolkata-700 028

Ref. No. : 112/UPHCS-11

Dated ...28/10/2013

To,
The Project Officer (Health),
SUDA,
ILGUS BHAWAN,
Salt Lake,
Kolkata - 91.

Sub: Immediate release of fund of Rs. 25794/ - for Medicine for strengthening of MH Services

Madam,

In pursuance of your office Order No. SUDA-Health/527(Pt.-1)/11/252 Date: 30.11.2012, We are submitting the work order for purchasing of Medicine for strengthening of MH Services for Rs. 25794/ out of sanction amount Rs. 27500/- by maintaining all Govt. Procurement procedures by inviting tender NIT from Government enlisted Vendors, for strengthening the MH services.

Please release the above fund for medicine for MH Services of Rs.25794/.
This is for your kind perusal. Please release the fund as early as possible.

Thanking you .

Yours faithfully,

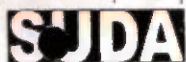
Chairman,
Dum Dum Municipality.

Chairman
Dum Dum Municipality

Enclosed : As above



28.10.13



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING
"ILGUS BHAVAN"

H-C BLOCK, SECTOR - III, BIDHANNAGAR, CALCUTTA - 700 106
West Bengal

Ref. No. : SUDA-Health/527(Pt.-III)/14/81(3)

Date : 27.06.2014

MEMORANDUM

Funds are hereby released electronically in favour of your ULB in connection with purchase of Equipment & Furniture towards strengthening of MH Services as per details below :

Sl. No.	ULB	Your Reference No.	Name of Bank	A/C No.	Amount
1	Champdany	842 dt. 26.03.2014	Bank of India	425120100000051	4,31,653/-
2	Konnagar	PWD/14/SUDA/453 dt. 11.06.2014	Allahabad Bank	20512663898	35,000/-
3	Dum Dum	112/UPHCS-11 dt. 28.10.2013	UCO Bank	07330100013075	25,794/-

You are requested to submit UC as per 330A Form by 15.07.2014 after making necessary payment.

Yours faithfully,

Financial Advisor, SUDA

SUDA-Health/527(Pt.-III)/14/81(3)/1(4)

Dt. .. 27.06.2014

1. Chairman, Champdany / Konnagar / Dum Dum Municipality
2. Finance Officer, SUDA

Financial Advisor, SUDA

329

DUM DUM MUNICIPALITY

To. Dum Dum Municipal Specialised Hospital Pharmacy
4. H. M. Dutta Road, Kol-28, Division

(Particulars of order for suppliers or execution of works)

Please supply the following medicine Articles
at our Hospital Dept at maternity Home. under
Suda (UPHCS. Health Programme) vide Tender Notice. NO
121/6/UPHCS-II Dated: 31/12/12.

		Rate	Total Amount
① Inj. Decadron	= 50 vial	@ 9.25/-	462.50
② Inj. calmpose	= 50 amp.	@ 23.80/-	1190.00
③ Inj. Voveran	= 50 amp.	@ 16.90	845.00
④ Inj. Lycartins	= 50 amp.	@ 43.50	2175.00
⑤ Inj. Syntocinon	= 50 amp.	@ 35.00	1750.00
⑥ Inj. Methergin	= 50 amp.	@ 42.60	2130.00
⑦ Inj. xylocaine 2%	= 50 vial	@ 31.50	1575.00
⑧ Inj. Deriphyline	= 50 amp.	@ 3.61	180.50
⑨ Inj. Phenergan	= 50 amp.	@ 9.32	466.00
⑩ Inj. Tramajae	= 50 amp.	@ 33.40	1670.00
⑪ B.T. Set (Sangobix)	= 50 amp.	@ 140/-	7000.00
⑫ Betadine Lotion	= 10x 500 ml	@ 305.20	3052.00
⑬ Savlon	= 10x 01 Lt	@ 165/-	1650/-
⑭ Dettol	= 10x 01 Lt	@ 74.80/-	748/-
⑮ Lysol	= 02x 5 Lt	@ 450/-	900/-

Chairman

Dum Dum Municipality

N.B.—This order should be attached to the bill together with the Challan signed by Receiving officer


1880 Total cost of medicine Rs = 25794/-

DUM DUM MUNICIPAL SPECIALISED HOSPITAL

(Pharmacy Division)

4, HARI MOHAN DUTTA ROAD, KOLKATA - 700 028

☎(033) 2551-5159 / 4058

 2888 0337 Enquiry
2547-1229 Emergency

DL No. : 8990 SB
8980 S

Challan No. 152

Order No. Memo No. 155 (a) UPHCS II

Date 02/7/14

Date 13/2/13

[illegible]

DUM DUM MUNICIPAL SPECIALISED HOSPITAL
TOTAL (Pharmacy Division)

Professional Managed By:

Signature

usake


D.D.M.S.H. Pharmacy Division

uppes. Twenty five thousand seven hundred sixty four only

115

(Pharmacy Division)

4, HARI MOHAN DUTTA ROAD, KOLKATA - 700 028

 2888 0337 Enquiry
2547-1229 Emergency

DL No. : 8990 SB
8980 S

I No. 115

ite.....02/7/14.....

Order No. Memo NO-15576/UPHCS II

Date.....12/02/13.....

[illegible]

DUM DUM MUNICIPAL SPECIALISED HOSPITAL
(TOTAL Nephrology Division)
Professional Managed By:

Signature *Wahg*

D.D.M.S.H. Pharmacy Division

Malda that Rs. 35,50,000/- of grant-in-aid sanctioned during the year. 2014-15 in favour of Englishbazar Municipality, Malda under the Municipal Services department Govt. order No. _____ given in the margin and Rs. _____ of unspent balance of the previous year a sum of Rs. 35,50,000/- has been utilised for the purpose for which it was sanctioned and that the balance of Rs. _____ remaining unutilised at the end of the year. (vide No. _____ dated _____) and the amount utilised towards the Grant-in-aid payable during the next year.

S.O. No & Date	Amount
1. SUDA-Health/527(Pt-III)/14/1167 dated - 25.08.2014	₹ 35,50,000/-

31.12.2014

Aishwarya Wanjari Kund
signature

Signature _____

English Name: **Murdo Island**
 MAI 04

Office of the Councillors,
Rishra Municipality,
Rishra, Hooghly, West Bengal



Phone : 2672-1373
Fax : 2672-0306
E-mail : rishramunicipality@yahoo.com

Ref. No.1626/IX.....

Dated Rishra the 08.1.15

From :

Shankar Prasad Shaw

Chairman

To :



Financial Advisor, SUDA

&

Ex-Officio Addl. Director, Finance,
ILGUS BHAVAN,,
BIDHANNAGAR,
KOLKATA-700 091.

(Kind Attn: Dr. Shibani Goswami.)

Sub: - Submission of UC – Strengthening of MH Services.

Ref: - Your Memo No. SUDA-Health/527(Pt.III)/14/284(10)

Dt. 24.12.2014.

Sir,

As per your above Memo No. referred above, please find enclosed the Utilization Certificate in form 330A for the amount received for strengthening of MH Services Vide G.O.No. SUDA - Health/527(Pt.I)/11/301(4) Dt. 3.2.2014.

The amount of Rs. 2, 47,747/- has been fully utilized for the purpose it was sanctioned.

This is for your information and necessary action.

With regards,

Enclo: - U.C. in proper format.

Shankar Prasad Shaw
08.01.15

Chairman,

Rishra Municipality.

P.Seal.

g

Office of the Rishra Municipality

P.O. Rishra :: Dist. Hooghly

Phone No. - 2672-1373 / 6794

Form of Utilisation Certificate Prescribed in S.R. 330A of treasury rules,
West Bengal and the subsidiary rules made thereunder,

Volume - 1

Certified that out of Rs. 2,47,747/=
of grants-in-aid sanctioned during the year 2013-2014 favour of Rishra Municipality
under the Municipal Affairs Department Government Order No. given in the margin and
Rs. NIL On account of unspent balance of the previous year a sum of
Rs. 2,47,747/= Has been utilized for the purpose for which it was sanctioned and that
the balance of Rs. NIL Remaining un-utilised at the end of the year has
been surrendered to Government (Vide No. X Date X) and
will be adjust towards the grants-in-aid Payable during the next year.

Sl. No.	G.O. No. & Date	Amount
1.	SUDA - Health / 527(Pt-1) / 11/301(4) dt 03-02-2014	Rs 2,47,747/=

2. Certified that I have satisfied myself that the conditions on which the grants-in-aid was sanctioned have been duly fulfilled / are being fulfilled and I have exercised the following checks to see that the money was actually utilized for the purpose for which was sanctioned.

KIND OF CHECK EXERCISED:

1. Vouchers
2. Payment Register
3. Cash Book
4. Stock Book
5. Asset Register

3. The grants-in-aid was drawn under T.V. No.
dated

Signature Sanku K. Saha
O.S.O. (S)

Designation

g

Chairman
RISHRA MUNICIPALITY

OFFICE OF THE MUNICIPAL COUNCILLOR, KONNAGAR

73, G.T. ROAD, (W) KONNAGAR, HOOGHLY.

SRI BAPPADITYA CHATTERJEE

Chairman

Ref No :

UPHGS/U.C/1456

Dated.....

19.01.2015

Office : 2674—0210/2123
/9598/7376

Ambulance: 2674- 7545

Hospital : 2674 – 7740

To,

The Financial advisor, SUDA &

e.o. Addl. Director, Finance

H – C Block, Sector III Bidhannagar

Kolkata – 700091.

**Sub :- Submission of Utilasation Certificate (U.C) for Strengthening of
Maternity Home (MH).**

Ref. No. :- SUDA – Health/527(Pt – III/14/284(10) dated 24.12.2014.

Sir,

In inviting your above reference, I am submitting of utilization Certificate relating to fund
for utilized under Strengthening of Maternity Home.

This may kindly be acknowledge.

Thanking You.

[Signature]
Chairman

Konnagar Municipality

Konnagar Municipality

strengthening of Maternity Home

Annexure - IV

Utilisation Certificate (Form No. S.R. 330 A)

Sl. No.	Letter No. & Date	Amount (in Rs.)
1.	SVDA-Health/527 (Pt-III)/147/11/12 284(10) Dt. 24.12.2014	35,000.00
	Total	35,000.00

Certified that out of Rs. 35,000.00 of Grants-in-aid sanctioned during the year 2014-2015 in favour of ..Konnagar.. Municipality under this Ministry / Department letter no. given in the margin and Rs.NIL..... on account of unspent balance of the previous year, a sum of

Rs. 35,000.00 has been utilized for the purpose it was sanctioned and the balance of Rs.NIL..... remaining unutilized at the end of the quarter has been carried forward to the A/C of next quarter of FY

Certified that I have satisfied myself that the conditions on which the Grant-in-aid was sanctioned has been duly fulfilled / are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

KINDS OF CHECK EXERCISED

- ✓1. Books of Accounts
- ✓2. Original Bill, Receipts & Vouchers.
- ✓3. Bank Statement
- ✓4. Physical Progress

Signature of Chairperson / Vice-Chairperson

Chairman
KONNAGAR MUNICIPALITY

Sub

FROM SR-330A
Of the Treasury Rules, West Bengal and the Subsidiary Rules made
there under, Volume-I
FORM OF UTILISATION CERTIFICATE

SL.	Letter No. and Date	Amount (Rs. In Laks)
1.	SUD A - Health - /527 (At. III) /14/1679 At - 23.8.2014	12,27,875 = 00
Total		12,27.875 = 00

Certified that out of Rs. Rs. 12,27,875 towards
Grant-in-aid sanctioned during the year 2014-15 towards the grant for *Strengthening of MP*
Rs. 12,27,875 under this letter No. given in the margin and a sum
has been utilized for which it was sanctioned and
the balance of Rs. *Nil* remain un-utilized in the hand at the end of 31.12.2014

Certified that I have satisfied myself that the condition on which the grants-in-aid was
sanctioned have been duly /are being fulfilled and that I have exercised the following check to see
that the money was actually utilized for the purpose for which it was sanctioned.

Kinds of Checks exercised :

- 1.
- 2.
- 3.



Chatter
A. Upadhyay
06/01/15

[Signature]
Chairman
Bhadreswar Municipality
CHAIRMAN
BHADRESWAR MUNICIPALITY



SILIGURI MUNICIPAL CORPORATION

P.O. SILIGURI, DIST. DARJEELING (W.B.), 2432804, 2435444, 2433277, 2433744, 2435282

Memo No 348/SML/UPHCS

Dated 18.03.2015

To
The Director
State Urban Development Authority
Health Wing
"ILGUS Bhavan"
H-C Block, Sector-III, Calcutta-106

SUB : UTILISATION CERTIFICATE

Sir,

I am sending herewith Utilisation Certificate for the grant sanctioned in under Noted G.O. for your kind perusal :-

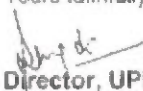
Sl. No	G.O. NO. WITH DATE	FUND	AMOUNT SANCTIONED
1	SUDA-Health/527(Pt-I)/11/301(4) DT. 03.02.2014	STRENGTHENING OF MATERNITY HOME (MH)	Rs. 71,085

(SEVENTY ONE THOUSAND
EIGHTY FIVE) ONLY

Rs. 71,085

Thanking You,

Yours faithfully


Project Director, UPHCS &
Commissioner, Siliguri Municipal Corporation

Enclosed : UTILISATION CERTIFICATE

OFFICE OF THE SILIGURI MUNICIPAL CORPORATION



UTILISATION CERTIFICATE TO BE FURNISHED UNDER S.R. 330 A.


SL. NO.	LETTER NO. & DATED	AMOUNT(RS.)
1	SUDA-Health/527(Pl-I)/11/301(4) DT. 03.02.2014	71,085.00
	TOTAL	71,085.00
	(SEVENTY ONE THOUSAND EIGHTY FIVE) ONLY	

CERTIFIED THAT OUT OF RS. 71085/- (SEVENTY ONE THOUSAND EIGHTY FIVE) ONLY GRANT IN AID SANCTIONED DURING THE YEAR 2013-14 IN FAVOUR OF SILIGURI MUNICIPAL CORPORATION UNDER THIS MINISTRY / DEPTT. LETTER NO. GIVEN IN THE MARGIN & RUPEES: NIL ON ACCOUNT OF UNSPENT BALANCE OF THE PREVIOUS YEAR. A SUM OF RS. 71085/- Rupees (SEVENTY ONE THOUSAND EIGHTY FIVE) ONLY has BEEN UTILISED FOR THE PURPOSE OF STRENGTHENING OF MATERNITY HOME (MH) FOR WHICH IT WAS SANCTIONED AND THAT THE BALANCE OF RS. 0/- REMAINING UNUTILISED AT THE END OF YEAR HAS BEEN SURRENDERED TO GOVERNMENT(VIDE NO. NIL DATED NIL AND WILL BE ADJUSTED TOWARDS THE GRANT IN -AID PAYABLE DURING THE NEXT YEAR NIL

- 2 CERTIFIED THAT I HAVE SATISFIED MYSELF THAT THE CONDITION ON WHICH THE GRANT-IN- AID WAS SANCTIONED HAVE BEEN DULY FULFILLED/ ARE BEING FULFILLED/ARE BEING FULFILLED AND THAT I HAVE EXERCISED THE FOLLOWING CHECKS TO SEE THAT THE MONEY WAS ACTUALLY FOR THE PURPOSE FOR WHICH IT WAS SANCTIONED .

KINDS OF CHECKS EXERCISED

- (I) CASH BOOK
- (II) VOUCHERS
- (III) FUND REGISTER


 PROJECT DIRECTOR, UPHCS &
 COMMISSIONER, SILIGURI MUNICIPAL CORPORATION
 Dated: /03/2015 *P. C. S. S.*

URBAN PRIMARY HEALTH CARE SERVICES

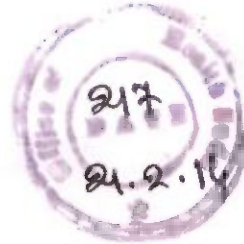
(HAU - II, UNIT)

DUM DUM MUNICIPALITY

4 NO. HARIMOHAN DUTTA ROAD, KOLKATA - 700 028

Ref. No. 181/U.P.H.C.S.-II

Date .20.02.2014



To
The Project Officer (Health)
SUDA,
Ilkus Bhawan,
Saltlake, Kolkata - 91.

Sub: Forwarding letter for Utilisation Certificate for Equipment Maternity Home

Sir,

In Reference to your Letter No. Suda-Health /527(PtI) /11/301(4) . Dated: 03.02.2014 ,
We are hereby sending the forwarding letter for the form of Utilization Certificate 330 for the
amount of Rs. 49965/- out of allotted funds of Rs 49965/- in favour of Urban RCH , Dum
Dum Municipality for the year 2013-14.

Please acknowledge the same.

Thanking you.

Yours Faithfully

Chairman
Dum Dum Municipality

Chairman
Dum Dum Municipality
44, Dr. Sallen Das Sarani
Dum Dum, Kolkata-700028

FORM SR-330A

of the Treasury Rules, West Bengal and the Subsidiary Rules
made thereunder, Volume- I

FORM OF UTILISATION CERTIFICATE

Sl no.	Sanction Letter no .& Date	Purpose	Amount (Rs)
1.	Letter No. (Suda-Health /527 (Pt.-I) /11 /301 (4) Dated: 03.02.2014	STRENGTHENING OF MATERNITY HOME - Equipment and Furniture	49,965/-
	Total :		49,965/-

Certified that out of Rs. **49,965/-** Rs. Forty nine thousand nine hundred sixty five – of grants in aid received during year 2013- 2014 in favour of Name of organization **Dum Dum Municipality** under this Department Letter No. given in the margin and **Rs. Nil** on account of unspent balance of the previous year, a sum of Rs. **49,965/-** Rs. Forty nine thousand nine hundred sixty five has been utilized for the **purpose of STRENGTHENING OF MATERNITY HOME** Equipment and Furniture for which it is sanctioned and the balance of **Rs. NIL**. If remaining unutilized at the end of the year will be adjusted towards the grants -in-aids payable during the next year.

2.Certified that I have satisfied myself that the conditions on which the grants –in-aids was sanctioned have been duly fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned .

Kinds of checks exercised:

1. Vouchers enclosed.
2. Order Copies

Signature with date

Designation:

Stamp of the authorized signatory

Chairman

Dum Dum Municipality

44, Dr. Sallen Das Sarani

Dum Dum, Kolkata-700028

Chairman

Dum Dum Municipality

SUDA**STATE URBAN DEVELOPMENT AGENCY****HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR - III, BIDHANNAGAR, CALCUTTA - 700 106
West Bengal**

Ref. No. : SUDA-Health/527(Pt.-I)/11/301(4)

Date : 03.02.2014


MEMORANDUM

Funds are hereby released electronically in favour of your ULB in connection with purchase of Equipment & Furniture towards strengthening of MH Services as per details below :

Sl. No.	ULB	Your Reference No.	Name of Bank	A/C No.	Amount
1	Dum Dum	98/UPHCS dt. 20.09.13	UCO Bank	07330100013075	49,965/-
2	Rishra	1291/IX dt. 20.09.13	Allahabad Bank	20511604617	2,47,747/-
3	Siliguri	276/SMC/UPHCS/13 dt. 03.10.13	Indian Overseas Bank	045802000012634	71,085/-
4	Maheshtala	467/1-A/MM/Estt/533 dt. 04.11.13	State Bank of India	32772036407	2,48,687/-

You are requested to submit UC as per 330A Form by 21.02.2014 after making necessary payment.

Yours faithfully,



Financial Advisor, SUDA

SUDA-Health/527(Pt.-I)/11/301(4)/1(5)

Dt. .. 03.02.2014

1. Mayor, Siliguri Municipal Corporation
2. Chairman, Dum Dum / Rishra / Maheshtala Municipality
3. Finance Officer, SUDA



Financial Advisor, SUDA

INDENT REGISTER OF STORES

24/10/13

DUM DUM MUNICIPALITY

334

To. SUN-MOON ENTERPRISE

Vidyasagar Road, Arabinda Pally, New Park,
Kolkata - 700-124

(Particulars of order for suppliers or execution of works)

Please supply the following materials at
our Hospital, Dept of Maternity Home, under
SUDA (UPHES, Health Programme). Vide Ref No. Suda/
health/527(PL-I) 11/52 Dated = 30-11-2012.

① Sucker machine (Adult)	= 01 Pc Rs. 9700.00
② Saline Stand (steel Body)	= 14 Pcs Rs. 16520.00
③ B.P. Instrument (clock type)	= 06 Pcs Rs. 5520.00
④ Revolving chair (with arms)	= 01 Pc Rs. 6350.00
⑤ Weight machine (Adult)	= 07 Pcs Rs. 6475.00
⑥ Nebulizer machine	= 02 Pcs Rs. 5400.00
	<u>Rs. 49,965.00</u>

for 24/10/13

Chairman / V. Chairman
DUM DUM MUNICIPALITY

Chairman
Dum Dum Municipality

Phone No - 9231845564

CHALLAN

SUN MOON ENTERPRISE

Arobinda Pally, Vidyasagar Road, Barasat, North 24 Pgs

DL NO. - 5736 SW & 5720 SBW

To The Chairman Kolkata Municipal Corporation Kolkata	Challan No	DDM/2/2013-2014	Date	19-2-14
	Order No.	111/UPHCS	Date	24.10.13

NO.	NAME OF THE PRODUCT	Quantity	Batch No	Mfg	Exp
1	Succar Machine (Adult)	1 pc			
2	Saline Stand (Steel Body)	14 pc			
3	B.P.Machine	6 pc			
4	Chair (Steel-Revolving)	1 set			
5	weight Machine (Adult)	7 pc			
6	Nebulizer Machine	2 pc			

Goods once sold can not be taken back.
Subject to Kolkata Jurisdiction.

Party's D.L. No.

E. & O. E.

[Signature]
Please sign & return



For, Sun Moon Enterprise

Phone No - 9231845564

TAX INVOICE

SUN MOON ENTERPRISE

Arobinda Pally, Vidyasagar Road, Barasat, North 24 Pgs


DL NO. - 5736 SW & 5720 SBW

Chairman Dum Municipality Kolkata	Bill No. DDM/2/2013-2014	Date	19-2.14
	Order No. 111/UPHCS	Date	24.10.13
	ChallanNo.DDM/2/2013-2014	Date	19.2.14

NO.	NAME OF THE PRODUCT	Rate@	Unite	Quantity	Amount
1	Succar Machine (Adult)	9700.00	per 1	1 pc	9700.00
2	Saline Stand (Steel Body)	1180.00	per 1	14 pc	16520.00
3	B.P.Machine	920.00	per 1	6 pc	5520.00
4	Chair (Steel-Revolving)	6350.00	per 1	1 set	6350.00
5	weight Machine (Adult)	925.00	per 1	7 pc	6475.00
6	Nebulizer Machine	2700.00	per 1	2 pc	5400.00
AGQPC 3127 J t No. 19659660077					Amount : 49965.00

E. & O. E.

pees: Forty nine thousand nine hundred sixty five only


For, Sun Moon Enterprise

All disputes are subject to the Kolkata High Court's Jurisdiction

Received
19/2/14

Office Of The
Rajarhat-Gopalpur Municipality

RAGHUNATHPUR, KOLKATA-700 059

ESTD.-1994

Phone : 2500-6531
Fax Phone : 2500-7560

CHAIRMAN :

TAPASH CHATTERJEE

VICE-CHAIRMAN :

LOKENATH DEB

Ref. No. 3985/R.G.M-227/14



Date. 05.03.2014

To
The Director, SUDA
ILGUS BHAWAN
Saltlake, Sec - II
Kolkata.



**Sub :- Regarding Fund release for Procurement of Equipment
& Furniture towards Strengthening of Maternity
Home under Rajarhat Gopalpur Municipality.**

Ref. No. SUDA- Health / 527/ (Pt-1)/11/262 , Dated : 30.11.2012

Sir,

This is to inform you that as per above mentioned Ref. No. & Dated this Municipality has Purchased the Equipments & Furniture as per sanctioned by SUDA. The work order of which is enclosed herewith. But till now no Fund has been released for this purpose.

Please take necessary action.

Thanking you,

Yours faithfully,

(Tapash Chatterjee)

Chairman

Rajarhat-Gopalpur Municipality

Tapash Chatterjee

Chairman

Rajarhat-Gopalpur Municipality

Rg
12/12/12
SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING
"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/527(Pt.-1)/11/262

From : Director, SUDA

To : The Chairman
Rajarhat Gopalpur Municipality

Sub. : Strengthening of MH services for FY 2012-13.

Sir,

With reference to your communication on the subject mentioned above, I am to inform you that Dept. of Health & Family Welfare has sanctioned Rs. 3,45,440/- (Rupees Three lakh forty five thousand four hundred forty) only for purchase of equipment & furniture towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Sucker Machine	3
2	Pulse Oxymeter	2
3	Diathermy	1
4	OT Table	1
5	Steel Almirah	2
6	Revolving Chairs	6
7	Mattress	14
8	Scissors Straight 6.5"	12
9	Artery Forceps 6.0"	12
10	Tissue Forceps 7"	12
11	Dissecting Forceps (Tooth) 6"	12
12	Dissecting Forceps (Non Tooth)	12
13	Sponge Holding Forceps 9"	12
14	Needle Holders 7"	12
15	Scissors Sharp Point Straight 6"	12
16	Scissors Sharp and blunt 6"	12
17	Scissors Curved 8"	12

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

Contd. to P-2.

DA

HEALTH WING

12/12/12

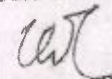
- 2 -

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Thanking you.

Yours faithfully,

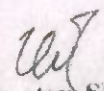

Director, SUDA

Dt. .. 30.11.2012

SUDA-Health/527(Pt.-1)/11/262/1(4)

CC :

1. Executive Officer, Rajarhat Gopalpur Municipality
2. Finance Officer, Rajarhat Gopalpur Municipality
3. HO, Rajarhat Gopalpur Municipality
4. Finance Officer, Health, SUDA


Director, SUDA



FORM SR-330A

of the Treasury Rules, West Bengal and the Subsidiary Rules
made thereunder, Volume- I

FORM OF UTILISATION CERTIFICATE

Sl no.	Sanction Letter no. & Date	Purpose	Amount (Rs)
1.	Letter No. (Suda-Health /527 (Pt.-I) /11 /179(4) Dated: 02.09.2013	STRENGTHENING OF MATERNITY HOME	184930/-
	Total :		184930/-

Certified that out of Rs. 184930/- Rs. One lac Eighty four thousand nine hundred thirty – of grants in aid received during year 2013- 2014 in favour of Name of organization **Dum Dum Municipality** under this Department Letter No. given in the margin and **Rs. Nil** on account of unspent balance of the previous year, a sum of Rs. 184930/- Rs. One lac Eighty four thousand nine hundred thirty has been utilized for the **purpose of STRENGTHENING OF MATERNITY HOME** for which it is sanctioned and the balance of **Rs. NIL**. If remaining unutilized at the end of the year will be adjusted towards the grants -in-aids payable during the next year.

2.Certified that I have satisfied myself that the conditions on which the grants –in-aids was sanctioned have been duly fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned .

Kinds of checks exercised:

Nil

Signature with date

Designation:

Stamp of the authorized signatory

[Signature]
F.O.

Finance Officer
Dum Dum Municipality
44, Dr. Sainen Das Sarani
Dum Dum, Kolkata-700028

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-I)/11/301(4)****Date 03.02.2014****MEMORANDUM**

Funds are hereby released electronically in favour of your ULB in connection with purchase of Equipment & Furniture towards strengthening of MH Services as per details below :

Sl. No.	ULB	Your Reference No.	Name of Bank	A/C No.	Amount
1	Dum Dum	98/UPHCS dt. 20.09.13	UCO Bank	07330100013075	49,965/-
2	Rishra	1291/IX dt. 20.09.13	Allahabad Bank	20511604617	2,47,747/-
3	Siliguri	276/SMC/UPHCS/13 dt. 03.10.13	Indian Overseas Bank	045802000012634	71,085/-
4	Maheshtala	467/1-A/MM/Estt/533 dt. 04.11.13	State Bank of India	32772036407	2,48,687/-

You are requested to submit UC as per 330A Form by 21.02.2014 after making necessary payment.

Yours faithfully,


Financial Advisor, SUDA

Dt. .. 03.02.2014

SUDA-Health/527(Pt.-I)/11/301(4)/1(5)

1. Mayor, Siliguri Municipal Corporation
2. Chairman, Dum Dum / Rishra / Maheshtala Municipality
3. Finance Officer, SUDA


Financial Advisor, SUDA



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ

“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-Health/527(Pt.I)/11/ 112

23.01.2014

ক্রমিক নং

তারিখ

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.

**Sub : Electronic Transfer of Fund debiting this office
Current Account No. 31227510436.**

Strengthening of Maternity Homes under HSDI

Sir,

You are requested to kindly arrange for electronic transfer of funds as per details given in Page – 02 debiting the amount from this office Current Account No.31227510436 lying with your branch in respect of Strengthening of Maternity Homes under HSDI.



(B.C.Patra)

Joint Secretary
M.A.Department, GOWB

(M.N.Pradhan)
Director
SUDA

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

Sl. No.	Name of the ULBs	Amount (in Rs.)	Name of the Bank	Branch Name	Account Number	IFS Code
1	Dum Dum Municipality	49965.00	UCO Bank	Dum Dum Cantonment	07330100013075	UCBA0000733
2	Rishra Municipality	247747.00	Allahabad Bank	Rishra	20511604617	ALLA0210498
3	Siliguri Municipal Corporation	71085.00	Indian Overseas Bank	Hill Cart Road, Siliguri	045802000012634	IOBA0000458
4	Maheshatala Municipality	248687.00	State Bank of India	Batanagar	32772036407	SBIN0006699
Total		617484.00				

(Rupees Six Lakh Seventeen Thousand Four Hundred Eighty Four only)

(B.C. Patra)

Joint Secretary

M.A. Department, GoWB

(M.N. Pradhan)

Director

SUDA



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা-৭০০ ১০৬, পশ্চিমবঙ্গ

“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-Health/527(Pt.I)/11/ 112

28.01.2014

ক্রমিক নং

তারিখ

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.

**Sub : Electronic Transfer of Fund debiting this office
Current Account No. 31227510436.**

Strengthening of Maternity Homes under HSDI

Sir,

You are requested to kindly arrange for electronic transfer of funds as per details given in Page – 02 debiting the amount from this office Current Account No.31227510436 lying with your branch in respect of Strengthening of Maternity Homes under HSDI.

(B.C.Patra)

Joint Secretary
M.A.Department, GOWB

(M.N.Pradhan)

Director
SUDA

দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

Sl. No.	Name of the ULBs	Amount (in Rs.)	Name of the Bank	Branch Name	Account Number	IFS Code
1	Dum Dum Municipality	49965.00	UCO Bank	Dum Dum Cantonment	07330100013075	UCBA0000733
2	Rishra Municipality	247747.00	Allahabad Bank	Rishra	20511604617	ALLA0210498
3	Siliguri Municipal Corporation	71085.00	Indian Overseas Bank	Hill Cart Road, Siliguri	045802000012634	IOBA0000458
4	Maheshtala Municipality	248687.00	State Bank of India	Batanagar	32772036407	SBIN0006699
T o t a l		617484.00				
(Rupees Six Lakh Seventeen Thousand Four Hundred Eighty Four only)						

(B.C. Patra)

Joint Secretary

M.A. Department, GoWB

(M.N. Pradhan)

Director

SUDA

Fax : (033) 2549 5214

OFFICE OF THE COUNCILLORS
DUM DUM MUNICIPALITY

44, Dr. Sailen Das Sarani, Dum Dum, Kolkata-700 028

From :

Dum Dum Municipality
Kolkata-700 028

Memo No. 98/UPHCS

To

UC
M.K.

Dated20.9.13..... 20 13

To
The Director,
SUDA,
Ilgus Bhawan,
Saltlake, Kolkata - 91.



Sub: Forwarding letter.

Sir,

In Reference to your Letter No. Suda-Health /527 (Pt-I) /11 /179(4) Dated: 02.09.2013 , We are hereby sending the forwarding letter for the form of Utilization Certificate for the amount of Rs. 1,84,930/- allotted funds in favour of Strengthening of Maternity Home during the year 2013-14.

Please acknowledge the same.

Thanking you.

Yours faithfully

[Signature] 20/9/13

Chairman,
Dum Dum Municipality.



Chairman
Dum Dum Municipality

FORM SR-330A

of the Treasury Rules, West Bengal and the Subsidiary Rules
made thereunder, Volume- I

FORM OF UTILISATION CERTIFICATE

Sl no.	Sanction Letter no .& Date	Purpose	Amount (Rs)
1.	Letter No. (Suda-Health /527 (Pt.-I) /11 /179(4) Dated: 02.09.2013	STRENGHTENING OF MATERNITY HOME	184930/-
	Total :		184930/-

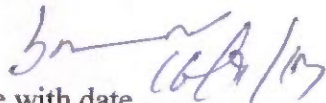
Certified that out of Rs. 184930/- Rs. One lac Eighty four thousand nine hundred thirty – of grants in aid received during year 2013- 2014 in favour of Name of organization Dum Dum Municipality under this Department Letter No. given in the margin and Rs. Nil on account of unspent balance of the previous year, a sum of Rs. 184930/- Rs. One lac Eighty four thousand nine hundred thirty has been utilized for the purpose of STRENGHTENING OF MATERNITY HOME for which it is sanctioned and the balance of Rs. NIL. If remaining unutilized at the end of the year will be adjusted towards the grants -in-aids payable during the next year.

2.Certified that I have satisfied myself that the conditions on which the grants –in-aids was sanctioned have been duly fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned .

Kinds of checks exercised:

Nil




Signature with date

Designation:

Stamp of the authorized signatory

SANJIB KUMAR CHANDA

Chairman

Dum Dum Municipality

Chairman

Dum Dum Municipality

28.10.13

Phone : 2551 3017/2549 5214 (O)
Fax : (033) 2549 5214

OFFICE OF THE COUNCILLORS DUM DUM MUNICIPALITY

44, Dr. Sailen Das Sarani, Dum Dum, Kolkata-700 028

Ref. No. : 1111/UPHCS-II

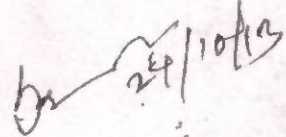
Dated24.10..... 2013

Sub: Supply of Instruments, Equipments and Funitures Dum Dum Municipality.

To
M/S . Sun-Moon Enterprise
Vidyasagar Road ,
Arabinda Pally ,Noa Para
Kolkata- 700 124

You are requested to supply the following Instruments , Equipments and Funitures for Maternity home , Dum Dum Municipality. under SUDA, sanctioned by Chairman, Dum Dum Municipality. The medicine will be supplied in Maternity home , Dum Dum Municipality Hospital Building within 5 days from the date of receipt of the order.

<u>Sl. No.</u>	<u>Name of Medicine</u>	<u>Quantity</u>
1.	Succer Machine	01 Pc
2.	Saline Stands (Steel Body)	14 Pcs
3.	BP Instruments (Clock types)	06 Pcs
4.	Revolving Chairs (wioth Arms)	01 Pc
5.	Weight Machine (Adult)	07 Pcs
6.	Nebuliser Machine	02 Pcs


Chairman,
Dum Dum Municipality.

Chairman
Dum Dum Municipality

INDENT REGISTER OF STORES

DUM DUM MUNICIPALITY

334

To SUN-MOON ENTERPRISEVidya Sagar Road, Arabinda Pally, Noa Para,
Kolkata - 700-124

(Particulars of order for suppliers or execution of works)

Please supply the following materials at
our Hospital, Dept of Maternity Home. under
SUDA (UPHES, Health Programme). Vide Ret M. S. Suby
health/527/PL-1 11/52 Dated = 30-11-2012.

- | | | |
|--------------------------------|----------|-------------------|
| ① Sucker machine (Adult) | = 01 Pc | Rs. 9700-00 |
| ② Saline Stand (steel body) | = 14 Pcs | Rs. 16520-00 |
| ③ B.P. Instrument (clock type) | = 06 Pcs | Rs. 5520-00 |
| ④ Revolving chair (with arms) | = 01 Pc | Rs. 6350-00 |
| ⑤ Weight machine (Adult) | = 07 Pcs | Rs. 6475-00 |
| ⑥ Nebulizer machine | = 02 Pcs | Rs. 5400-00 |
| | | Rs. 49,965 |

[Signature]
24/10/15

Chairman / V. Chairman
DUM DUM MUNICIPALITY

Chairman
Dum Dum Municipality

[Handwritten numbers and signatures]
allhand 78010
9432010406 - AHO
9433156670 - H.O

of the Councillors,
a Municipality,
a Hooghly, West Bengal



Phone 2672-1373
Fax 2672-0306
E-mail rishramunicipality@yahoo

Dated Rishra the 20

12 91/IX

kar Prasad Shaw

The Director,
SUDA,
Health Wing, ILGUS BHAVAN,
Salt Lake,
Kolkata-700 091.

Reg: - Procurement of Materials for strengthening of MH Services

Ref: - Your Memo No. SUDA-Health/527(Pt.1)/11/148 (08) Dt. 31.07.2011

This Office Memo No. 1194/VIII Dt. 11.09.2013.

Sir,

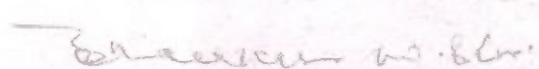
With regard to the above, and with reference to the above memo, this is kindly to inform you that a fresh list of items which are extreme required for running our MH Services is enclosed.

Although Work Order has been issued based on tender made, Supplier has been asked not to deliver the materials as of now.

You are therefore requested to give approval to purchase the enclosed items so that we can move afresh.

Thanking you,

Yours faithfully,


Chairman, 20.9.13
Rishra Municipality

P. Seal.

247247 → 224210

Sl. No.	Item	Quantity	Rate	Local
(1)	Clamp (Big)	5 Pcs. ✓	75/- ✓	Rs. 375.00 ✓
(2)	Kocher's Clamp	5 Pcs. ✓	120/- ✓	Rs. 600.00 ✓
(3)	Curb Artery	8 Pcs. ✓	128/- ✓	Rs. 1,024.00 ✓
(4)	Small Allis	8 Pcs. ✓	120/- ✓	Rs. 960.00 ✓
(5)	Needle Holder	4 Pcs. ✓	110/- ✓	Rs. 440.00 ✓
(6)	Hydraulic O.T. Table	1 Pc. ✓	76,500/-	Rs. 76,500.00 ✓
(7)	Shadowless Halozen	1 Pc. ✓	57,850/-	Rs. 57,850.00 ✓
	4 Bulbs O.T. Ceiling Light			
(8)	Premature Baby Incubator.	1 Pc. ✓	58,500/-	Rs. 58,500.00 ✓
(9)	Pulse Oxymeter(Two Para Monitor with B.P. Counting).	1 Pc. ✓	38,520/-	Rs. 38,520.00 ✓
(10)	Needle Burnner (Elc)	9 Pcs. ✓	1,560/-	Rs. 14,040.00 ✓
(11)	B.P. Instrument	5 Pcs. ✓	1,610/-	Rs. 8,050.00 ✓
(12)	Stethoscope	5 Pcs. ✓	580/-	Rs. 2,900.00 ✓

Total

Rs. 2,59,759.00

Add VAT @ 5%

Rs. 12,988.00

Rs. 2,72,747.00

P Seal.

checked by Dr.

RISHRA MUNICIPALITY

Kind Attn:

Finance Officer. SUDA.

RISHRA. HOOGHLY

Work OrderNo. **206**Date 01/11/2013Ref. Spot quotation. (Tender No. dt.)

To,

M/s. Man. Durga Trading Co.
3/250/5A, B.C. Roy Sarani
Morepurua, Rishra, Hooghly.

Name of work Supply of different medical equipments for
strengthening of Maternity Home (MH) under
Rishra Municipality.
Estimated Amount Rs.

Your tender for the said work is accepted at the following rate :—

As per / Stated in the quotation. above / Less of the estimate.

This work order is being issued in favour of you subject to the following conditions :—

- 1) That an agreement to be executed within 7 (Seven) days from the date of receipt of this Work Order.
- 2) That the work should be started within 3 (Three) days from the date of execution of such agreement. Otherwise this work order to be cancelled automatically and the earnest money deposited to be forfeited.
- 3) That the work should be completed within days from the date of execution of agreement.
- 4) That if it is found that you failed to complete the work within the stipulated period as mentioned in para (3) above without reasonable and satisfactory reason the Authority reserves the right to take penal measure against you as he thinks fit considering the nature of the work.
- 5) That if the extension of period of work becomes inevitable, the fact must be intimated, within the time limit, to be Authority. Otherwise, no extension of period of work will be permitted and the matter will be treated as per conditions of para (4) above.

The work will be under guidance and Supervision of Sri. Dr. A. N. Haz, R.M.O.

- | | |
|--|---|
| (i) clamp (Big) @ Rs. 75/- each | (ix) Pulse oxymeter |
| (ii) Kochers clamp @ Rs. 120/- each | (x) (2) Ana monitor @ Rs. 3852/- each |
| (iii) Curb Antery @ Rs. 128/- each | (xi) Needle Burner |
| (iv) Small Allis @ Rs. 120/- each | (xii) (Ble) @ Rs. 1560/- each |
| (v) Needle Holder @ Rs. 110/- each | (xiii) B.P. Instruments @ Rs. 1610/- each |
| (vi) Hydraulic o.T. table @ Rs. 76,500/- each | (xiv) (ii) Stethoscope @ Rs. 530/- each. |
| (vii) o.T. ceiling light (4 Bulbs) @ Rs. 57,850/- each | |
| (viii) Premature Baby incubator (Ulticare) @ Rs. 58,500/- each | |

Chairman
Rishra Municipality

(Signature)

SUDA-Health/527(Pt.-1)/11/263

30.11.2012

From : Director, SUDA

**To : The Chairman
Rishra Municipality**

Sub. : Strengthening of MH services for FY 2012-13.

Sir,

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 2,74,710/- (Rupees Two lakh seventy four thousand seven hundred ten) only for purchase of equipment & furniture towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Clamp (Big)	5
2	Kochers Clamp	5
3	Curb Artery	8
4	Small Allis	8
5	Needle Holder	4
6	Chair	30
7	Mattress	10
8	Pillow foam with cover	19
9	M. Net	20
10	Bed Cover	30
11	OT Light	1
12	Spot Light	4
13	Sucker Machine	1
14	BP Instrument	10
15	Stethoscope	5
16	Doppler Machine	1
17	Pulse Oxymeter	1

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

Contd. to P-2.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is **one time support** without creating any precedence.

Thanking you.

Yours faithfully,

Director, SUDA

SUDA-Health/527(Pt.-1)/11/263/1(4)

Dt. .. 30.11.2012

CC :

- 1. Executive Officer, Rishra Municipality**
- 2. Finance Officer, Rishra Municipality**
- 3. AHO, Rishra Municipality**
- 4. Finance Officer, Health, SUDA**

Director, SUDA

OFFICE OF THE PROJECT DIRECTOR
URBAN PRIMARY HEALTH CARE SERVICES
SILIGURI MUNICIPAL CORPORATION
SILIGURI – 734001



Memo.^{276 S.M.C.} / U.P.H.C.S. / 13

Date. 03 / 10 / 2013

To
The Director,
State Urban Development Agency,
Health Wing,
Ilgus Bhavan,
H.C. Block Sector – III
Bidhan Nagar, Kolkata- 700091
West Bengal.

PO (H)
81917

Sub: Submission of Work Order

Madam,

Enclosed kindly signed herewith copy of Work Order Vide No. SUDA-Health/527(pt.-1)/11/148(08) dt. 31.07.2013 and SUDA-Health/527(pt.-1)/11/172(04) dt. 29.08.2013. Attached work order is given among which the star marked and underline materials are taken according to the list given.

In this connection this is to state that procurement processes have been done by following procurement rules of West Bengal financial rules.

Thanking you,

Yours faithfully,

Sun 31/10/13
Health Officer,
U.P.H.C.S.
Siliguri Municipal Corporation

Health Officer,
Siliguri Municipal Corporation
Siliguri, Darjeeling

Enclosed :-As Stated.

OFFICE OF THE PROJECT DIRECTOR
URBAN PRIMARY HEALTH CARE SERVICES
SILIGURI MUNICIPAL CORPORATION

Memo .NO20.7....SMC/UPHCS/13

Date . . 28.03.13

Sub:- Supply order.

To
 Surgichem (India).
 Sevok Road, Siliguri.

This is to inform you that the rate given by you has
 been accepted for supply the following Equipments:-

<u>SL.NO.</u>	<u>NAME OF FOLLOWING EQUIPMENT</u>	<u>QUANTITY</u>	<u>Rate</u>
1.	Baby cot (Iron standard)	7	Rs 1,850
2.	O.T Light ceiling (Scorpion)	1	Rs 46,000
3.	Doppler (B.P.L.)	2	Rs 6,000
4.	Labour Table (Stainless Steel Top)	1	Rs 4,950 ✓ = 4950
5.	Auto clave (20"x 12" S. S.)	1	Rs 10,200 ✓ = 10200
6.	Oxygen flow meter jar	3	Rs 170 ✓ = 510

You are also request to Submitting the bill along with copy of the order supply .

Sevok Road
SURGICHEM (INDIA)
 Sevoke Road, Siliguri-I
 Opp. Gurudwara
 Phone : 2538566, 2522751

Sw. 8/3/13
Health officer
S.m.c.
 Health Officer.
 Siliguri Municipal Corporation
 Siliguri, Darjeeling

(A) 15660.00

OFFICE OF THE PROJECT DIRECTOR
URBAN PRIMARY HEALTH CARE SERVICES
SILIGURI MUNICIPAL CORPORATION

Memo No. 157.../SMC/UPHCS/12-13

Date: 22.01.13

To
 Surgichem (India)
 Sevok Road, Siliguri.

Sub:- Supply order

This is to inform you that the rate given by you has been accepted for supply the following Equipments :-

<u>SL. NO.</u>	<u>NAME OF FOLLOWING EQUIPMENT</u>	<u>QUANTITY</u>	<u>RATE</u>
(*) ①	Spot Light with Mercury Bulb (Halogen—Standard)	2 NOS	3,450.00 = 6900
②	Pulse Oxymeter Portable "Ranger"	2 NOS	2,250.00
③	Suction Machine electric "Anand" M.B-36 For Mother	1 NO	9,950.00
④	Suction Machine electric "Anand" M.B-36 (For Baby)	1 NO	6,950.00
(*) ⑤	Baby Warmer "Life Line"	1 NO	31,000.00 = 31000
⑥	Ambue bag for baby "silicon"	2 NOS	650.00 .00
(*) ⑦	Patient wheel trolley "Iron Standard"	3 NOS	3950.00.00 = 11850
(*) ⑧	Oxygen flow meter Nasal program (Standard)	3 NOS	725.00.00 = 2175
⑨	Oxygen Hood Round (Baby head Mark)	2 NOS	1,750.00 = 3500

You are also requested to Submitting the bill along with copy of the order supply

S. M. C.
 Health officer
 S.M.C.
 Health Officer
 S.M.C. (Matri-Sadan, Dabgram)
 Siliguri

71085

71085

SUDA**STATE URBAN DEVELOPMENT AGENCY****HEALTH WING
"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-1)/11/265****Date 30.11.2012****From : Director, SUDA****To : The Mayor
Siliguri Municipal Corporation****Sub. : Strengthening of MH services for FY 2012-13.***Sir/Madam*

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 3,20,646/- (Rupees Three lakh twenty thousand six hundred forty six) only for purchase of equipment & furniture towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Req'd.
1	Baby Warmer Machine	1
2	Labour Table	1
3	Spot light with mercury bulb	1 (2)
4	Autoclave	1
5	Oxygen flow meter	2 (3)
6	Trolley	3
7	Ceiling Fan	5

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is **one time support** without creating any precedence.

Thanking you.

Yours faithfully,

[Signature]
Director, SUDA

Contd. to P-2.



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 467/1-A/MM/ESH/533

Date : 04/10/2013

To
The Director SUDA,
Health Wing,
Ilgus Bhavan,
H.C. Block, Sector III
Bidhannagar, Kolkata - 700091.



POK(H) Fo
8.11.13
Muly

Sub :- Submission of copy of work order.
Fund :- SUDA order no. SUDA/Health/527(Pt-1)/11/257 dated 30/11/2012, and reminder on 31/07/2013, 29/08/2013 & 19/09/2013

Sir,

With reference to the above mentioned subject, I am to inform you that this Municipality has completed the procurement of equipments and medicine in connection with "strengthening of MH services" vide above stated allotment order. The details of work order is stated below.

Equipment

Sanctioned Amount : 1,33,740/-

Purchase Amount

1) Star Electronics	: 63,149/-
2) Santi Electronics	: 56,724/-
3) Star Electronics	: 13,824/-

133,697/- → 133,740/-

Medicine :

Sanctioned Amount : 1,15,000/-

1) M/s Florence India	: 99,730.40
2) Power point	: 15,260.00
Total	2,48,687.00

→ 248,740/-

Now, I, therefore, request you to please release the amount of Rs.2,48,687/- (Rupees two lakh forty eight thousand six hundred eighty seven only) in favour of this Municipality at earliest. Please condone the delayed action.

Encl :- (5 nos. copies of workorder)

Yours faithfully,

Vice Chairman

Maheshtala Municipality

Date : 04/10/2013

Memo No. 467/1/6/1-A/MM/ESH/533

Copy forwarded for information & necessary action to :-

- 1) Chairman
- 2) CIC (Health)
- 3) Executive Officer
- 4) Finance Officer
- 5) Health Officer
- 6) Secretary

4.11.13

Vice Chairman

Maheshtala Municipality



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 607/11-A/MM/148

Date : 14/02/2013

To
Star Electronics,
N.E. Noapara, Barasat,
Kolkata - 700125.

Sub :- Work order for Diathermy machine
Ref :- No.NIQ/3/NM/2012-13

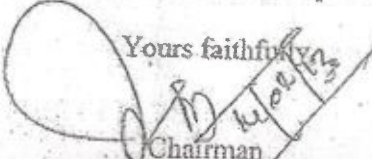
Sir,

This is to inform you that your rate to supply the below mentioned medical equipment for Maternity Home of this Municipality is accepted by the Chairman-in-Council in its meeting dated 07/02/2013. Now you are requested to supply the same within seven days from the date of receipt this letter.

Descript on of Item.	Accessories	Rate (Rs.)
SSETUR make Enetech, 400W analog non programme model with number of cut, blend and coagulation models.	Disposable Hand Switch Pencil, Bipolar Forcep Autoclavable, Bipolar Pedal Footswitch, Nonopolar Double Pedal Footswitch.	69,000.00
	12% Discount	8,280.00
	Amount	60,720.00
	VAT 4%	2,429.00
	Net Amount	63,149.00

Warranty :- 1 year from date of supply.


- ❖ No security deposit shall be deducted. An agreement shall be signed between Star Electronics and Maheshtala Municipality on Rs.100/- (Hundred) Court Fees Stamp Papers which will be provided by you.

Yours faithfully

Chairman
Maheshtala Municipality
Date : 14/02/2013

Memo No. 607/11/7/III-A/MM/148

Copy forwarded for information & necessary action to :-

1. Vice Chairman
2. C.I.C. (Health)
3. Executive Officer
4. Finance Officer, He is requested to release the amount from Municipal Fund and latter it would be refunded after reimbursement from SUDA vide there allotment number SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012.
5. Health Officer
6. Secretary
7. Path-technician cum Store Keeper of Maternity Home under Urban Primary Health Care Services formally known as IPP-VIII Health Services.


Chairman
Maheshtala Municipality

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No.

Date : 26/03/2013

To
Santi Enterprise,
N-E, Noapara, Barasat
Kolkata - 700125.

Sub :- Supply order of different medical equipments.

NIQ : 6/MM/12-13

Fund : SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012

Sir,

With reference to the above this is to inform you that your rate to supply the below mentioned items is accepted. Now, you are requested to supply the same at earliest.

Sl.No.	Name of the item	Quantity	Rate (Rs.)	Amount (Rs.)
1	Ambubag	2	1080.00	2160.00
2	Suction Tube	4	340.00	1360.00
3	Endotracheal Tube	4	150.00	600.00
4	Pediatric E.T. Tube	6	170.00	1020.00
5	Baby Ryles Tube	12	12.00	144.00
6	Thermometer	6	120.00	720.00
7	Baby Weighting Machine	2	1450.00	2900.00
8	B.P. Machine	4	2350.00	9400.00
9	E.T. Tube Pediatric	6	170.00	1020.00
10	Baby Bulb Sucker	4	80.00	320.00
11	Stethoscope	10	490.00	4900.00
12	Nebuliser Mask	6	140.00	840.00
13	Nebuliser Baby	3	140.00	420.00
14	Oxygen Mask (Adult & Baby)	6 (3+3)	160.00	960.00
15	Needle Holder	6	230.00	1380.00
16	Glass Door Almirah	1	9800.00	9800.00
17	Bed	2	6800.00	13600.00
18	Curved Artery Forceps (Large)	12	225.00	2700.00
19	Croley Stochting Forceps	2	490.00	980.00
20	Saline Stand	1	1500.00	1500.00
			TOTAL	56,724.00

Rupees Fiftysix thousand seven hundred twenty four only. (Rupees only)

Yours faithfully,

[Signature]

Vice Chairman

Maheshtala Municipality

Date : 26/03/2013

Memo No. 1089/i(5)/III-A/MM/148

Copy forwarded for information & necessary action to :-

- 1) Chairman, 2) CIC (Health), 3) Executive Officer,
- 4) Finance Officer, He is requested to release the payment initially from Municipal Fund and it will be reimbursement from SUDA vide order no. SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012
- 5) Secretary, 6) Store Keeper cum Lab Technician of Matrisadan.

[Signature]

Vice Chairman

Maheshtala Municipality



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 3561 / I-A/MM/ESK/533

Date : 24/10/2013

To
Star Electronics,
N-E, Noapara, Barasat,
Kolkata - 700 125.

Sub :- Supply order of Medical Equipment.

Sir,

In connection to the above mentioned subject this to inform that the rate for the below mentioned items is accepted. Now, the concern is directed to supply the item within seven days for the date of receipt this work order.

Sl. No.	Name of the equipment	Rate	Quantity	Amount (Rs.)
1	Nebulizer	2150.00 (Life line)	2 nos	4300.00
2	Revolving Stool	1500.00	2 nos	3000.00
3	Tooth Forcep (Small)	180.00	01 no	180.00
4	Sutcher Needle Cutting	18.00	2 packet	36.00
5	Sharp Scissor	250.00	1 no	250.00
6	Instrument Trolley	2700.00	2 no	5400.00
Net Total				13166.00
5% VAT				658.00
Gross Total				13824.00

Rupees Thirteen thousand eight hundred twenty four only.

Yours faithfully,

Chairman

Maheshtala Municipality

Memo No. 3561/1/6/1-A/MM/ESK/533

Date : 24/10/2013

Copy forwarded for information & necessary action to:-

1. Vice Chairman
2. Executive Officer
3. Finance Officer, He is requested to release the payment initially from M.F. and it will be reimbursement from SUDA, vide order no. SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012.
4. Health Officer
5. Secretary
6. Lab Technician cum Store Keeper of Matrisadan

Chairman

Maheshtala Municipality



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 3721/ I.A/UM/ESH/533

Date : 04/10/2013

M/s Florence India,
32, Ezra Street, 6th Floor,
Kolkata – 700 001.

Sub :- Supply order of medicine.
Fund :- SUDA order no. SUDA/Health/527(Pt-1)/11/257 dated 30/11/2012
NIQ No. :- 6/MM/12-13

In connection to the above mentioned subject this is to inform that the rate for the below mentioned medicines is accepted. Now the concern is directed to supply the same within seven days from the date of receipt this work order.

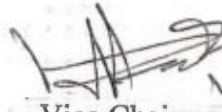
Sl.No.	Name of the Medicine	Rate	Quality	Amount
1	Inj. Lignocane 2%	14.95nal	50	747.50
2	Inj. Deripuyllin	3.50 anp	200	700.00
3	Inj. Lasix	2.99 anp	150	448.50
4	Inj. Rantac	1.70 anp	50	835.00
5	Inj. Oxoitocin	16.70 anp	200	3340.00
6	Inj. Methergin	41.75 anp	100	417.50
7	Inj. Diclofenac Sodium	12.92 anp	50	646.00
8	Inj. Zofar	22.62 anp	50	1131.00
9	Inj. Reglan	8.67 anp	200	1734.00
10	Inj. Senseroecan Heary	24.27 anp	50	1213.50
11	Inj. Ketamine	36.26 vial	20	725.20
12	Inj. Decolic	8.72 amp	200	1744.0
13	Inj. Drotin	12.56 amp	100	1256.00
14	Inj. NS	22.00 500 ml bottle	50	1100.00
15	Inj. RL	44.49 500 ml/bottle	50	2224.50
16	Inj. 5% Dexlrose	22.00 500 ml bottle	50	1100.00
17	Inj. 10% Dexlrose	24.00 500 ml bottle	25	600.00
18	Inj. Decadan	9.06 vail	100	906.00
19	Tab Diazepam	6.50 Strip (10 tab)	10	65.00
20	Tab Amlodepin	26.46 Strip (10 tab)	10	264.60
21	Tab Sorbitrate	41.16 Strip (50 tab)	20	823.20
22	Tab Metrogyc (400 mg)	9.90 Strip (15 tab)	10	99.00
23	Tab Deriptyline	2.50 Strip (10 tab)	20	50.00

Sl.No.	Name of the Medicine	Rate	Quality	Amount
24	Tab Rantac (300 mg)	21.95 Strip (20 tab)	100	2195.00
25	Tab Brufen (400 mg)	9.90 Strip (15 tab)	100	990.00
26	Tab Decolic	34.50 Strip (10 tab)	20	690.00
27	Cap Amoxycilin (500 mg)	49.00 (10 tab)	20	980.00
28	Cap Amox + Cloxaciline (250 mg)	50.00 Strip (10 tab)	20	1000.00
29	Duoline (2.5 ml) Respules	10.36 per piece	200	2072.00
30	Tab crocine	15.00 strip (10 tab)	10	150.00
31	Betndine Ointment	69.73 tube (10 gm)	500	3486.50
32	Betadine Lotion	140.34 (Bott 100 ml)	500	7017.00
33	Nesoclear Drops	45.08 piece	10	450.80
34	Nepeptine Drops	55.86 Bottle	10	558.60
35	Gloves (6½") (Dial)	13.00 pair	100	1300.00
36	Gloves (7") (Dial)	13.00 pair	100	1300.00
37	Gloves (7½") (Dial)	13.00 pair	100	1300.00
38	Gange Thau (large)	160.00 piece (16 mtr)	35	5600.00
39	Cotton (400 gm)	120.00	20	2400.00
40	Micropore 3"	60.00 Rill	20	1200.00
41	Xylocain Gelly 2%	50.00 tube (20 gm)	25	1250.00
42	Roll Bangage 2"	2.50 piece	50	125.00
43	Roll Bangage 4"	4.50 piece	50	225.00
44	Roll Bangage 6"	6.50 piece	50	325.00
45	Dettol (5 lt jar)	735.00 5lt jar	05	3675.00
46	Savlon (1 lt)	140.00 1 lt bottle	20	2800.00
47	Venflow (18 no.)	62.00 piece	60	3720.00
48	Venflow (20 no.)	62.00 piece	60	3700.00
49	Spinal Needle (25)	60.00	50	3000.00
50	Catgut (1-0) 4242	90.00 piece	50	4500.00
51	Formalin	65.00 500 ml bottle	30	1950.00
52	Lysal	350.00 5 lt jar	10	3500.00

Sl.No.	Name of the Medicine	Rate	Quality	Amount
53	Silk (1-0)	235.00 piece	20	4700.00
54	Silk (2-0)	235.00 piece	20	4700.00
55	Silk (3-0)	235.00 piece	20	4700.00
56	IV set	20.00 piece	100	2000.00
TOTAL				99,730.40

(Rupees Ninety nine thousand seven hundred thirty and forty paise only)

Yours faithfully,

 4/11/13


Vice Chairman
Maheshtala Municipality

Memo No. 372/11/7/1-A/mm/EST/533

Date : 04/10/2013

Copy forwarded for information & necessary action to :-

- 1) Chairman
- 2) CIC (Health)
- 3) Executive Officer
- 4) Finance Officer, He is requested to release the payment from Municipal Fund and it will be reimbursement for SUDA vide order no.SUDA-Health/527(Pt -1)/11/257 dated 30/11/2012.
- 5) Health Officer
- 6) Secretary
- 7) Lab Technician cum Store Keeper of Matrisadan

 4/11/13

Vice Chairman
Maheshtala Municipality



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 3720 / I-A / MM / EGR / 533

Date : 04/11/2013

To
Powerpoint,
Prop :- Sankar Naskar,
Pashim Rameswarpur, Batanagar,
South 24 Parganas.

Sub :- Supply order of medical items.
Fund :- SUDA order no. SUDA/Health/527(Pt-1)/11/257 dated 30/11/2012

In connection to the above mentioned subject this is to inform that the rate for the below mentioned medicines is accepted. Now the concern is directed to supply the same within seven days from the date of receipt this work order.

Sl.No.	Name of the Medicine	Rate	Quality	Amount
1	U.S.G. Roll type view High Glossy	1450/- pre roll	7 roll	10150.00
2	E.C.G. Roll Digital BPL	190/- (3 piece)	25 piece	4750.00
3	U.S.G. jelly or E.C.G. jelly	40/- bottle	9 bottle	360.00
TOTAL				15,260.00

(Rupees Fifteen thousand Two hundred Sixty only inclusive all)

Yours faithfully,


Vice Chairman
Maheshtala Municipality

Memo No. 3720 / 117 / I-A / MM / ESH / 533

Date : 04/11/2013

Copy forwarded for information & necessary action to :-

- 1) Chairman
- 2) CIC (Health)
- 3) Executive Officer
- 4) Finance Officer, He is requested to release the payment from Municipal Fund and it will be reimbursement for SUDA vide order no. SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012.
- 5) Health Officer
- 6) Secretary
- 7) Lab Technician cum Store Keeper of Matrisadan


Vice Chairman
Maheshtala Municipality



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 395 / I-A/MM/EST/533

Date : 13/09/2013

To
The Director SUDA,
Health Wing,
ILGUS Bhavan,
H-C Block, Sector III,
Bidhannagar,
Kolkata - 700091.



Sub :- Submission of copy of work order.

Ref :- i) SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012
ii) SUDA-Health/527(Pt-1)/11/148(08) dated 31/07/2013

Sir,

In connection with the above mentioned subject I am to inform you that this Municipality has procured equipments of Rs.1,19,873/- (~~Rupees~~ one lakh nineteen thousand eight hundred seventythree) only, though the sanctioned amount is 1,33,740/-. Now, I am to send herewith two copies of two work order in connection with the purchase of equipments.

I also informed you that the purchase of medicine will be completed shortly. Please condone the delayed action.

⇒ Enclo :- 2 nos. work order copies

Yours faithfully,

Chairman

Maheshtala Municipality

Memo No. 395/1/3/1-A/MM/EST/533

Date : 13/09/2013

Copy forwarded for information & necessary action to :-

- 1) Executive Officer
- 2) Health Officer
- 3) Secretary, He is directed to complete the procurement of medicine at an early date.

Chairman

Maheshtala Municipality



MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No. 607/15-A/MM/148

Date : 14/02/2013

To
Star Electronics,
N.E. Noapara, Barasat,
Kolkata - 700125.

Sub :- Work order for Diathermy machine
Ref :- No.NIQ/3/NM/2012-13

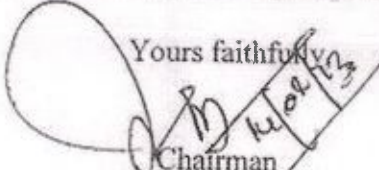
Sir,

This is to inform you that your rate to supply the below mentioned medical equipment for Maternity Home of this Municipality is accepted by the Chairman-in-Council in its meeting dated 07/02/2013. Now you are requested to supply the same within seven days from the date of receipt this letter.

Description of Item	Accessories	Rate (Rs.)
SSETUR make Enetech, 400W analog non programme model with number of cut, blend and coagulation models.	Disposable Hand Switch Pencil, Bipolar Forcep Autoclavable, Bipolar Pedal Footswitch, Nonopolar Double Pedal Footswitch.	69,000.00
	12% Discount	8,280.00
	Amount	60,720.00
	VAT 4%	2,429.00
	Net Amount	63,149.00

Warranty :- 1 year from date of supply.

- ❖ No security deposit shall be deducted. An agreement shall be signed between Star Electronics and Maheshtala Municipality on Rs.100/- (Hundred) Court Fees Stamp Papers which will be provided by you.

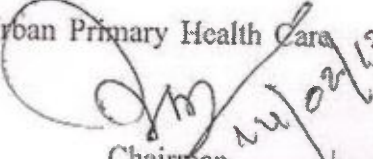
Yours faithfully,

Chairman

Maheshtala Municipality
Date : 14/02/2013

Memo No. 607/17/III-A/MM/148

Copy forwarded for information & necessary action to :-

1. Vice Chairman
2. C.I.C. (Health)
3. Executive Officer
4. Finance Officer, He is requested to release the amount from Municipal Fund and latter it would be refunded after reimbursement from SUDA vide there allotment number SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012.
5. Health Officer
6. Secretary
7. Path-technician cum Store Keeper of Maternity Home under Urban Primary Health Care Services formally known as IPP-VIII Health Services.


Chairman
Maheshtala Municipality

MAHESHTALA MUNICIPALITY

MAHESHTALA SOUTH 24 PARGANAS

Phone : 2490-1651, 2490-3389

Fax :- 2490-9296, Email : maheshtalamunicipality@gmail.com

Memo No.

Date : 28/03/2013

To
Santi Enterprise,
N-E, Noapara, Barasat
Kolkata - 700125.

Sub :- Supply order of different medical equipments.

NIQ :6/MM/12-13

Fund : SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012

Sir,

With reference to the above this is to inform you that your rate to supply the below mentioned items is accepted. Now, you are requested to supply the same at earliest.

Sl.No.	Name of the item	Quantity	Rate (Rs.)	Amount (Rs.)
1	Ambubag	2	1080.00	2160.00
2	Suction Tube	4	340.00	1360.00
3	Endotracheal Tube	4	150.00	600.00
4	Pediatric E.T. Tube	6	170.00	1020.00
5	Baby Ryles Tube	12	12.00	144.00
6	Thermometer	6	120.00	720.00
7	Baby Weighting Machine	2	1450.00	2900.00
8	B.P. Machine	4	2350.00	9400.00
9	E.T. Tube Pediatric	6	170.00	1020.00
10	Baby Bulb Sucker	4	80.00	320.00
11	Stethoscope	10	490.00	4900.00
12	Nebuliser Mask	6	140.00	840.00
13	Nebuliser Baby	3	140.00	420.00
14	Oxygen Mask (Adult & Baby)	6 (3+3)	160.00	960.00
15	Needle Holder	6	230.00	1380.00
16	Glass Door Almirah	1	9800.00	9800.00
17	Bed	2	6800.00	13600.00
18	Curved Artery Forceps (Large)	12	225.00	2700.00
19	Croley Stoching Forceps	2	490.00	980.00
20	Saline Stand	1	1500.00	1500.00
			TOTAL	56,724.00

Rupees Fiftysix thousand seven hundred twenty four only. (Rupees five are)
24/3 Yours faithfully,

Vice Chairman

Maheshtala Municipality

Date : 28/03/2013

Memo No. 1089/i(5)/II-A/MM/148

Copy forwarded for information & necessary action to :-

- 1) Chairman, 2) CIC (Health), 3) Executive Officer,
- 4) Finance Officer, He is requested to release the payment initially from Municipal Fund and it will be reimbursement from SUDA vide order no.SUDA-Health/527(Pt-1)/11/257 dated 30/11/2012
- 5) Secretary, 6) Store Keeper cum Lab Technician of Matrisadan.

Vice Chairman

Maheshtala Municipality

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-1)/11/257****Date 30.11.2012****From : Director, SUDA****To : The Chairman
Maheshtala Municipality****Sub. : Strengthening of MH services for FY 2012-13.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 1,33,740/- for purchase of furniture & equipment and Rs. 1,15,000/- for purchase of drug; thus totaling Rs. 2,48,740/- (Rupees Two lakh forty eight thousand seven hundred forty) only towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Req'd.
1	Ambubag	2
2	Suction Tube	4
3	Endotrocheal Tube	4
4	Prediatric E.T. Tube	6
5	Baby Ryle's Tube	12
6	Thermometer	6
7	Baby Weighing Machine	2
8	BP Machine	4
9	E.T. Tube Prediatric	6
10	Baby Bulb sucker	4
11	Stethoscope	10
12	Neebuliser Mask	6
13	Neebuliser Mask (Baby)	3
14	Oxygen Mask (Adult + Baby)	6
15	Needle Holder	6
16	Glass Door Almirah	1
17	Steel Bed	2
18	Curved Artery Forceps (Large)	12
19	Crolecystectomy Forceps	2
20	Diathermy Machine	1
21	Saline Stand	1

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

Contd. to P-2.



HEALTH WING

2235
7094

- 2 -

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Thanking you.

Yours faithfully,

Director, SUDA

SUDA-Health/527(Pt.-1)/11/257/1(4)

Dt. .. 30.11.2012

CC :

1. Executive Officer, Maheshtala Municipality
2. Finance Officer, Maheshtala Municipality
3. HO, Maheshtala Municipality
4. Finance Officer, Health, SUDA

Director, SUDA

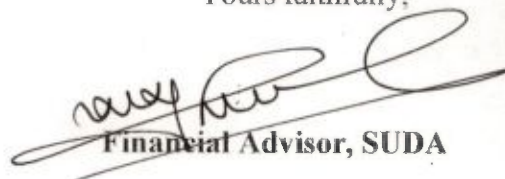
STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-I)/11/225(3)****Date 31.10.2013****MEMORANDUM**

Funds are hereby released electronically in favour of your ULB in connection with purchase of Equipment & Furniture towards strengthening of MH Services as per details below :

Sl. No.	ULB	Your Reference No.	Name of Bank	A/C No.	Amount
1	Barrackpore	CMBM/Health/HO/13-14/030 dt. 07.08.13	Allahabad Bank	20513750178	3,74,000.00
2	North Barrckpore	859/NBM/Health(OS) dt. 13.08.13	Punjab National Bnk	2101002100001750	1,30,000.00
3	Taki	656/TM dt. 26.08.13	State Bank of India	31294385142	1,54,100.00

You are requested to submit UC as per 330A Form by 15.11.2013 after making necessary payment.

Yours faithfully,


Financial Advisor, SUDA**SUDA-Health/527(Pt.-I)/11/225(3)/1(4)****Dt. .. 31.10.2013****1. Chairman, Municipality****2. Finance Officer, SUDA**
Financial Advisor, SUDA



রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ

“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

SUDA-Health/527 (Pt.-I)/III/ 1146

29.10.2013

ক্রমিক নং.....

তারিখ.....

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.

**Sub : Electronic Transfer of Fund debiting this office
Current Account No.31227456477.**

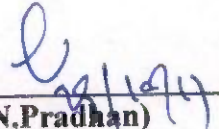
Strengthening of Maternity Homes under HSDI

Sir,

You are requested to kindly arrange for electronic transfer of funds as per details given in Page-02 debiting the amounts from this office Current Account No.31227456477 lying with your branch in respect of Strengthening of Maternity Homes under HSDI.


(B.C.Patra)

Joint Secretary
M.A.Department, GOWB


(M.N.Pradhan)
Director
SUDA

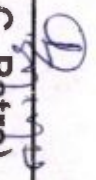
29-10-13

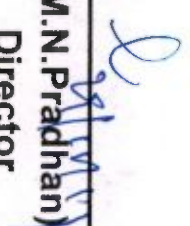
দূরভাষ : ২৩৫৮ ৬৪০৩ / ৫৭৬৭, ফ্যাক্স : ২৩৫৮ ৫৮০০

Tel : 2358 6403/5767, Fax : 2358 5800, E-mail : wbsudadir@gmail.com

Account Section : 2358 6408

Sl. No.	Name of the ULBs	Amount (in Rs.)	Name of the Bank	Branch Name	Account Number	IFS Code
1	Barrackpore Municipality	374000.00	Allahabad Bank	Barrackpore	20513750178	ALLA0210504
2	North Barrackpore Municipality	1300000.00	Punjab National Bank	Ichapore	2101002100001750	PUNB0210100
3	Taki Municipality	154100.00	State Bank of India	Taki	31294385142	SBIN0006867
Total		658100.00				
(Rupees Six Lakh Fifty Eight Thousand One Hundred only)						


 (B.C. Patra)
 Joint Secretary
 M.A. Department, GoWB


 (M.N. Pradhan)
 Director
 SUDA
 29.10.13

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/527(Pt.-1)/11/191(04)

Date 19.09.2013

From : Director, SUDA

**To : The Mayor
Siliguri Municipal Corporation**

**The Chairman
Ashokenagar Kalyangarh / Maheshtala / Rishra Municipality**

**Sub. : Strengthening of MH services for FY 2012-13
- Submission of copy of Work Order - Reminder - 2.**

**Ref. : This office communication vide no. SUDA-Health/527(Pt.-1)/11/148(08)
dt. 31.07.2013 and SUDA-Health/527(Pt.-1)/11/172(04) dt. 29.08.2013.**

Sir / Madam,

I am to refer to this office earlier communication (as detailed in the enclosure) with regard to undertaking procurement of equipment / furniture / drugs observing procurement norms of West Bengal Financial Rules by January, 2013 and submission of copy of work order to the undersigned for release of fund.

From office record it is revealed that copy of work order is yet to be received from your ULB. You are requested to submit the same by 07.10.2013 for release of fund from this end.

If procurement process has not yet been undertaken by your ULB, you are also requested to report the same by 07.10.2013.

Thanking you.

Yours faithfully,

Enclo. : As stated.


Director, SUDA

Enclo. :

ULBs	Memo No. & Date	Sanctioned Amount by the DHFW		
		Purchase of Equipment & Furniture	Purchase of Drug	Total
Ashokenagar Kalyangarh	SUDA-Health/527(Pt.-1)/11/248 dt. 30.11.2012	2,50,000	-	2,50,000
Maheshtala	SUDA-Health/527(Pt.-1)/11/257 dt. 30.11.2012	1,33,740	1,15,000	2,48,740
Rishra	SUDA-Health/527(Pt.-1)/11/263 dt. 30.11.2012	2,74,710	-	2,74,710
Siliguri	SUDA-Health/527(Pt.-1)/11/265 dt. 30.11.2012	3,20,646	-	3,20,646

BARRACKPORE MUNICIPALITY

B. T. Road, P.O. Talpukur, North 24 Parganas

Memo No: CMBM/Health/HO/13-14/030

Dated: 07.08.13

From: **Uttam Das**
Chairman

To,
The Director,
State Urban Development Agency,
H-C Block, Sector – III,
Bidhannagar, Calcutta – 700 091.



Sub: - Release of fund for procurement of furniture and equipments and purchase of drug.

Sir,

With reference to your memo no. SUDA-Health/527(Pt.-1)/11/250 dated 30.11.2012 and subsequent letter being no. SUDA-Health/527(Pt.-1)/11/148 (08) dated 31.07.2013, the undersigned would like to inform you that the municipality has been placed an order for procurement of medicines, equipments and furniture as listed in your memo. The copy of work order is attached herewith for your perusal.

Further it is informed to you that the procurement process has been conducted as per as per West Bengal Financial Rules.

You are therefore requested to release the fund of Rs.2,99,000.00 for procurement of furniture and equipments and Rs.75,00.00 for purchase of medicine (Totaling Rs.3,74,000.00) at an early date so that the municipality can pay the bill to the agency.

It may be mentioned that the extra cost for procurement of furniture and equipments will be borne by the municipality from its own fund.

Thanking you.

Yours faithfully


Chairman
Barrackpore Municipality.

BARRACKPORE MUNICIPALITY

B.T.Road, P.O. Taipukur, 24 Parganas (N).

2592-0221, 2592-5565, 2592-1067, 2592-2679(Fax)

Website - www.barrackporemunicipality.orgEmail: chairman@barrackporemunicipality.orgMemo No. 95/116/Health/BMMS/13-14/TDated. 05.08.2013

To
M/s. Star Electronics,
N-E, Noapara, Barasat,
Kolkata - 700 125

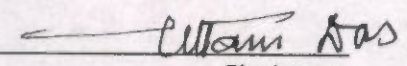
Sub: Supply of hospital equipments under Health Programme.

This is to inform you that your rate vide tender notice no. 116/Health/BMMS / 13-14/T dated - 29.07.2013 for Supply of hospital equipments under Health programme at the rates as mentioned below offered by you is hereby accepted by this office. You are therefore requested to supply the following materials within 15 (fifteen) days from the date of receiving of this order.

Sl. No.	Name of the Item	Unit	Quantity	Rate (in Rs.)	Amount (in Rs.)
1.	Pulse Oxymeter (infant) as per specification.	Each	1	38,000.00	38,000.00
2.	N-Meter (Electrolyte) as per specification.	Each	1	1,15,000.00	1,15,000.00
3.	Fowler Bed as per specification.	Each	5	14,800.00	74,000.00
4.	Mattress for fowler bed.	Each	5	2,500.00	12,500.00
5.	Pulse oxymeter as per specification.	Each	2	38,000.00	76,000.00
Total Rs.3,15,500.00					

(Rupees three lakh fifteen thousand and five hundred) only

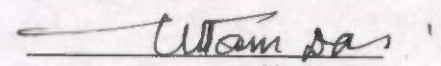
Yours faithfully,


Chairman
Barrackpore Municipality
du

Copy forwarded for information: -

1. Vice-Chairman
2. Executive Officer
3. Assistant Engineer
4. Finance Officer




Chairman
Barrackpore Municipality
du

BARRACKPORE MUNICIPALITY

B.T.Road, P.O. Talpukur, 24 Parganas (N).

☎ 2592-0221, 2592-5565, 2592-1067, 2592-2679(Fax)

Website - www.barrackporemunicipality.orgEmail: chairman@barrackporemunicipality.orgMemo No. 96/116/Health/BMMS/13-14/TDated. 05.08.2013

To

M/s. Roy Pharmacy,
52 (45), old Calcutta Road,
Kolkata - 700 123**Sub: Supply of medicine under Health Programme.**

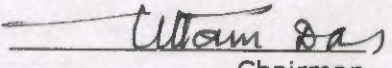
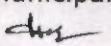
This is to inform you that your rate vide tender notice no. 116/Health/BMMS / 13-14/T dated - 29.07.2013 for Supply of medicine under Health programme at the rates as mentioned below offered by you is hereby accepted by this office. You are therefore requested to supply the following materials within 15 (fifteen) days from the date of receiving of this order.

Sl. No.	Name of the Item	Unit	Quantity	Rate (in Rs.)	Amount (in Rs.)
1.	Ringer Lacted (500 ml.)	500 ML.	1000	35.00 per 500 ml.	35,000.00
2.	Disposable Syringe 5 ml.	100 Pcs	5000	230.00 per 100 pcs	11,500.00
3.	Dextrose 5 % (500 ml.)	500 ml.	1000	22.00 per 500 ml.	22,000.00
4.	Phenol (5 Liter).	5 Ltr.	10	370.00 per 5 ltr.	3,700.00
5.	Gauge Than (5 mtr.)	5 Mtr.	40	70.00 per 5 mtr.	2,800.00

Total Rs.75,000.00

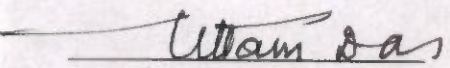
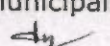
(Rupees seventy five thousand) only

Yours faithfully,


Chairman
Barrackpore Municipality


Copy forwarded for information: -

1. Vice-Chairman
2. Executive Officer
3. Assistant Engineer
4. Finance Officer


Chairman
Barrackpore Municipality


STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-1)/11/250****Date 30.11.2012****From : Director, SUDA****To : The Chairman
Barrackpore Municipality****Sub. : Strengthening of MH services for FY 2012-13.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 2,99,000/- for purchase of furniture & equipment and Rs. 75,000/- for purchase of drug; thus totaling Rs. 3,74,000/- (Rupees Three lakh seventy four thousand) only towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Pulse-Oxymeter (infant)	1
2	N – Meter (Eletrolyte)	1
3	Fowler Bed	5
4	Mattress	5
5	Pulse Oxymeter	2

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is **one time support** without creating any precedence.

Thanking you.

Yours faithfully,


Director, SUDA

Dt. .. 30.11.2012

SUDA-Health/527(Pt.-1)/11/250/1(4)

CC :

- 1. Executive Officer, Barrackpore Municipality**
- 2. Finance Officer, Barrackpore Municipality**
- 3. HO, Barrackpore Municipality**
- 4. Finance Officer, Health, SUDA**


Director, SUDA



Phone : 033-2593-2028, 033-2592-0429
Fax : 033-2592-6004

NORTH BARRACKPORE MUNICIPALITY

PALTA, POST : BARRACKPORE
DIST : NORTH 24 PARGANAS
PIN - 700120

Ref. No.859...../ NBM/Health (OS)

Date: 13.08.2013

From : Molay Ghosh
Chairman,
North Barrackpore Municipality



To : The Director,
State Urban Development Agency
ILGUS BHAVAN, H-C Block, Sector -III
Bidhannagar, Kolkata-700106

Sub: Strengthening of MH services for FY 2012-13.

Ref: Memo No. SUDA-Health/527(Pt.-I)/11/259, Dated. 30.11.2012 and SUDA-Health/527(Pt.-I)/11/148 (08), Dated. 31.07.2013.

Sir,

With reference to above I am pleased to forward herewith the copy of the Supply Order vides Ref. No. 840/NBM/Store (JBMM), dated., 12.08.2013 issued, observing the procurement norms of West Bengal Financial Rules in favour of H. Mukherjee & Banerjee Surgical Private Ltd., of 39-1, College Street, Kolkata-700073 for supply of 01 (One) O.T Table towards strengthening of MH service.

You are hereby requested to release of fund allotted in this regard.

Thanking you,

Yours faithfully,

Chairman

North Barrackpore Municipality

Chairman
North Barrackpore Municipality



Phone : 033-2593-2028, 033-2592-0429
Fax : 033-2592-6004

NORTH BARRACKPORE MUNICIPALITY

PALTA, POST : BARRACKPORE
DIST : NORTH 24 PARGANAS
PIN - 700120

Ref.No- 840 /NBM/Store(JBMM)

Dated- 12/08 / 2013

From: Sri Molay Ghosh
Chairman
North Barrackpore Municipality



To: H. Mukherjee & Banerjee Surgical Private Ltd
39-1, College Street
Kolkata- 700 073

Sub: Supply Order of following Equipment, for JBMM Hospital, Kanthadhar.
Ref. Quotation Notice No-789/NBM/Store dated-31/07/2013.

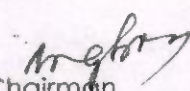
Dear Sir,

Your quotation No-54/2013-2014/08 dated-05/08/2013 for supply of following item as submitted by you in response to the aforesaid reference has been accepted with warranty period as mentioned therein.

Sl.No	Description	Quantity	Rate
1	Major O.T. Table "OTIMATE" C- Arm Compatible, Eccentric- Mounted Pillar, Electrically Operated with Feather touch Remote Control pad for Height, Lateral Tilt, Trendelenberg/Rev. & flex- Reflex Positions, Own Make-	One	Rs. 1,40,000/- (Rate is including Tax, Delivery & Installation charges)

Supply shall have to be made within 20(twenty) days from the date of receipt of this supply order, others terms and condition will remain unchanged as per Quotation Notice.

Thanking you,


Chairman

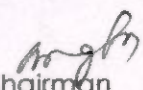
North Barrackpore Municipality
Chairman
North Barrackpore Municipality

Copy to: ✓ The Director SUDA

2. EO 3.FO

4. Superintendent JBMM Hospital

5. O.S.


Chairman

North Barrackpore Municipality
Chairman
North Barrackpore Municipality

SUDA**STATE URBAN DEVELOPMENT AGENCY****HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-1)/11/259****Date 30.11.2012****From : Director, SUDA****To : The Chairman
North Barrackpore Municipality****Sub. : Strengthening of MH services for FY 2012-13.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 1,30,000/- (Rupees One lakh thirty thousand) only for purchase of equipment & furniture towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	OT Table	01

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is **one time support** without creating any precedence.

Thanking you.

Yours faithfully,


Director, SUDA

SUDA-Health/527(Pt.-1)/11/259/1(4)**Dt. .. 30.11.2012****CC :**

- 1. Executive Officer, North Barrackpore Municipality**
- 2. Finance Officer, North Barrackpore Municipality**
- 3. AHO / UHIO, North Barrackpore Municipality**
- 4. Finance Officer, Health, SUDA**


Director, SUDA

Q) Tax &
Office : (953217) 234 481 / (234 324)
Resl. : (M) 9732572738
Guest House : (953217) 232 326
Night Shelter : (953217) 234 307

OFFICE OF THE MUNICIPAL COUNCILLORS OF TAKI

P.O. : TAKI * DIST. : NORTH 24 PARGANAS
URL : WWW.TAKI.Municipality In E-mail : chairman.takimunicipality@yahoo.co.in

No. 656/T.M.

Dated, Taki ... 26-8-2013

From : Sri Somenath Mukherjee

Chairman
Taki Municipality

To:

The Director, SUDA
SUDA Bhavan, Sector-III
Bidhannagar,
Kolkata- 700 091

Sub :- Prayer for release of FUND as speaks in the Memo No.-
SUD-Health/527/(Pt.-1)/11/148(08)
dated- 31/07/2013 for strengthening MH services

R/Sir,

I would like to inform on the above noted subject that the necessary procedure for purchasing equipment/furniture have been observed as per pertaining rules. You are therefore requested to disburse the required amount (Rs.1,54,100.00) as per NIQ for the said purpose.

We have procured following furniture/equipments as per procurement rule by observing Tender rule as per WB financial rule enclosed herewith.

Thanking you,

Yours faithfully,

Enclo: As stated.

SOMENATH MUKHERJEE
Chairman
TAKI MUNICIPALITY

OFFICE OF THE MUNICIPAL COUNCILLORS OF TAKI

P.O. : TAKI * DIST. : NORTH 24 PARGANAS
 URL : WWW.takimunicipality.in E-mail : chairman.takimunicipality@yahoo.co.in

No. 638/T.M

Dated, Taki 22/08/2013

From : Sri Somenath Mukherjee

Chairman
 Taki Municipality

To:

M/S Florence India

32, EZRA STREET, 6th Floor,
 Room No.-609
 Kolkata - 700 001

Ref. NIQ No.- 574/T.M.

Dated :- 3/08/2013

Being the approved supplier of Medical Equipments also your quotation has been adjudged the lowest among the submitted quotations and the same has been accepted by the undersigned. Therefore you are directed to supply the following equipments that strictly follows the NIQ within 07 (Seven) days from the date of issue of this order.

SD money, IT, VAT will be deducted from your vale if you are entitled for the same.

Payment will be realized according to the pertaining rules of the Municipality.

List of Equipments :-

Sl. No.	Item	Quantity Reqd.	Rate as mentioned in NIQ (Rs.)
1.	Pulse Oxymeter (3 way)	01	40000.00
2.	Computerised ECG Machine (Three Way)	01	40300.00
3.	OT Spot Light	01	7000.00
4.	Foetal Doppler (Digital)	01	7800.00
5.	Steel Almira	01	9000.00
6.	Oxygen Concentrator	01	50000.00
TOTAL=			1,54,100.00

SOMENATH MUKHERJEE
 Chairman
 TAKI MUNICIPALITY

Chairman
 Taki Municipality

MEMO NO.:

DATE:-

Copy forwarded for information and necessary action to :

1. Health Officer, Taki Municipality, Taki, North 24 Parganas.
2. Sanitary Inspector, Taki Municipality, Taki, North 24 Pgs.
3. Accountant-in-charge, Taki Municipality
4. Accounts Assistant, Health Department, Taki Municipality.
5. Store Keeper, Health Department, Taki Municipality

SOMENATH MUKHERJEE
 Chairman
 TAKI MUNICIPALITY

(MTH)

Office : (953217) 234 481 / 233 324
 Res: (M) 9732572736
 Guest House : (953217) 233 328
 Night Shelter : (953217) 234 007

OFFICE OF THE MUNICIPAL COUNCILLORS OF TAKI

P.O. : TAKI - DIST. : NORTH 24 PARGANAS
 URL : WWW.takimunicipality.in E-mail : chairman.takimunicipality@yahoo.co.in

No. 638 / T. M.

Dated, Taki ... 22 ... 08 ... 2013

From : Sri Somenath Mukherjee

Chairman
 Taki Municipality

To:

M/S Florence India

32, EZRA STREET, 6th Floor,
 Room No.-609
 Kolkata - 700 001

Dated :- 3/08/2013

Ref. NIQ No.- 574/T.M.

Being the approved supplier of Medical Equipments and your quotation has been adjudged the lowest among the submitted quotations the same has been accepted by the undersigned. Therefore you are directed to supply the following equipments strictly follows the NIQ within 07 (Seven) days from the date of issue of this order.
 SD money, IT, VAT will be deducted from your value if you are entitled for the same.

Payment will be realized according to the pertaining rules of the Municipality.

List of Equipments :-

Sl. No.	Item	Quantity Reqd.
1.	Pulse Oxymeter (3 way)	01 X 40000
2.	Computerised ECG Machine	01 X 40300
3.	OT Spot Light	01 X 7000
4.	Fetal Doppler (Digital)	01 X 7800
5.	Steel Almirah	01 X 9000
6.	Oxygen Concentrator	01 X 50000
		154100

SOMENATH MUKHERJEE
 Chairman
 TAKI MUNICIPALITY

MEMO NO.:

DATE:-

Copy forwarded for information and necessary action to :

1. Health Officer, Taki Municipality, Taki, North 24 Parganas
2. Sanitary Inspector, Taki Municipality, Taki, North 24 Pgs.
3. Accountant-in-charge, Taki Municipality
4. Accounts Assistant, Health Department, Taki Municipality
5. Store Keeper, Health Department, Taki Municipality

SOMENATH MUKHERJEE
 Chairman
 TAKI MUNICIPALITY

Fax & ①
Office : (953217) 234 481 / 233 324
Resi. : (M) 9732572736
Guest House : (953217) 233 328
Night Shelter : (953217) 234 007

OFFICE OF THE MUNICIPAL COUNCILLORS OF TAKI

P.O. : TAKI * DIST. : NORTH 24 PARGANAS

URL : www.takimunicipality.in E-mail : cmofm@gmail.com

No. 255/T.M.

Dated, Taki 22-5-2013

From : *Sri Somenath Mukherjee*

*Chairman
Taki Municipality*

To:
The Director, SUDA
ILGUS BHAVAN
H-C Block, Sector - III
Bidhannagar
Kolkata - 700 091



**Sub:- Re-allotment of fund for the FY - 2013-14 for
strengthening of MH services**

Vide your Memo No.:- Health/527(Pt.-I)/11/264 dt.: 30-11-2012

Sir,

I am very sorry to inform you that we could not utilize the fund of Rs.1,54,500/- (Rupees One lakh Fifty thousand Five hundred) allotted vide Ref. Memo No.: Health/527(Pt.-I)/11/264 dt.: 30-11-2012 in time due to lack of procedural unanimity in the part of administration. Now, as this has been overcome, I request the favour of your kind consideration that the fund may please be re-allotted in favour of us which will be very much helpful for strengthening MH services in our Health Unit.

I undertake to ensure you that the financial rules regarding procurement and other formalities would be followed as per norms.

Under these circumstances, I shall be highly pleased if you allot the same once again for the Financial Year 2013-14 as early as possible and oblige.

Thanking you,

Yours faithfully,

(SOMENAATH MUKHERJEE)

CHAIRMAN
TAKI MUNICIPALITY

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/527(Pt.-1)/11/264**Date **30.11.2012****From : Director, SUDA****To : The Chairman
Taki Municipality****Sub. : Strengthening of MH services for FY 2012-13.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 1,54,500/- (Rupees One lakh fifty four thousand five hundred) only for purchase of equipment & furniture towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Pulse Oxymeter (3 way)	1
2	Computerised ECG Machine	1
3	OT Spot Light	1
4	Foetal Doppler (Digital)	1
5	Steel Almirah	1
6	Oxygen Concentrator	1

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Thanking you.

Yours faithfully,


Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/527(Pt.-1)/11/264/1(4)

Dt. .. 30.11.2012

CC :

- 1. Executive Officer, Taki Municipality**
- 2. Finance Officer, Taki Municipality**
- 3. AHO, Taki Municipality**
- 4. Finance Officer, Health, SUDA**


Director, SUDA

Office Of The
Rajarhat - Gopalpur Municipality
RAGHUNATHPUR, KOLKATA-700 059

ESTD. - 1994

TAPASH CHATTERJEE
CHAIRMAN

LOKENATH DEB
VICE-CHAIRMAN



Ref. No. 1998/R.G.M. - 227/13

Date. 03.09.2013

To,
The Director, SUDA
Health Wing
ILGUS Bhavan



Subject: Submission of copy of work order for procurement of equipment for
Vidyasagar Matrisadan-O- Haspatal.

Ref. No: SUDA-Health/527(Pt-1)/11/148(08) dated 31.07.2013

Sir,

We have purchased the following equipment as on work order by observing
the tender rules as per West Bengal Financial Rules.

Please acknowledge the receipt.

Thanking you,

Yours faithfully

Tapash Chatterjee
Chairman
Rajarhat Gopalpur Municipality

Phone : 2500-6531
Fax Phone : 2500-7560

Office Of The
Rajarhat - Gopalpur Municipality
RAGHUNATHPUR, KOLKATA - 700 059

ESTD. - 1994

CHAIRMAN :
TAPASH CHATTERJEE

VICE - CHAIRMAN :
LOKENATH DEB



Ref. No. 1171/R.G.M.-49/13

Date...25.06.2013...

To:
P. Bhogilal Pvt. Ltd.
119A, Chittaranjan Avenue,
Kolkata 700 073
Tel: 9830048167, 4028 0036


WORK ORDER

This is for your information that 'P. Bhogilal Pvt. Ltd. Vide quotation no: T-16/13-14 dated 18-4-2013' has been selected for supplying the following items at Vidyasagar Matrisadan O Haspatal, Sir Ramesh Mitra Road, Narayanpur, Kolkata 136 at the following approved rates.

S. No	ITEM	QUANTITY	RATE (₹)	TOTAL(₹)
1	Suction Machine ¼ HP	1	6,600.00	6,500.00
2	Pulse Oxymeter (ARGUS OXM PLUS)	1	23,000.00	23,000.00
3	Diathermy Machine with accessories (Shalya Easy +)	1	1,09,490.00	1,09,490.00
4	OT Table with standard Accessories COGNATE make Model: SS-1000	1	1,90,000.00	1,90,000.00
	Add 5% VAT			16,449.50
	TOTAL (Round Off)			3,45,440.00

Rupees Three Lac Forty Five Thousand Four Hundred Forty Only.

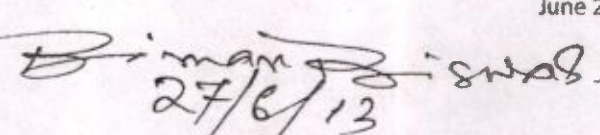
The items must be delivered within fifteen from the date of the receipt of the purchase order.


Mr. Tapash Chatterjee
Chairman,
Rajarhat Gopalpur Municipality

June 25, 2013.

Copy to.
Chairman

Rajarhat Gopalpur Municipality

- 
27/6/13
1. Vice Chairman and CIC(Health) Rajarhat Gopalpur Municipality
 2. Executive Officer, Rajarhat Gopalpur Municipality
 3. Finance Officer, Rajarhat Gopalpur Municipality
 4. Health Officer, Rajarhat Gopalpur Municipality
 5. Accountant, Rajarhat Gopalpur Municipality
 6. Medical Superintendent, Rajarhat Gopalpur Municipality DBNH & VMOH
 7. Assistant Engineer

Mr. Tapash Chatterjee
Chairman,
Rajarhat Gopalpur Municipality

Office Of The
Rajarhat - Gopalpur Municipality
RAGHUNATHPUR, KOLKATA-700 059

ESTD. - 1994

TAPASH CHATTERJEE
CHAIRMAN

LOKENATH DEB
VICE-CHAIRMAN



Ref. No. 1840/R.G.M.-42/13

Date..21.08.2013



To
The Director SUDA
Health Wing
ILGUS BHAWAN
West Bengal.

Sub:- Submission of copy of work order
Ref no:-SUDA-Health/527(pt-1)/11/148(08) Date:31.7.2013

Sir,

Please find, enclosed here with the Xerox copy of work order of procurement of equipments for strengthening of MH services for FY 2012-2013. Kindly acknowledge the receipt.

Thanking you
Yours faithfully


Tapash Chatterjee
Chairman
Rajarhat Gopalpur Municipality

Office Of The Rajarhat - Gopalpur Municipality

RAGHUNATHPUR, KOLKATA - 700 059

ESTD. - 1994

Phone : 2500-6531
Fax Phone : 2500-7560

CHAIRMAN :
TAPASH CHATTERJEE

VICE - CHAIRMAN :
LOKENATH DEB



Ref. No. 117/R.G.M.-49/13

Date...25.06.2013...

To:
P. Bhogilal Pvt. Ltd.
119A, Chittaranjan Avenue,
Kolkata 700 073
Tel: 9830048167, 4028 0036

WORK ORDER

This is for your information that 'P. Bhogilal Pvt. Ltd. Vide quotation no: T-16/13-14 dated 18-4-2013' has been selected for supplying the following items at Vidyasagar Matrisadan O Haspatal, Sir Ramesh Mitra Road, Narayanpur, Kolkata 136 at the following approved rates.

S. No	ITEM	QUANTITY	RATE (₹)	TOTAL(₹)
1	Suction Machine ¼ HP	1	6,600.00	6,500.00
2	Pulse Oxymeter (ARGUS OXM PLUS)	1	23,000.00	23,000.00
3	Diathermy Machine with accessories (Shalya Easy +)	1	1,09,490.00	1,09,490.00
4	OT Table with standard Accessories COGNATE make Model: SS-1000	1	1,90,000.00	1,90,000.00
	Add 5% VAT			16,449.50
	TOTAL (Round Off)			3,45,440.00

Rupees Three Lac Forty Five Thousand Four Hundred Forty Only.

The items must be delivered within fifteen from the date of the receipt of the purchase order.

Mr. Tapash Chatterjee
Chairman,
Rajarhat Gopalpur Municipality

June 25, 2013.

Tapash Chatterjee Copy to.
Chairman

Rajarhat Gopalpur Municipality

- Biman Biswas*
27/6/13
1. Vice Chairman and CIC(Health) Rajarhat Gopalpur Municipality
 2. Executive Officer, Rajarhat Gopalpur Municipality
 3. Finance Officer, Rajarhat Gopalpur Municipality
 4. Health Officer, Rajarhat Gopalpur Municipality
 5. Accountant, Rajarhat Gopalpur Municipality
 6. Medical Superintendent, Rajarhat Gopalpur Municipality DBNH & VMOH
 7. Assistant Engineer

Mr. Tapash Chatterjee
Chairman,
Rajarhat Gopalpur Municipality

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-1)/11/262****Date 30.11.2012****From : Director, SUDA****To : The Chairman
Rajarhat Gopalpur Municipality****Sub. : Strengthening of MH services for FY 2012-13.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 3,45,440/- (Rupees Three lakh forty five thousand four hundred forty) only for purchase of equipment & furniture towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Sucker Machine	3
2	Pulse Oxymeter	2
3	Diathermy	1
4	OT Table	1
5	Steel Almirah	2
6	Revolving Chairs	6
7	Mattress	14
8	Scissors Straight 6.5"	12
9	Artery Forceps 6.0"	12
10	Tissue Forceps 7"	12
11	Dissecting Forceps (Tooth) 6"	12
12	Dissecting Forceps (Non Tooth)	12
13	Sponge Holding Forceps 9"	12
14	Needle Holders 7"	12
15	Scissors Sharp Point Straight 6"	12
16	Scissors Sharp and blunt 6"	12
17	Scissors Curved 8"	12

You are requested to undertake such procurement observing West Bengal Financial Rules by January, 2013. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

Contd. to P-2.

- 2 -

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Thanking you.

Yours faithfully,



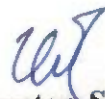
Director, SUDA

Dt. .. 30.11.2012

SUDA-Health/527(Pt.-1)/11/262/1(4)

CC :

1. Executive Officer, Rajarhat Gopalpur Municipality
2. Finance Officer, Rajarhat Gopalpur Municipality
3. HO, Rajarhat Gopalpur Municipality
4. Finance Officer, Health, SUDA



Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. **SUDA-Health/527(Pt.-1)/11/148(08)**

Date **31.07.2013**

From : Director, SUDA

**To : The Mayor
Siliguri Municipal Corporation**

The Chairman

**Ashokenagar Kalyangarh / Barrackpore / Maheshtala / North Barrackpore /
Rajarhat Gopalpur / Rishra / Taki Municipality**

**Sub. : Strengthening of MH services for FY 2012-13
- Submission of copy of Work Order.**

Sir / Madam,

I am to refer to this office earlier communication (as detailed in the enclosure) with regard to undertaking procurement of equipment / furniture / drugs observing procurement norms of West Bengal Financial Rules by January, 2013 and submission of copy of work order to the undersigned for release of fund.

From office record it is revealed that copy of work order is yet to be received from your ULB. You are requested to submit the same by 08.08.2013 for release of fund from this end.

If procurement process has not yet been undertaken by your ULB, you are also requested to report the same by 08.08.2013.

Thanking you.

Yours faithfully,

Encl. : As stated.


Director, SUDA

Enclo. :

ULBs	Memo No. & Date	Sanctioned Amount by the DHFW		
		Purchase of Equipment & Furniture	Purchase of Drug	Total
Ashokenagar Kalyangarh	SUDA-Health/527(Pt.-1)/11/248 dt. 30.11.2012	2,50,000	-	2,50,000
Barrackpore	SUDA-Health/527(Pt.-1)/11/250 dt. 30.11.2012	2,99,000	75,000	3,74,000
Maheshtala	SUDA-Health/527(Pt.-1)/11/257 dt. 30.11.2012	1,33,740	1,15,000	2,48,740
North Barrackpore	SUDA-Health/527(Pt.-1)/11/259 dt. 30.11.2012	1,30,000	-	1,30,000
Rajarhat Gopalpur	SUDA-Health/527(Pt.-1)/11/262 dt. 30.11.2012	3,45,440	-	3,45,440
Rishra	SUDA-Health/527(Pt.-1)/11/263 dt. 30.11.2012	2,74,710	-	2,74,710
Taki	SUDA-Health/527(Pt.-1)/11/264 dt. 30.11.2012	1,54,500	-	1,54,500
Siliguri	SUDA-Health/527(Pt.-1)/11/265 dt. 30.11.2012	3,20,646	-	3,20,646

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/527(Pt.-1)/11/172(04)

Date 29.08.2013

From : Director, SUDA

To : The Mayor
Siliguri Municipal Corporation

The Chairman
Ashokenagar Kalyangarh / Maheshtala / Rishra Municipality

Sub. : Strengthening of MH services for FY 2012-13
- Submission of copy of Work Order - Reminder - 1.

Ref. : This office communication vide no. SUDA-Health/527(Pt.-1)/11/148(08)
dt. 31.07.2013.

Sir / Madam,

I am to refer to this office earlier communication (as detailed in the enclosure) with regard to undertaking procurement of equipment / furniture / drugs observing procurement norms of West Bengal Financial Rules by January, 2013 and submission of copy of work order to the undersigned for release of fund.

From office record it is revealed that copy of work order is yet to be received from your ULB. You are requested to submit the same by 06.09.2013 for release of fund from this end.

If procurement process has not yet been undertaken by your ULB, you are also requested to report the same by 06.09.2013.

Thanking you.

Yours faithfully,

Enclo. : As stated.


Director, SUDA

Enclo. :

ULBs	Memo No. & Date	Sanctioned Amount by the DHFW		
		Purchase of Equipment & Furniture	Purchase of Drug	Total
Ashokenagar Kalyangarh	SUDA-Health/527(Pt.-1)/11/248 dt. 30.11.2012	2,50,000	-	2,50,000
Maheshtala	SUDA-Health/527(Pt.-1)/11/257 dt. 30.11.2012	1,33,740	1,15,000	2,48,740
Rishra	SUDA-Health/527(Pt.-1)/11/263 dt. 30.11.2012	2,74,710	-	2,74,710
Siliguri	SUDA-Health/527(Pt.-1)/11/265 dt. 30.11.2012	3,20,646	-	3,20,646

To

● The Director SUDA for information and necessary action

Ref . No :- HAU / 79 /RSM Dated 10.07.2013

(Annexure – III)

FORM SR -330A

of the Treasury Rules, West Bengal and the Subsidiary Rules made there under , Volume-1

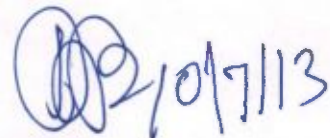
FORM OF UTILISATION CERTIFICATE

Sl.No.	Letter No & Date	Draft Details	Amount
1	(a) SUDA –Health /527 (Pt.-1) /11/208 Dated - 16.11.2011 (b) SUDA –Health /527(Pt.-1) / 11 /19 Dated – 24.04.12.12	DD No.060254 Dt. 23.04.12 on SBI,Salt Lake Br.	Rs.12,10,500=00

Certified that out of Rs. 12,10,500=00 grant –in-aid sanctioned during the year 2011-12 and received during the F.Y- 1012-13 towards procurement of Equipments etc. for Maternity Home under letters no. given above and the fund has been utilized fully for which it was sanctioned and there is no un-utilised balance in hand at the end of 10.07.13.

Certified that I have satisfied myself that the conditions on which the grant –in-aid was sanctioned have been duly / are being fulfilled and that I have exercised the following check to see that the money was actually utilized for which it was sanctioned .

1. UC submitted by ULB
2. Original Bill,Receipt & Vouchers.
3. Physical Progress.



(INDUBHUSAN BHATTACHARYYA)

(Chairman)

Rajpur-Sonarpur Municipality.

Chairman
Rajpur-Sonarpur
Municipality

BARRACKPORE MUNICIPALITY

B. T. Road, P.O. Talpukur, North 24 Parganas

Memo No : CMBM/Health/12-13/015

Dated : 02/01/2013

From : **Uttam Das**
Chairman

TO befile



To
The Director
S.U.D.A
ILGUS BHAWAN
Kolkata - 700091

Ref: Your memo No. SUDA-Health / 527(Pt-1)/ 11/ 250 dt. 30/11/12.


Sir,

With reference to above, I like to inform you that , we had procured Equipments & Drugs(as specified from your end) for a total Rs.374000/- (Rupees: Three lac seventy-four thousand only.)

Now I am forwarding herewith the following for the Release of the said Fund at the earliest:

- 1) The Statement of Expenditure (SOE).
- 2) Photocopies of Receipted Bills duly authenticated.
- 3) Endorsement of Bill on the Stock ledger entry.

With thanks,



Chairman
Barrackpore Municipality

Enclo: As stated.

STATEMENT OF EXPENDITURE

Sl. No.	Bill No. & Date	Chelan No.	Particulars of Equipments Purchased	Quantity	Rate Each	Amount (Rs.)
1	39 20/12/2012	88 Date. 20/12/12	Pulseoximeter(Infant)	1	40560/-	40560.00
2			Pulseximeter,	2	40560	81120.00
3			Fowler bed	5	16640/-	83200.00
4			Mattress	5	2600/-	13000.00
5			Na-meter(Electrolyte),	1	81120/-	81120.00
<u>TOTAL-</u>						<u>2,99000.00</u>

Rupees: Two Lac. Ninety-nine thousand only.


CHAIRMAN
BARRACKPORE MUNICIPALITY

STATEMENT OF EXPENDITURE

Sl No.	Bill No. & Date	Chelan No.	Particulars of Drugs Parched	Batch No.	Exp. Date	Qnty.	Per	Rate	Amount (Rs.)
1	87 Dt. 24.12.12	89 24.12.12	Ringer Lactate	302315132	09/15	1150	500 ml	35.00	40250.00
2			Doxtnose 5%	302015023	08/15	750	500 ml	22.00	16500.00
3			D/N/S	301115461	09/15	500	500 ml	22.50	11250.00
4			N/S	202511837	09/15	350	500 ml	20.00	7000.00
TOTAL Bill -									75000.00

Rupees: Seventy-five thousand only.

Uttam Das
CHAIRMAN
BARRACKPORE MUNICIPALITY

BILL



STAR ELECTRONICS

N-E Noapara, Barasat, Kolkata - 700125 Dial : 9830976743

To The Chairman,
Barrackpore Municipality
Barrackpore, 24 pgs. (N).

Bill No 39.
Dated 20/12/2012.
Challan No. 88.
Dated 20/12/2012.

Your Work order No. 156/81/Health/12-13

Dated: 18/12/2012.

Sl. No.	Description of Goods / Job / Equipment / Repairing	Quantity	Rate Each	AMOUNT Rs. P.	
1.	Pulseoximeter (Infant).	1 nos.	40560/-	40560	00
2.	Pulseoximeter,	2 nos	40560/-	81120	00
3.	Fowler bed,	5 nos.	16640/-	83200	00
4.	Matress.	5 nos	2600/-	13000	00
5.	Na-meter (Electrolyte),	1 nos.	81120/-	81120	00

Passed for Payment
Uttam Das
07/01/12
CHAIRMAN
BARRACKPORE MUNICIPALITY

Rupees: Two Lakh Ninty nine Thousand only. TOTAL - 2,99,000=00

VAT No. :- 19658738092
CST No. :- 19658738286
PAN No. :- NJLPG7409D

Payable of Calcutta Bank only.

Attested
Exanda
S.C. Mandal
Executive Officer
Barrackpore Municipality

E. & O. E.
Prasenjit Dutta
For STAR ELECTRONICS

02.01.13

CHALLANNo. 188.
Date 20/12/2012.To The Chairman,
Barrackpore Municipality
Barrackpore, 24 parganas (N),**STAR ELECTRONICS**

N-E Noapara, Barasat, Kolkata - 700125 Dial : 9830976743

Your Order Ref. 156/81/Health/12-13 Dated 18/12/2012.

QUANTITY	DESCRIPTION OF GOODS / JOB / EQUIPMENT / REPAIR WORK
1 nos.	Pulseoximeter (Infant),
2 nos.	Pulseoximeter.
5 nos.	Fowler bed.
5 nos.	Matress.
1 nos.	Na. meter (Electrolyte),
<i>Passed for Payment</i> <i>Utam Das</i> <i>02/01/13</i> CHAIRMAN BARRACKPORE MUNICIPALITY	

Attested
S.C. Mandal
S.C. Mandal
Executive Officer
Barrackpore MunicipalityFor STAR ELECTRONICS
Prasjit Dutta

BILL

M/s. A. S. ENTERPRISE

Wholesale Medicine & Surgical Instruments Suppliers

Vill. Jaffarpur, P.O. Nona-Chandanpukur

Barrackpore, Kolkata - 700 122

(M) : 9830201891

OUR DL No. 4961 SW - 4951 SBW

No.

87

Date 24.12.12

Messrs

Chairman

Barrackpore Municipality

Address

B. P. Road, Barrackpore

Memo No.

SUDA-Health/527(Pt-1)/11/250

Sl. No.	DESCRIPTION	Batch No.	Exp. Dt.	Qnty.	Per	Rate	Amount Rs.	P.
1.	Ringer Lactal. (7)	302315732	09/15	1150	500ml	35.00	40,250	00
2.	Dextrose 5%. (5)	302015023	08/15	750	500ml	22.00	16,500	00
3.	D/N/S. (17)	301115461	09/15	500	500ml	22.50	11,250	00
4.	N/S. (27)	205211837	09/15	350	500ml	20.00	7,000	00
	Medicines received in good condition and Entry made in page no 51 F, 17 & 27 of Stock Register							
	24.12.12							
	Passed for Payment							
	CHAIRMAN BARRACKPORE MUNICIPALITY							
	Rupees Seventy Five Thousand only							
	Bill Amount							
	Round						75,000	00

BCDA No. : 24N/6322

Validity : 06.08.2016

Attested

S.C. Mandal

Executive Officer

Barrackpore Municipality

M/s. A. S. ENTERPRISE

Chairman

Signature

Proprietor

CHALLAN

M/s. A. S. ENTERPRISE

Wholesale Medicine & Surgical Instruments Suppliers

VIII. Jaffarpur, P.O. Nona-Chandanpukur

Barrackpore, Kolkata - 700 122

(M) : 9830201891

OUR DL No. 4961 SW - 4951 SBW

No. **89**

Date **24.12.12**

Messrs

Chairman

Barrackpore Municipality

Address

B. T. Road, Barrackpore

Memo No.

SUDA-Health/527(Pt-1)/11/250.

Dated - 30.11.2012.

Sl. No.	DESCRIPTION	Page No.	Quantity	Batch No.	Mfg. Date	Exp. Date
1.	Linger Lacted	(7)	1150	302315132	10/12	09/15
2.	Dextrose 5%	(5)	750	302015023	09/12	08/15
3.	D/N/S	(17)	500	301115461	10/12	09/15
4.	N/S	(27)	350	205211837	10/12	09/15
Medicines received in good condition and entry done in page no. 5, 7, 17 & 27 of Stock register.						
<i>[Signature]</i> 24.12.12						
Entry Made in the Stock Register						
Passed for Payment						
<i>[Signature]</i> 02/01/13						
CHAIRMAN BARRACKPORE MUNICIPALITY						

BCDA No. : 24N/6322

Validity : 06.08.2011

Please Sign & Return

Attested

[Signature]

S.C. Mandal

Executive Officer
Barrackpore Municipality

M/s. A. S. ENTERPRISE

[Signature]
Signature

Proprietor

KHARAGPUR MUNICIPALITY

I.P.P. - VIII (EXTN)

Memo No. : 52

I.P.P. VIII (Extn) -I-69/12

Date 27.3.12

To,

The Director, SUBA,
IL&US Bhavan,
H-C Block, Sector-III,
Salt Lake,
Kolkata-700106.

PO (H)
D
28/3/12

Sir,

I am enclosing the copy of the order No.-51, IPP-VIII(Extn) I.69/12 dt.27.3.12 issued in favour of M/S Hospital Supply Company Ltd, Kolkata for supply of one Laparoscopic Machine at B. 1400135/- (Rupees Fourteen lakh one hundred thirty five)only being the lowest rate, which exceeds the allotted amount by B.135/-(Rupees one hundred thirty five)only,. The excess amount shall be paid out of Municipal fund.

It is requested, you would release the fund to enable us to make payment by 31.03.2012.

yours faithfully,



Encl: Stated.

(Jahar Lal Paul)
Chairman
Kharagpur Municipality



OFFICE
OF THE COUNCILLORS
KHARAGPUR MUNICIPALITY

No:- 51, IPP-VIII(Extn)-I-69/12 dt.27/03/2012

To,

M/S, HOSPITAL SUPPLY COMPANY,
111, Chittaranjan Avenue,
Kolkata-700073,
India.

ORDER FOR SUPPLY

Order is hereby issued being the lowest quotationer for supply of
One Laparoscopy Machine specified under the head "specification and on
terms and conditions referred to under the head "Terms and conditions".

SPECIFICATIONS

Rs. 1400135/-

QTY PRICE

Single chip Camera

Telecom IX II-I-chip----- video printers	1
Telecom-G I-chip e-mount camera-----colour system	
PAL C-mount lens, soakable, focal length* 30 mm	
Forward oblique Telescope 30'---- colour code:red.	

LAPAROFLATOR

Eleefronic Endoflator set----- package of 10 pieces	
High pressure Hose----- length 55 cm.	
CO2 Bottle, empty with pin-index connection	1
Veress Pneumoperitoneum Needle with spring loaded bleant styli----- length.	1
Trocar, size 11mm-----valve.	1
Suction and Irrigation-----length 36 mm	1
Clickline Kelly----Forceps-----insert.	1

-- 2 --

	QTY	PRICE
Clickline Metzenbaum Forceps Insert,	1	
Clickline----- trocar size 6mm.	1	
L Hook 5 mm-----		
Claw Forcep 10 mm clip application 10mm-----	1 (each)	
Spotula electrode 5 mm-----		
Needle Holder 5 mm----- Knot pushes----		

HYSTERECTOMY SURGERY SET.		
.....		
Hopkins II Forward oblique Telescope 30° 4 mm length 30 cm----- code red.	1	
Working Element... outside the sheath,	1	
Resecforcope----26040 DB	1	
Standard obturator---26050 SC.	1	

L G B Monitor,	1	

Total Rs.-		1400135/-

TERMS AND CONDITIONS

- The Machine including accessories and hand-instruments should be supplied to the Hospital at Debalpur, Kharagpur, Kharagpur (Town) PS and installed thereat free of cost, within 10 days from the date of receipt of the order.
- Annual maintenance, free of cost, for one year from the date of installation and thereafter at a find charge of Rs.----- per month annual to be done by the Company.
 - Warranty by the for 1 (one) year from the date of completion of installation.
 - Any item found malfunctioning shall be replaced within the period of warranty.

COND... 3.

--- 3 ---

5. The bill accompanied with receipted challan and due certificate by the G S M S-in-charge as to quality and quantity of the instruments and installation thereof should be submitted to the Chairman within seven days from the date of completion of installation.
7. Any point of dispute as regards above ~~condition~~ condition shall be arbitrated by the GMS(H) or an officer appointed by him.



11/28/3/12
(J. L. Paul)
Chairman
Kharagpur Municipality

Office of the Burdwan Municipality

G.T. Road, Burdwan, West Bengal, India – 713101

Phone: +91 342 2662518 / 2664121 / 2662777 | Fax: +91 342 2560717

Email: info@burdwanmunicipality.gov.in | Website: www.burdwanmunicipality.gov.in

Memo No: -

Date: -

From: **Chairman
Burdwan Municipality**

To: **Indigenous,
41/B/3, Gariahat Road(S)
Kolkata- 700 031**

Sub: Order for of Laparoscopy Equipments and Laparoscopic Hand Equipments

This is to inform you that your offer for of Laparoscopy Equipments and Laparoscopic Hand Equipments under grant from SUDA for Pranab Batabyal Smriti Matrisadan, IPP VIII (Ext.) Project Office for IPP VIII (Ext.)project, Jhurjhure Pool, Burdwan under your memo no 31/11-12 14/02/2012 has been accepted under following terms and conditions: -

Description	Qty	Amount
Laparoscopy Equipments and Laparoscopic Hand Equipments	1 Set	Rs. 16,87,650.00

(Rupees Sixteen Lakhs Eighty Seven Thousands Six Hundred Fifty Only)

1. Supply to be made within 4 to 6 weeks from receipt of this order.
2. The rate includes all taxes, duties as applicable and freight, forwarding and delivery charges at site
3. Payment will be made on satisfactory delivery of the machine.
4. Warranty: 12 months from date of commissioning or 15 months from date of delivery whichever is earlier

**Chairman
Burdwan Municipality**

Memo No: - 281/6(1)1/x11-9

Date: - 27.03.2012

Copy forwarded to: -

1. The Director, State Urban Development Authority, Health Wing, ILGUS Bhaban, H-C Block, Sector-III, Bidhannagar, Kolkata – 700 091
2. Dr. Sibani Goswami, Health Expert, State Urban Development Authority, Health Wing, ILGUS Bhaban, H-C Block, Sector-III, Bidhannagar, Kolkata – 700 091
3. V.C., Burdwan Municipality
4. E.O., Burdwan Municipality /F.O., Burdwan Municipality
5. H.O., Burdwan Municipality/ Accountant, Burdwan Municipality.
6. In Charge, IPP-VIII

**Chairman
Burdwan Municipality**

Work Order for LAP from Burdwan Municipality

Burdwan Municipality • info@burdwanmunicipality.gov.in

dfidhw@gmail.com

date Tue, Mar 27, 2012 at 5:13 PM

subject Work Order for LAP from Burdwan Municipality

Important mainly because of the words in the message.

Pls find the attachment

Work Order for LAP.jpg
448K View Download

<https://mail.google.com/mail/?ui=2&view=bsp&ver=ohhl4rw8mbn4>

3/28/2012

Ph. No.2632-3429
Fax No. 033-2632-6257

e-mail:champdanyulb@gmail.com

OFFICE OF THE COUNCILLORS OF CHAMPDANY
MUNICIPALITY

1, POURA BHAWAN ROAD, CHAMPDANY
P.O.-BAIDYABATI, DIST.-HOOGHLY, PIN-712222

Memo No. 1408

Dated, Champdany the 5th March 2012

From : Shri Suresh Mishra, Chairman
Champdany Municipality

To
The Director, SUDA
Ilug Bhavan
Bidhan Nagar Calcutta-700 091

PO (H)
26/3/12



Sub: Strengthening of MH Services.

Re: Your Letter No. SUDA-Health/527(Pt.-1)/11/284 dated 20/01/2012

Dear Sir,

This is with reference to your above letter. Please find enclosed the Utilization Certificate as per 330A Form for the purchase of Equipment & Furniture towards strengthening of MH Services.

Yours faithfully,

Chairman
Champdany Municipality



Name of the Urban Local Body: **Champdany Municipality**

Name of the Scheme: **Purchase of Equipment & Furniture towards strengthening of MH Services 2011-2012.**

UTILISATION CERTIFICATE AS PRESCRIBED IN S.R. 330A OF THE TREASURY RULES, WEST BENGAL AND THE SUBSIDIARY RULES MADE THE REUNDER VOLUME -1

Certified that out of **Rs. 4, 29, 416/-**-(Rupees Four lakh twenty nine thousand four hundred sixteen only)

Grant –in Aid sanctioned during the year 2011-2012 in favour of Champdany Municipality under Municipal Affairs Department, Government of west Bengal, and Order No SUDA- Health/ 527(Pt.-1)/11/284 dt.20/01/2012 given in the margin and **Rs...Nil** on account of unspent balance of the previous year , a sum of **Rs.4,29,416/-** has been utilized for the purpose purchase of equipment & furniture towards strengthening of MH services for which it was sanctioned and that the balance of **Rs....Nil...**remaining unutilized at the end of the year has been surrendered to Government (vide No.....Dated.....) and will be adjusted towards the grants –in-aid payable during the next year.

Sl. No.	Name of the Scheme	Govt. Order No.& Date	Amount Rs.
01	Purchase of Equipment & Furniture towards strengthening of MH Services.	SUDA–Health /527 (Pt.-1) /11/ 284 DT. 20/01/2012	4, 29, 416.00
		TOTAL	4, 29, 416.00

2 Certified that I have satisfied myself that the conditions on which of the grant–in–aid was sanctioned have been duly fulfilled /are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

Kinds of check exercised:

Kinds of check exercised

- 1) Payment Bill duly checked by me.
- 2) 100% signature duly checked by me.
- 3) Payment duly made in my presence.

Signature.....
Chairman

Designation.....**Champdany Municipality**

Date.....

- The grant-in-aid was shown under T.V.No.....Dated.....
- Head of Account.....2217



PO (H)
[Signature]

TENDER NOTICE

Pre-qualification notice inviting specifications of multifunctional Laparoscopic Machine in a multispeciality Municipal Hospital is hereby issued for submission of response to the Chairman, Kharagpur Municipality on or before 29.02.2012 (2 P.m.). For details contact- 9434690956/ 9434217987/9735227819.



[Signature]
Chairman
Kharagpur Municipality

NO:-33, IPP-VIII(Extn)-I-69/12 dt.21.2.12.

Cepy forwarded for information and necessary action to:-

1. Sub-Divisional Officer, Kharagpur.
2. The Superintendent, Sub-Divisional Hospital, Kharagpur.
3. The Block Land & Land Reform Officer, Kharagpur-I/II.
4. The Project Officer (Health) S U D A. Kolkata.
5. The Editor, The Statesman Patrika. / PRATIDIN
6. The Editors, Local dailies.

[Signature]
Chairman
Kharagpur Municipality



OFFICE OF THE
BALURGHAT POURA HOSPITAL & MATRI SADAN
IPP-VIII (EXTENSION)



BALURGHAT MUNICIPALITY

BALURGHAT * DAKSHIN DINAJPUR

Phone-03522-270557

Memo No.221/IPP-VIII (Extn.)/36/12

Date:- 06.03.2012

✓ The Director
SUDA, Health Wing.
ILGUS BHAWAN.
H. C. Block, Sec-III
Bidhan Nagar, Kol-106

Fax 033-2334-7805



POC(H)
[Signature]

Sub: - Submission of Utilization Certificate in respect of Procurement of equipment towards strengthening of MH Services.

Ref: -Memo No. SUDA-HEALTH/527(pt1)/ 527(pt 1)/11/205 dt..10.11.2011

Sir,

With reference to above, I am sending herewith the Utilization Certificates for full amounts through prescribed proforma in terms of note -2 below S.R.330A of Treasury rules for doing need full from your end.

Yours faithfully

[Signature]
Chairman

Balurghat Municipality

Encl: Photocopy of receipted Bills.

[Signature]
6/3/12

**FORM OF UTILIZATION CERTIFICATE PRESCRIBED IN S.R.330 A OF THE TREASURY
RULES WEST BENGAL AND THE SUBSIDIARY RULES MADE THERE UNDER VOLUME - 1.**

Certified that out of Rs. 140000/- of grants-in aid sanctioned during the year 2011-12 in favour of Balurghat Municipality under State Urban Development Agency vide order No. given in the margin and Rs. Nil/- on account of unspent balance of the previous year. A sum of Rs. 140000/- has been utilized for the purpose for which it was sanctioned and that the balance of Rs. NIL- remaining unutilized at the end of the year has been surrendered to Government (Vide No. Nil Dt. Nil) and will be adjusted towards the grants-in-aid payable during the year.

<u>Sl. No.</u>	<u>Name of the Scheme G.O. No. and Date</u>	<u>Amount</u>
1.	SUDA-HEALTH/53 7(p t.-1)11/285 Dt.20.01.2012 Purchase of equipment towards strengthening of MH Services	Rs. 140000/-

2. Certified that I have satisfied my self that the conditions on which grant-in-aid was sanctioned have been duly fulfilled/are being fulfilled and that I have exercised the following checks to see that the money was actually utilized for the purpose for which it was sanctioned.

Kind of check exercised.

1. Quotations and other relevant papers obtained.
2. Stock Book Maintained.
3. Verification of equipments and medicines done properly.
4. Cash voucher recorded in Cash Book

The grant-in-aid was drawn under by Draft No. 057141 Dt.18.01.12

B. S. Man
Chairman

Balurghat Municipality

K. S. Man
6/3/12



MEDICAL EQUIPMENT AND DEVICES

Tele : +91-353-64503
Fax : +91-353-24600
Tele Fax : +91-353-25323
E-mail : stg_saktimoy@sancharnet

Import-Export Code No. 0297003143

VAT No. : 19892751077

CST No. 1989275127

The Chairman
DPP-VIII (Extn), Balurghat Municipality,
Matri Sadan Hospital, Matri Sadan Building, 2nd Floor,
Sera Majumdar Sarani, P.O. - Balurghat
Dakshin Dinajpur, West Bengal, Pin No - 733101

CHALLAN NO.	MED/324/2011-2012
DATE	04/02/2012
INVOICE NO.	MED/339/2011-2012
DATE	04/02/2012

ORDER NO.

DATED :

SL.NO.	DESCRIPTION	UNIT CODE NO.	QUANTITY
1	O.T. Light (Shadow less) Ceiling mount Phililux, S-50 make - Philips <i>Entered to store only.</i> <i>Entered to the Stock Book Page No. 128. ... Book No. 23 Stationary articles / Medicines / S. T. Materials.</i> <i>Don't 12/12</i> <i>Chief Executive Officer I. P. P. VIII Extn Balurghat Municipality</i>		01 set

E.&O.E.

Total

01 Set

DELIVERED TO :

MODE OF DESPATCH :

L.R. / VEHICLE NO. :

WAY BILL / PERMIT NO. :

Protile Huda



For Medical Equipment & Device

OFFICE : 'SURAMA ABASON', 22, SARAT BOSE ROAD, HAKIMPARA, SILIGURI - 734001, INDIA

INVOICE *Bill*



**MEDICAL EQUIPMENT
AND DEVICES**

INVOICE NUMBER
MED/339/2011-2012

INVOICE DATE:
04-02-2012

Challan Number:

I/E Code No 0297003143

VAT No. 19892751077

CST No 19892751271

INVOICE TO
The Chairman
IPP-VIII(Extn.) Balurghat Municipality
Matri Sadan Hospital, Matri Sadan Building, 2nd Floor,
Sova Majumdar Sarani, PO: Balurghat
Dakshin Dinajpur, West Bengal, Pin No: 733101

SHIPPED TO

Purchase Order Number: 158/IPP-VIII(Extn)/17/11 dt 14/12/11

MED Reference :

Item	Qty	Description	Unit code no	Unit price in Rs	Total price in Rs
1	1	O.T. Light (Shadow Less) Ceiling mount Phililux, S-50 Make: Philips		138,750.00	138,750.00
		Sub Total			138,750.00
		Vat @4%			5,550.00
		Total			144,300.00
		Rupees One lack forty four thousand three hundred only			
		<i>Store entry has : duty been done. Pijush Kanti Das 06/2/12</i>			
				Remit	144,300.00

E&OE

We declare that the invoice shows the actual price of the goods
described and that all particulars are true and correct.

Pratibha Hada
for MEDICAL EQUIPMENT & DEVICES

LIAISON OFFICE : 'SURAMA JYOTI', FLAT NO SA2, 10 SARAT BOSE ROAD, SILIGURI 734 401, INDIA Telefax: 0353-2532344
REGISTERED OFFICE : 'AKSHAYA DEEP', FLAT NO B5, 429/7 GIRISH GHOSH SARANI, HAKIMPARA, SILIGURI 734 401, INDIA

Subject to Siliguri Jurisdiction

OFFICE OF THE MUNICIPAL COUNCILORS OF BANSBERIA

Rudra Main Road, P.O. Bansberia, Dist. Hooghly; West Bengal, Pin-712502
Ph. No. 033-26346324; Fax No. 033-26346806, email: bansb03@yahoo.com

Memo No: 2021

Dated: 15.9.11

Fax No.- 2358 5800.

To
The Director, SUDA,
ILGUS Bhavan, HC Block, Sector-III,
Bidhannagore, Kolkata- 700 106.

PO (H)
24/9/11



Sub:- Prayer for sanction of the following items for Strengthening of Maternity Home of Bansberia Municipality, Hooghly.

Respected Madam,

In connection with the discussion made with Dr. Sibani Goswami, Project Officer, SUDA in her Office Chamber held on 12.09.2011. I am to pray herewith for sanctioning the following items for Strengthening of Maternity Home of Bansberia Municipality, Hooghly from your good self and thus oblige.

- | | |
|--|---|
| 1. Auto Clave Machine - ----- | 6 nos. |
| 2. Sterilizer Box - ----- | 6 nos. |
| 3. Sterilizer Drum ----- | 20 drum |
| 4. Blanket - ----- | 40 pcs. |
| 5. Makintosh Sheet ----- | 10 rolls of (100 mtrs.) |
| 6. Incuvator ----- | 2 nos. |
| 7. Mattress ----- | 20 pcs. |
| 8. Pillow ----- | 20 pcs. |
| 9. OT Spot Light ----- | 2nos. |
| 10. Neonatal Endtreacheal Tube ----- | 4 pcs. |
| 11. Ambu small Neonatal Bag with Mask ---- | 4 pcs. |
| 12. Anaesthetic Bag for Boyel's Apparatus for Oxygen | - 4pcs. of 2 ltrs. &
4 pcs. of 1 ltrs. |
| 13. Auroscope for ENT ----- | 1 pc. |
| 14. Binasal Oxygen Catheter ----- | 4 pcs. |
| 15. Smallest Laryngscope with battery ----- | 4 pcs. |
| 16. Slit Lamp ----- | 1 pc. |
| 17. Auto Retractometer with hydrolic table -- | 1 pc. |
| 18. Schiortz Tonotmeter ----- | 1 pc. |
| 19. Air-Condition Machine (2 ton split) ----- | 4 pcs. |

- | | | |
|------------------------------------|-------|--------|
| 20. Computer , UPS, Laser Printer | ----- | 6 pcs. |
| 21. Green Generator | ----- | 1 pc. |
| 22. Scanner for Computer use | ----- | 1 pc. |
| 23. CLIA Machine for Hormone assay | ----- | 1 pc. |

Your kind sanction of the above items from your good self is highly solicited .

Yours sincerely

(Sri Rathindra Nath Das Modak)

Chairman

Bansberia Municipality

Chairman
Bansberia Municipality

P. Banerjee
14.09.11

Health Dept.

Bansberia Municipality

Imjee
14.09.11

G. I. C. (Health)

Bansberia Municipality

BALURGHAT POURA HOSPITAL & MATRI SADAN
UNDER I.P.P-VIII (Extn.)
BALURGHAT MUNICIPALITY

Sova Majumder Sarani ,

Contact No.03522-270557

Balurghat,Dakshin Dinajpur

Memo No.119/I.P.P-VIII(Extn.)/29/11

Dated-12.09.2011

To

Dr. S.Goswami,Project Officer(Health) SUDA

H.C.Block,ILGUS Bhaban

Kolkata-700106

FAX-No 03323347805

Sub : Statement of Fund under O & M(as per SUDA A/C)



Fund received (up to 11.09.2011)

	O/B on	as	Hon./Salary	Contingency	Medicine	Rent	Total
1	01.04.2011		451083.00	-2611.00	-16142.00	174785.00	607115.00
2	Ch.No.269894,dt. 23.05.11		385000.00	0.00	103700.00	0.00	488700.00
3	Ch No.27033,dt.16.08 .11		278400.00	88600.00	0.00	0.00	367000.00
	Total Rs.		1114483.00	85989.00	87558.00	174785.00	1462815.00

Expenditure (up to 11.09.2011)

	Paid Hon./Salary from April-11 to Sep.11					
1(a)	Apr-11	251394				
	May-11	251172				
	Jun-11	248237				
	Jul-11	254030				
	Aug-11	256504				
	Sep-11	256736				
	Total Rs.	1518073				
1(b)	Paid Against Con./Drug/Rent upto 30.06.11	-	64006.00	0.00	82430.00	-
	Total Rs.	1518073.00	64006.00	0.00	82430.00	1664509.00
	Balance as on 12.09.11	-403590.00	21983.00	87558.00	92355.00	-201694.00

U.C has been submitted up to 30.06.2011

Please note :After 30.06.2011 Expenditure have been made against contingency/Drug/Rent heads also. At present the balance of "Drug" is almost nill. Please note that : The Balance under head Hon./Salary is deficite Balance of Rs 403590.00 at Present

B. Sinha
Chairman

I.P.P-VIII(Extn.)

Balurghat Municipality

Div
17/9/11

KHARAGPUR MUNICIPALITY

I.P.P. - VIII (EXTN)

Memo No. : 127 I.P.P. VIII (Extn) -I-69/11

Date 13.9.11

To,

Dr. Shibani Goswami,
Project Officer(Health), SUDA,
S U D A Bhavan,
H-C Block, Sector-III,
Salt Lake,
Kolkata-700106.



Dear Madam,

Appropos of your kind information, I would request you to release the fund sanctioned as follows.-

1. Laparoscopic Instruments, Rs.- 18,97,392/-
2. Ultrasonography Machine, Rs.- 15,00,000/-
(Colour Doppler)

your Sincerely,

(Jahar Lal Paul)
Chairman
Kharagpur Municipality



Office of the Councillors of South Dum Dum Municipality

NAGER BAZAR , KOLKATA - 700 074

From :

Smt. Anjana Rakshit.

Chairperson.

SOUTH DUM DUM MUNICIPALITY

To

The Diector,
SUDA,
Salt Lake.

Date: 14.2.12



Sir,

Ref: SUDA- Health/527(pt-1)/08/290 Dated:31.1.2012

Sub: Strengthening of M.H. Services.

With reference to your letter under Memo no. mentioned above I am to inform you that Municipality will procure the sanctioned quantity of Hospital Equipments within the sanctioned allotment. ULB will bear all additional expenditure if necessary from its own fund.

You are requested to do the needful procedure accordingly.

Thanking you,

Yours faithfully,

Anjana Rakshit

Chairperson.

Chairperson
South Dum Dum Municipality

SENDING REPORT

Feb. 07 2012 12:22PM

YOUR LOGO : ADVISER(HEALTH)SUDA KOLKATA
YOUR FAX NO. : +91 3323347805

NO.	OTHER FACSIMILE	START TIME	USAGE TIME	MODE	PAGES	RESULT
01	025598388	Feb. 07 12:21PM	00'42	SND	01	OK

TO TURN OFF REPORT, PRESS 'MENU' #04.
THEN SELECT OFF BY USING '+' OR '-'.

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No.
SUDA-Health/527 (Pt-1)/08/290

Date**31.01.2012**

From : Director, SUDA

**To : The Chairperson
South DumDum Municipality**

Sub. : Strengthening of MH services.

Madam,

On scrutiny of work order vide no.SDM/245/Acctt/V & SDM/246/Acctt/V dt.02.01.12 sent through FAX without forwarding letter , it is observed that the rate of Fowlers' Bed and Instrument Trolley is too high. Furthermore, sanctioned no. relating to Fowlers' Bed had been altered from seven to five.

You are requested to look into the matter and either retendering process be started for both the above mentioned items or render an undertaking as to the effect that all the items of equipment be procured keeping the sanctioned quantity unaltered within the sanctioned allotment , excess expenditure, if any, be borne by the ULB out of it's own fund.

You are also requested to take prompt action so that entire process of procurement be completed and U/C submitted by end of February, 2012.

Thanking you.

Yours faithfully,



Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/527(Pt.-1)/11/284

Date 20.01.2012

From : Director, SUDA

**To : The Chairman
Champany Municipality**

**Sub. : Release of fund for Rs. 4,29,416/- in connection with purchase of
Equipment & Furniture towards strengthening of MH Services.**

Ref. : Your requisition submitted under memo no. 1049/1 dt. 04.01.2012.

Sir,

With reference to above, an A/C payee demand draft bearing no. 057140 dt. 18.01.2012, on SBI, Salt Lake for an amount of Rs. 4,29,416/- (Rupees Four lakhs twenty nine thousand four hundred sixteen) only is released to meet up expenditure in connection with purchase of Equipment & Furniture towards strengthening of MH services.

You are requested kindly to send your authorized representative along with money receipt to collect the said draft from the A/C section of SUDA.

You are also requested to submit UC as per 330A Form by 20.02.2012 after making necessary payment.

Yours faithfully,


Director, SUDA

SUDA-Health/527(Pt.-1)/11/284/1(1)

Dt. .. 20.01.2012

Cashier, SUDA


Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

**H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**

Ref No.SUDA-Health/527(Pt.-1)/11/285

Date 20.01.2012

From : Director, SUDA

**To : The Chairman
Balurghat Municipality**

**Sub. : Release of fund for Rs. 1,40,000/- in connection with purchase of
Equipment towards strengthening of MH Services.**

**Ref. : Your requisition submitted under memo no. 158/1(2)/IPP-VIII (Extn.)/17/11
dt. 14.12.2011.**

Sir,

With reference to above, an A/C payee demand draft bearing no. 057141 dt. 18.01.2012, on SBI, Salt Lake for an amount of Rs. 1,40,000/- (Rupees One lakh forty thousand) only is released to meet up expenditure in connection with purchase of Equipment towards strengthening of MH services.

You are requested kindly to send your authorized representative along with money receipt to collect the said draft from the A/C section of SUDA.

You are also requested to submit UC as per 330A Form by 20.02.2012 after making necessary payment.

Yours faithfully,



Director, SUDA

SUDA-Health/527(Pt.-1)/11/285/1(1)

Dt. .. 20.01.2012

Cashier, SUDA



Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/527(Pt.-1)/11/284

Date 20.01.2012

From : Director, SUDA

To : The Chairman
Champdany Municipality

Sub. : Release of fund for Rs. 4,29,416/- in connection with purchase of
Equipment & Furniture towards strengthening of MH Services.

Ref. : Your requisition submitted under memo no. 1049/1 dt. 04.01.2012.

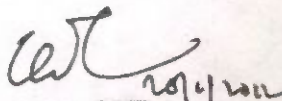
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You are requested kindly to send your authorized representative along with money receipt to collect the said draft from the A/C section of SUDA.

You are also requested to submit UC as per 330A Form by 20.02.2012 after making necessary payment.


Yours faithfully,


Director, SUDA

Dt. .. 20.01.2012

SUDA-Health/527(Pt.-1)/11/284/1(1)

Cashier, SUDA


Director, SUDA

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No. SUDA-Health/527(Pt.-1)/11/285

Date 20.01.2012

From : Director, SUDA

**To : The Chairman
Balurghat Municipality**

**Sub. : Release of fund for Rs. 1,40,000/- in connection with purchase of
Equipment towards strengthening of MH Services.**

**Ref. : Your requisition submitted under memo no. 158/1(2)/IPP-VIII (Extn.)/17/11
dt. 14.12.2011.**

Sir,

With reference to above, an A/C payee demand draft bearing no. 057141 dt. 18.01.2012, on SBI, Salt Lake for an amount of Rs. 1,40,000/- (Rupees One lakh forty thousand) only is released to meet up expenditure in connection with purchase of Equipment towards strengthening of MH services.

You are requested kindly to send your authorized representative along with money receipt to collect the said draft from the A/C section of SUDA.

You are also requested to submit UC as per 330A Form by 20.02.2012 after making necessary payment.

Yours faithfully,



Director, SUDA

SUDA-Health/527(Pt.-1)/11/285/1(1)

Dt. 20.01.2012

Cashier, SUDA



Director, SUDA

Attention: Dr. Shibani Goswami

Memo No. SDM/246/Acctt/2/46 2/1/12

2551-2357
2549-8388

Office of the councillors of South Dum Dum Municipality
Nagerbazar, Kolkata-74

PO (H) 2/1/12
FO. 2/1/12

To
M/S. Aritike Traders
92/2, Nagendra Nath Road
Kolkata - 700074

Re : Supply order for Hospital Items against Tender notice No. 234/12/11 dt. 1.12.2011

Sub: Strengthening of MH services.

Sir,

This refers your quotation against our notice no as cited above and your rate has been considered as the lowest. The undersigned is pleased to allot the work for supplying the following items to you. Please note that 10% security deposit shall be deducted from your bill and shall be refunded after 6 months subject to performance of the machines.

- | | | | |
|---|-------|--------------------|-----------------|
| 1. Auto Clave Horizontal | 2 nos | ₹. 1,95,000/- each | 3,90,000 |
| 2. Diathermy Machine
(Mono & Biplar) 400 W
With all accessories | 1 no | ₹. 1,80,000/- each | 1,80,000 |
| | | | <u>5,70,000</u> |

You are requested to supply the materials within 1 (one) month from the date of receiving the W.O

Thanking you,
Yours faithfully

Sd/_____
Chairperson
South Dum Dum Municipality
Nager Bazar,
Kolkata-74

Copy to:

1. Member - C-I-C, Hospital
2. Health Officer (SDDM)
3. E.O -do-
4. F.O -do-
5. Director, SUDA
6. Accountant SDDM

Angana Rakshit
Chairperson
South Dum Dum Municipality
2/1/12

3,90,000	5,70,000
1,80,000	3,22,000
<u>5,70,000</u>	<u>8,92,000</u>

Attention: Dr. Shibani Goswami

Memo No. SDM/245/Acctt/5/11. 2/1/2012

2551-2357
2549-8388Office of the councillors of South Dum Dum Municipality
Nagerbazar, Kolkata-74To
M/S. Roy Enterprise
77, Nagendra Nath Road
Kolkata - 700028Re : Supply order for Hospital Items against Tender notice No. 234/12/11 dt. 1.12.2011Sub: Strengthening of MH services.

Sir,

This refers your quotation against our notice no as cited above and your rate has been considered as the lowest. The undersigned is pleased to allot the work for supplying the following items to you. Please note that 10% security deposit shall be deducted from your bill and shall be refunded after 6 months subject to performance of the machines.

- | | | | |
|-----------------------|-------|-------------------|---------------|
| 1. Fowlers Bed | 5 nos | ₹. 12,000/- each | = 60000 |
| 2. Instrument Trolley | 2 nos | ₹. 15,000/- each | = 30000 |
| 3. OT Light | 1 no. | ₹. 1,65,000/-each | = 165000 |
| 4. Boyles Apparatus | 1 no | ₹. 62,000/- each | = 62000 |
| | | | <u>277000</u> |

You are requested to supply the materials within 1 (one) month from the date of receiving the W.O

Thanking you,
Yours faithfully

Chairperson

Nagerbazar, Dum Municipality
Kolkata-74

Copy to:

1. Member -C-I-C, Hospital
2. Health Officer (SDDM)
3. E.O -do-
4. F.O -do-
5. Director, SUDA
6. Accountant SDDM

Anjana Roshit
Chairperson

South Dum Dum Municipality

2/1/12

SUDA**STATE URBAN DEVELOPMENT AGENCY****HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. **SUDA-Health/527(Pt.-1)/11/209**Date **16.11.2011****From : Director, SUDA****To : The Chairman
South Dum Dum Municipality****Sub. : Strengthening of MH services.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 8,68,600/- (Rupees Eight lakhs sixty eight thousand six hundred) only for purchase of equipment & furniture towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Req'd.
1	Fowlers Beds	7 ✓
2	Instrum. Trolley	2 ✓
3	Auto Clave Horizontal	2 ✓
4	OT Light	1 ✓
5	Boyles Apparatus	1 ✓
6	Diathermy Machine (Mono & Bipolar) 400 W with all accessories	1 ✓


You are requested to undertake such procurement observing West Bengal Financial Rules by December, 2011. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is **one time support** without creating any precedence.

Thanking you.

Yours faithfully,


Director, SUDA

Contd. to P-2.

- 2 -

SUDA-Health/527(Pt.-1)/11/209(4)

Dt. .. 16.11.2011

CC :

- 1. Executive Officer, South Dum Dum Municipality**
- 2. Finance Officer, South Dum Dum Municipality**
- 3. HO, South Dum Dum Municipality**
- 4. Finance Officer, Health, SUDA**



Director, SUDA

রাজ্য নগর উন্নয়ন সংস্থা

STATE URBAN DEVELOPMENT AGENCY

“ইলগাস ভবন”, এইচ-সি ব্লক, সেক্টর-৩, বিধাননগর, কলকাতা ৭০০ ১০৬, পশ্চিমবঙ্গ

“ILGUS BHAVAN”, H-C Block, Sector - III, Bidhannagar, Kolkata - 700 106, West Bengal

ক্রমিক নং SUDA-Health/527 (Pt.-I)/11/ 93

তারিখ 16.01.2012

From : Director, SUDA

To : The Manager,
State Bank of India,
Salt Lake City, Kolkata - 700 091.Sub : Preparation of Account Payee Demand Drafts
Current Account No.31227456477.

Strengthening of MH - HSDI

Sir,

You are requested to kindly arrange for preparation of the following Account Payee Demand Drafts as per details given below, debiting the amount from this office Current Account No.31227456477 lying with your branch in respect of Strengthening of MH – HSDI Scheme.

Sl. No.	Name of Payee	Amount (in Rs.)	SBI Branch
01.	Chamdpani Municipality	4,29,416.00	Baidyabati (4776)
02.	Balurghat Municipality	1,40,000.00	Balurghat (0020)
Total		5,69,416.00	
(Rupees Five Lakh Sixty Nine Thousand Four Hundred Sixteen only)			

(B.C.Patra)

Joint Secretary
M.A.Department, GoWB

(M.N.Pradhan)

Director
SUDA



OFFICE OF THE
BALURGHAT POURA HOSPITAL & MATRI SADAN
IPP-VIII (EXTENSION)

BALURGHAT MUNICIPALITY

BALURGHAT * DAKSHIN DINAJPU

Phone-03522-270557

Memo No-158/IPP-VIII (Extn)/17/11

Date—14/12/11

To

M/S Medical Equipment & Devices
22, Sarat Bose Road, Hakim Para
Siliguri-734001, W/B

Fax- 913532532344

Sub:- Supply order of O.T.Light (Shadow Less) Ceiling Mount

Ref:- This office quotation Notice No-149/IPP-VIII(Extn)/17/112 , Dt.- 22/11/2011

Sir,

Please refer to the above I am to convey the acceptance of your rate for the following Article as per your offer under No. MED/671/ SSG/2011-2012, Dt-06/12/2011.

Now, I am to place here the order for the supplying of the O.T.Light (Shadow Less) as per our 'NIQ'.

I am to confirm that the payment of the articles will be made on receipt the delivery of the article and installation where necessary in good condition here. You are requested to make supply of the article by 14/01/2012.

<u>Name of the Article</u>	<u>No</u>	<u>Accepted rate per No.</u>	<u>Total Cost</u>
		Rs.	Rs.

1. O.T. Light (Shadow Less) Ceiling Mount

Phililux, S-50

1

144,300.00

144,300.00

(Rupees One Lakh Fourty Four Thousand Three Hundred Only)

Please confirm the supply order and do your needful.

Yours Faithfully

SD
Chairman

IPP-VIII (Extn)

Balurghat Municipality

Date 14/11/2011

Memo No-158/1(2)/IPP-VIII (Extn)/17/11.

Copy to-

1. The Director, SUDA (health), ILGUS Bhaban, Salt Lake, Kol-106
- ✓ 2. Dr.S.Goswami, Project officer, SUDA (Health)-for information.

Biswas
Chairman

IPP-VIII (Extn)

Balurghat Municipality

14/12/11



BALURGHAT MUNICIPALITY

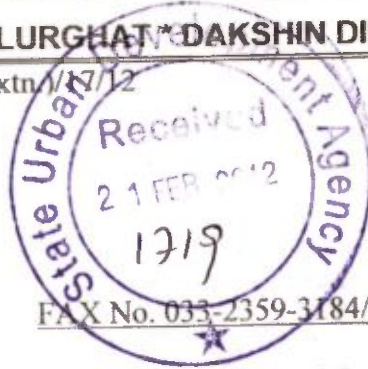
BALURGHAT DAKSHIN DINAJPUR

Phone-03522-270557

Memo No. 178/IPP-VIII(Extn.)/17/12

Date:- 10.01.12

To
✓ The Director,
SUDA (Health)
ILGUS Bhaban.
Sec: III, Salt Lake.
Kol-106.



POCH
D
24/1/12

Sub: - Strengthening of MH-Proposal for placement of fund.
Ref: - Your Memo No. SUDA-Health/527(Pt-I)/11/205 Dated. 16.11.2011

Sir,

Please refer to the above subject I am to submit that we have already taken all sorts of steps for the procurement of the O.T. light for our Matri Sadan & Hospital as directed in your above memo.

We duly invited the rates vide our Tender under Memo No. 149/IPP-VIII (Extn.)/17/11 dt. 22.11.2011 and which was published in one daily 'Uttarbanga Sambad' on 25.11.2011 vide our Memo No. 150/IPP-VIII (Extn.)/17/11 dt. 22.11.2011 copies of which were also enclosed to you along with others.

Further, I am to note you that we received the offer of rates within the stipulated date i.e 08.12.2011 and the rate offered by M/S Medical Equipments & Devices, Siliguri has been accepted by the undersigned being found lowest.

We duly issued the supply order to the said agency on 14.12.2011 vide this office Memo No. 158/IPP-VIII (Extn.)/17/11 and asked them to supply the O.T. light fitting fixing complete by 14.01.2012 copy of which also sent to you.

Now, we have been informed that the supplier is ready to make delivery the O.T. light and may complete very soon.

Under the above circumstances I would request you to kindly place us the sanctioned fund at the earliest so that we can settle the claim with no delay as soon as they complete the supply as per our terms and conditions.

An early action is solicited.

Thanking you.

Yours faithfully

Enclo: - Copies as stated above.

Smt. S. Biswas
(Smt. S. Biswas)

Chairman
IPP-VIII (Extn.)
Balurghat Municipality

Memo No. 178/1/(1)/IPP-VIII(Extn.)/17/12

Copy to:-

Dr. S. Goswami, Project Officer, (Health), SUDA
For information and necessary action.

Date:- 10.01.12

Smt. S. Biswas
Chairman
IPP-VIII (Extn.)
Balurghat Municipality



OFFICE OF THE
BALURGHAT POURA HOSPITAL & MATRI SADAN
IPP-VIII (EXTENSION)

BALURGHAT MUNICIPALITY

BALURGHAT * DAKSHIN DINAJPU

Phone-03522-270557

Memo No-158/IPP-VIII (Extn)/17/11

Date—14/12/11

To

M/S Medical Equipment & Devices

22, Sarat Bose Road, Hakim Para

Siliguri-734001, W/B

Fax- 913532532344

Sub:- Supply order of O.T.Light (Shadow Less) Ceiling Mount

Ref:- This office quotation Notice No-149/IPP-VIII(Extn)/17/112 , Dt.- 22/11/2011

Sir,

Please refer to the above I am to convey the acceptance of your rate for the following Article as per your offer under No. MED/671/ SSG/2011-2012, Dt-06/12/2011.

Now, I am to place here the order for the supplying of the O.T.Light (Shadow Less) as per our 'NIQ'.

I am to confirm that the payment of the articles will be made on receipt the delivery of the article and installation where necessary in good condition here. You are requested to make supply of the article by 14/01/2012.

<u>Name of the Article</u>	<u>No</u>	<u>Accepted rate per No.</u>	<u>Total Cost</u>
		Rs.	Rs.
1. O.T. Light (Shadow Less) Ceiling Mount			
Phililux, S-50	1	144,300.00	144,300.00

(Rupees One Lakh Fourty Four Thousand Three Hundred Only)

Please confirm the supply order and do your needful.

Yours Faithfully

B. Suman
Chairman

IPP-VIII (Extn)

B. Suman
Balurghat Municipality
Date 14/11/2011

Memo No-158/1(2)/IPP-VIII (Extn)/17/11.

Copy to-

1. The Director, SUDA (health).ILGUS Bhaban,Salt Lake,Kol-106
2. Dr.S.Goswami, Project officer, SUDA (Health)-for information.

B. Suman
Chairman

IPP-VIII (Extn)

Balurghat Municipality

B. Suman
14/12/11



OFFICE OF THE
BALURGHAT POURA HOSPITAL & MATRI SADAN
IPP-VIII (EXTENSION)

BALURGHAT MUNICIPALITY

BALURGHAT * DAKSHIN DINAJPUR

Phone-03522-270557

Memo No.150../IPP-VIII (Extn.)/17/11

Dated:- 22/11/11

TENDER NOTIFICATION

A 'NIT' has been issued from this office inviting rates for O.T. Light for Matri Sadan Hospital under IPP-VIII (Extn.) of Balurghat Municipality under Memo No.149/IPP-VIII(Extn)/17/11dt 22 / 11/11. For more details please go through the above 'NIT' or contact Phone No: - 03522-270557 during working hours.

Biswan
Chairman

IPP-VIII (Extn.)
Balurghat Municipality

Memo No.150/1/IPP-VIII (Extn.)/17/11

Dated:-22/11/2011

Copy to:-

Advertisement Manager, Uttar Banga Sambad, Malda

He is requested to publish the above office 'NIT' in his 'Daily' one insertion in a prominent place at the earliest by 28/11/11. He is requested to raise his bill in a subsidized rate as this is one for public health and utility services which runs under very low cost particularly for BPL people. Please send 4 copies of publication along with your bill.

Biswan
Chairman

IPP-VIII (Extn.)

Balurghat Municipality

Dated:- 22/11/2011

Memo No.150/2(2)./IPP-VIII (Extn.)/17/11

Copy to:-

1. The Director, SUDA (Health)
2. Dr. S. Goswami, Project Officer, SUDA (Health)
for information & necessary action.

This is done interms of your Memo No. SUDA Health/527(Pt-I)/11/205 dt. 16.11.2011

Biswan
Chairman

IPP-VIII (Extn.)

Balurghat Municipality

Dated:- 22/11/2011

Memo No.150/3/(4)./IPP-VIII (Extn.)/17/11

Copy to:-

1. Shri. K.C. Das, MCIC (Health) Balurghat Municipality
2. Shri. S.N. Goswami, UHIO, Balurghat Municipality
3. The Accountant, Balurghat Municipality
4. Sh. P.K. Laha/ Shri. S. Goswami, Store Keeper, IPP-VIII (Extn.) Balurghat Municipality

Biswan
Chairman

IPP-VIII (Extn.)

Balurghat Municipality

উত্তরবঙ্গের আত্মার আত্মীয়

উত্তরবঙ্গ সংবাদ

মালদা ৮ অগ্রহায়ণ ১৪১৮ চন্দ্রবার ২.০০ টাকা 25 November 2011 Friday 12 Pages Rs. 2.00 ইন্টারনেট সংস্করণ : <http://www.uttarbangasambad.com>

নীৰ্ষনেতা কিশেণজি

9593293288/9563859032

TENDER NOTIFICATION

Memo No. 150./IPP-VIII (Extn.)/17/11 Dated :- 22/11/11
'A' NIT has been issued from this office inviting rates for
O.T. Light for Matri Sadan Hospital under IPP-VIII (Extn.)
of Balurghat Municipality under Memo No. 149/IPP-VIII
(Extn.)/17/11 dt- 22/11/11. For More details please go through
the above 'NIT' or contact Phone No :- 03522-270557 during
working hours.

Sd/-

S. Biswas, Chairman, IPP-VIII (Extn.)
Balurghat Municipality



Govt. of West Bengal

Office of the Assistant Director of Fisheries Moen

Bhaban, Mangalbari, Malda

N.I.T. No. 1086/Co-op/Sch-19

Abridged Tender Notice

Sealed tenders are invited from the eligible
contractors for 3 nos. of development works
at Barasagardighi Model Fish Farm, Malda
and last date of application on 30.11.2011 upto

2.00 pm for details Visit www.malda.nic.in

রোগীর অভিভাবককে মারধরের ত ডাক্তারের বিরুদ্ধে, এলাকায় চা

তপন, ২৪ নভেম্বর : জরুরি
বিভাগে থাকা ডাক্তার রোগী দেখতে
চাননি। কারণ জানতে চাওয়ার রোগীর
অভিভাবককে হাসপাতাল থেকে বের
করে মারধরের অভিযোগ উঠল তপন
রক্ত স্বাস্থ্যকেন্দ্রের শিশু বিভাগের
ডাক্তারের বিরুদ্ধে। পাশাপাশি এই
ঘটনার খবর সংগ্রহ করতে গেলে
হাসপাতালের বিএমওএইচ পদে
সর্দার প্রতিবেদকদের সঙ্গে অভাব্য
আচরণ করেছেন বলেও অভিযোগ
উঠেছে। এই ঘটনায় বৃহস্পতিবার
ব্যাপক চাকলা হড়িয়েছে তপন রক্ত
স্বাস্থ্যকেন্দ্র। ঘটনার প্রতিক্রিয়া জানিয়ে
স্বাস্থ্য রক্ষা দপ্তরের সৈন্যরা রক্ত
অবরোধ করে বিক্ষোভ দেখান। তপন
খানার পুলিশ রক্ত অবরোধ মৃত করে
হাসপাতালের পরিষিতি নিয়ন্ত্রণে
আনেন।

তপন মূল মোড় এলাকায় অসীম
বাসিন্দা বাস্পা পাল অভিযোগ করে
যলেন, এইদিন সকাল ৯টা নাগাদ
আমি এবং আমার স্ত্রী আপা আমাদের
এক বছরের ছেলের চিকিৎসার জন্য
তপন রক্ত হাসপাতালে আসি। শিশু
বিশেষজ্ঞ ডাক্তার ওজুয়ার দাস সেই
সময় জরুরি বিভাগে ওষুধ



রোগীর অভিভাবককে মারধরের অভিযোগ ডাক্তারকে বিরুদ্ধে বিক্ষোভ তপন স্বাস্থ্য
আমি প্রতিবাদ জানালোর তিনি বাইরে এলাকার বাসিন্দারা হাসপাতালে সাধারণ

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No. ...**SUDA-Health/527(Pt.-1)/11/205**Date**16.11.2011****From : Director, SUDA****To : The Chairman
Balurghat Municipality****Sub. : Strengthening of MH services.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 1,40,000/- (Rupees One lakh forty thousand) only for purchase of equipment towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	OT Light	1

You are requested to undertake such procurement observing West Bengal Financial Rules by December, 2011. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is **one time support** without creating any precedence.

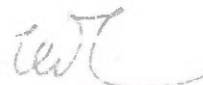
Thanking you.

Yours faithfully,


Director, SUDA

Dt. .. 16.11.2011**SUDA-Health/527(Pt.-1)/11/205(4)****CC :**

1. Executive Officer, Balurghat Municipality
2. Finance Officer, Balurghat Municipality
3. UHIO, Balurghat Municipality
4. Finance Officer, Health, SUDA


Director, SUDA

Re.: Champdany Municipality's Purchase Order

X Inbox X

from Partha Bandyopadhyay pms_pb@yahoo.co.in
reply-to Partha Bandyopadhyay <pms_pb@yahoo.co.in>
to "dfidhhw@gmail.com" <dfidhhw@gmail.com>
date Mon, Dec 5, 2011 at 1:57 PM
subject Re.: Champdany Municipality's Purchase Order
signed-by yahoo.co.in
Important mainly because of the words in the message.

Dear Madam,

Please find enclosed the P.O. for your reference and record. Please do the needful.
Please advise if any is required from our part for this procurement.

Rgds
Partha Bandyopadhyay
AFC
Champdany Municipality.

enclo:A/a

Ph. No.2632-3429
Fax No. 033-2632-6257
e-mail:chai6257@dataone.in

OFFICE OF THE COUNCILLORS OF CHAMPDANY
MUNICIPALITY

1, POURA BHAWAN ROAD, CHAMPDANY
P.O.-BAIDYABATI, DIST.-HOOGHLY, PIN-712222

Memo No. 862

Dated, Champdany the 3rd December 2011

From : Shri Suresh Mishra, Chairman
Champdany Municipality

To
The Medipower
CC 18/1 Narayantala(W)
Baguiati,
Kolkata-700 059

Sub: Acceptance-cum- Work order for Supply of one Maternity O.T. Table (Hydraulic) and one Diathermy Machine (Monopolar & Bipolar) with all accessories for Health Department at Municipal Maternity center, ward no-6.

Our Ref: Tender Notice No. CM/SMH/01/11-12, Dated 18/11/2011.

Dear Sir,

This is with reference to your offer vide ref.no MDP/11-12/156 dated 01/12/2011 against our above Tender notice. We are pleased to inform that your rate towards Supply of one Maternity O.T. Table (Hydraulic) and one Diathermy Machine (Monopolar & Bipolar) with all accessories for Health Department at Municipal Maternity center, ward no-6, has been accepted by this office on the following conditions.

Sr.No	Description	Qty. (No)	Rate (₹)	Amount (₹)	VAT (₹)	Total Amount (₹)
01.	Maternity O.T. Table (Hydraulic); Make-Indo medical	01	104000.00	104000.00	4160.00	108160.00
02.	Diathermy Machine (Monopolar & Bipolar) with all accessories; Make-L & T Maestro Plus.	01	308900.00	308900.00	12356.00	321256.00
Total Rupees Four Lac Twenty Nine Thousand Four Hundred Sixteen Only						429416.00

Contd.....p/2

-: P/2 :-

Terms and Conditions:

1. PRICE : Inclusive of all charges FOR Champdany.
2. Delivery : Within 2 to 3 weeks from the date of work order.
3. Payment Terms : 50% against delivery balance after Installation.

If the terms & Conditions are acceptable to you please sign the copy of the order. Trust you will complete the work as per schedule.

Yours faithfully,



Chairman
Champdany Municipality

Copy forwarded for information to-

- C-I-C Health
- The Executive Officer, Champdany Municipality,
- The Finance Officer, -do-
- The Head Clerk/Accountant -do-



Chairman
Champdany Municipality

OFFICE OF THE COUNCILLORS OF CHAMPDANY
MUNICIPALITY

1, POURA BHAWAN ROAD, CHAMPDANY
P.O.-BAIDYABATI, DIST.-HOOGHLY, PIN-712222

Memo No.

Dated, Champdany the January 2012

From : Shri Suresh Mishra, Chairman
Champdany Municipality

To
The Director, SUDA
Ilgus Bhavan
Bidhan Nagar Calcutta-700 091

Strengthening of MH
5.1.12

Sub: Strengthening of MH Services.

Re: Your Letter No. SUDA-Health/527(Pt.-1)/11/207 dated 16/11/2011

Dear Sir,

This is with reference to your above letter. We would like to confirm you that we have issued work order vide no 862 dated 3rd December 2011 for purchase of OT Table and Diathermy Machine as mentioned in your above memo adhering to the West Bengal Financial Rules.

We request you to kindly release of fund for the above work.

Yours faithfully,

Chairman
Champdany Municipality
Chairman
CHAMPDANY MUNICIPALITY

m.m. 1049/1 dt. 4.1.12

Copy forwarded for information to-

- ✓ Finance Officer- SUDA



P.O. (Health)
4/1/12

SUDA**STATE URBAN DEVELOPMENT AGENCY****HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No. SUDA-Health/527(Pt.-1)/11/207****Date 16.11.2011****From : Director, SUDA****To : The Chairman
Champdany Municipality****Sub. : Strengthening of MH services.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 4,31,200/- (Rupees Four lakhs thirty one thousand two hundred) only for purchase of equipment towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	OT Table	1
2	Diathermy Machine (Mono & Bipolar) 400 W with all accessories	1

You are requested to undertake such procurement observing West Bengal Financial Rules by December, 2011. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Thanking you.

Yours faithfully,



Director, SUDA

Dt. .. 16.11.2011

SUDA-Health/527(Pt.-1)/11/207(4)

CC :

1. Executive Officer, Champdany Municipality
2. Finance Officer, Champdany Municipality
3. UHIO, Champdany Municipality
4. Finance Officer, Health, SUDA



Director, SUDA

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal****Ref No.SUDA-Health/527(Pt.-1)/11/204****Date16.11.2011****From : Director, SUDA****To : The Chairman
Kharagpur Municipality****Sub. : Strengthening of MH services.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 14,00,000/- (Rupees Fourteen lakhs) only for purchase of equipment towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Laparoscopy Machine	1

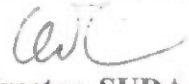
You are requested to undertake such procurement observing West Bengal Financial Rules by December, 2011. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.


Thanking you.

Yours faithfully,


Director, SUDA

SUDA-Health/527(Pt.-1)/11/204(4)**Dt. .. 16.11.2011****CC :**

1. Executive Officer, Kharagpur Municipality
2. Finance Officer, Kharagpur Municipality
3. UHIO, Kharagpur Municipality
4. Finance Officer, Health, SUDA


Director, SUDA

SUDA**STATE URBAN DEVELOPMENT AGENCY****HEALTH WING****"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091****West Bengal**

Ref No.SUDA-Health/527(Pt.-1)/11/206

Date16.11.2011

From : Director, SUDA**To : The Chairman
Burdwan Municipality****Sub. : Strengthening of MH services.****Sir,**

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 17,50,000/- (Rupees Seventeen lakhs fifty thousand) only for purchase of equipment towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Laparescopy Machine	1
2	Semi Auto Analyzer	1

You are requested to undertake such procurement observing West Bengal Financial Rules by December, 2011. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Thanking you.

Yours faithfully,


Director, SUDA

Dt. .. 16.11.2011

SUDA-Health/527(Pt.-1)/11/206(4)

CC :

1. Executive Officer, Burdwan Municipality
2. Finance Officer, Burdwan Municipality
3. UHO, Burdwan Municipality
4. Finance Officer, Health, SUDA


Director, SUDA

Copy, General Manager, T. & L. S. S. S. S.

Tel/Fax No.: 359-3184

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No.

SUDA-Health/527(Pt.-1)/11/204

Date

16.11.2011

From : Director, SUDA

To : The Chairman
Kharagpur Municipality

Sub. : Strengthening of MH services.

Sir,

With reference to your communication on the subject mentioned above, I am to intimate you that Dept. of Health & Family Welfare has sanctioned Rs. 14,00,000/- (Rupees Fourteen lakhs) only for purchase of equipment towards strengthening of MH services at your ULB as mentioned below :

Sl. No.	Item	Quantity Reqd.
1	Laparoscopy Machine	1

You are requested to undertake such procurement observing ~~Procurement Rules of Government of West Bengal~~ ^{West Bengal Financial Rules} by December, 2011. A copy of work order in this regard is to be forwarded to the undersigned for release of fund.

You are also requested to submit Statement of Expenditure (SOE) along with photocopy of receipted bills duly authenticated and with an endorsement in the bill on the Stock ledger entry.

It is to be noted that this is one time support without creating any precedence.

Thanking you.

Yours faithfully,

Director, SUDA

SUDA-Health/527(Pt.-1)/11/204(4)

Dt. .. 16.11.2011

CC :

1. Executive Officer, Kharagpur Municipality
2. Finance Officer, Kharagpur Municipality
3. UHIO, Kharagpur Municipality
4. Finance Officer, Health, SUDA

Director, SUDA

Government of West Bengal
West Bengal State Health & Family Welfare Samiti (A/C RCH)
Swasthya Bhavan, 3rd floor, Wing-A
GN- 29, Sector-V, Salt Lake City
Kolkata- 700 091.

Phone & Fax No. 23573680

Memo No.: H/SFWB/2S-01-2011/WR/361

Date: 17 / 10 / 2011

To
The Director
State Urban Development Agency (SUDA)
ILGUS Bhawan
HC Block, Sector III
Saltlake
Kolkata-106

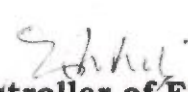
Sub. : Release of fund for Urban RCH under RCH II Programme for the F. Y. 2011-2012

Sir/Madam

Enclosed herewith kindly find the **Cheque vide No. 052048 dt 13/10/2011** for **Rs.58,00,000/- (Rupees Fifty eight lakh only)** for the purpose of Upgradation of Maternity Homes. The grant is to be utilized as per guideline.

The SOE & UC is to be submitted quarterly (April to June, July to September, October to December & January to March) in prescribed format to the office of the undersigned. Unspent amount is to be refunded by Cheque/ demand draft in favour of "West Bengal State Health & Family Welfare Samiti (A/c RCH)" to this office.

Enclo.: As stated above


Controller of Finance &
Joint DHS
West Bengal

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal

Ref No.

Date28.09.2011

SUDA-Health/527(Pt.I)/11/177

From : Director, SUDA

**To : Dr. J. N. Chaki,
Jt. DHS & SFWO
Dept. of Health & Family Welfare
Swasthya Bhawan, 3rd Floor, Wing - "A"
GN - 29, Sector - V, Salt Lake City
Kolkata - 700 091.**

**Sub : Submitting list of Equipment & Furniture for strengthening
of MH services, forwarded by the ULBs.**

Sir,

With reference to your communication vide no. H/SFWB/777 dt. 16.09.2011, the list of equipment & furniture for strengthening of MH services, as received from six nos. of ULB are submitted herewith for your kind consideration and further necessary action.

Statement of Expenditure and Utilisation Certificate for the fund released for an amount of Rs. 35,52,964/- during FY 2010-11 for strengthening of MH services will be submitted to you shortly.

Thanking you.

Enclo. : As stated.

SUDA-Health/527(Pt.I)/11/177/1(2)

Copy forwarded for kind information to :

- 1. Commissioner (FW) & Secretary, DHFW.**
- 2. Controller of Finance & Jt. DHS, DHFW.**

Yours faithfully,


Director, SUDA

Dt. .. 28.09.2011


Director, SUDA

Summary Sheet

On

Requirement of Equipment & Furniture for strengthening of MH services
at the ULBs

(Amount in Rs.)

Sl. No.	Name of ULBs	Estimated Amount for Equipment & Furniture
1.	Kharagpur	14,00,000.00
2.	Balurghat	1,40,000.00
3.	Burdwan	17,50,000.00
4.	Champdany	4,31,200.00
5.	Rajpur Sonarpur	12,10,500.00
6.	South Dum Dum	8,68,600.00
Total		58,00,300.00
(Rupees Fifty eight lakhs three hundred) only		

Goswami

**Requirement of Equipment & Furniture for strengthening of MH services
at the ULBs**

(Amount in Rs.)

Kharagpur				
Sl. No.	Item	Quantity Reqd.	Unit Rate	Amount
1	Laparoscopy Machine	1	14,00,000	14,00,000
Total=>				14,00,000

(Amount in Rs.)

Balurghat				
Sl. No.	Item	Quantity Reqd.	Unit Rate	Amount
1	OT Light	1	1,40,000	1,40,000
Total=>				1,40,000

(Amount in Rs.)

Burdwan				
Sl. No.	Item	Quantity Reqd.	Unit Rate	Amount
1	Laparoscopy Machine	1	14,00,000	14,00,000
2	Semi Auto Analyzer	1	3,50,000	3,50,000
Total=>				17,50,000

(Amount in Rs.)

Champdany				
Sl. No.	Item	Quantity Reqd.	Unit Rate	Amount
1	OT Table	1	3,50,000	3,50,000
2	Diathermy Machine (Mono & Bipolar) 400 W with all accessories	1	81,200	81,200
Total=>				4,31,200

(Amount in Rs.)

Rajpur Sonarpur				
Sl. No.	Item	Quantity Reqd.	Unit Rate	Amount
1	USG Machine	1	9,50,000	9,50,000
2	Auto Clave Horizontal	1	2,60,500	2,60,500
Total=>				12,10,500

(Amount in Rs.)

South Dum Dum				
Sl. No.	Item	Quantity Reqd.	Unit Rate	Amount
1	Furniture Bede	7	8,200 ✓	57,400
2	Instrument Trolley	2	1,500 ✓	3,000
3	Auto Clave Horizontal	2	2,60,500	5,21,000
4	OT Light	1	1,40,000	1,40,000
5	Boyles Apparatus	1	66,000	66,000
6	Diathermy Machine (Mono & Bipolar) 400 W with all accessories	1	81,200	81,200
Total=>				8,68,600

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Jhargram Municipality

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Laproscopy System

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[sreenathengineering@vsnl.net](#) to me

[Show details](#) Sep 24 (2 days ago) Reply

Dr. Mrs. Shibani Goswami
SUDA

Dear Madam,

As discussed over phone we are sending you the configuration with two option of Laproscopy System - Aesculap Germany make, technical as well as budgetary price. Post-Sales Service also available. For further details/clarification, please feel free to contact us.

KUMAR MITRA

[CEO & Director]

SREENATH ENGG. SALES & SERVICE PVT. LTD.

MOB: 98310-56701/93312-60920

Encl: as above

mail id:
[sreenathengineering@vsnl.net](#)
[sreenathengg.sales&service.pvt.ltd@gmail.com](#)

 **SUDA.doc**
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OFFER-1

DIAGNOSTIC AND OPERATING LAPROSCOPY SET WITH HAND INSTRUMENT

DESCRIPTION	QUANTITY
AESCULAP, GERMANY MAKE DIAGNOSTIC AND OPERATING LAPAROSCOPY SYSTEMS.	
SYSTEMS	
❖ SINGLE-CHIP CAMERA SYSTEM PAL W.LENS	One
❖ HALOGEN LIGHT SOURCE 250W.	One
❖ LIGHTCABLE	One
❖ 20L INSUFFLATOR	One
❖ 0 DEGREE TELESCOPE	One
❖ CO2 CYLINDER	One
❖ LCD TV (SONY/SAMSUNG)	One
❖ DIATHERMY MACHINE	One
HAND INSTRUMENT	
❖ VERESS NEEDLE	One
❖ DESSECTOR (MARYLAND)	One
❖ GRASPER	Two
❖ CLIP APPLICATOR	One
❖ SUCTION AND IRRIGATION CANNULA	One
❖ ELECTRODE, HOOK (BALL)	One
❖ TROCAR AND CANNULA (5 MM)	Two
❖ TROCAR AND CANNULA (10 MM)	Two
❖ DIATHERMY CABLE	One
❖ GALL BLADDER EXTRACTOR	One
❖ REDUCER	One
❖ TROLLEY FOR LAPROSCOPY SYSTEM	One
❖ STABILIZER	One

BUDGETARY PRICE 14 Lacs

OFFER-2

DIAGNOSTIC AND OPERATING LAPROSCOPY SET WITH HAND INSTRUMENT

DESCRIPTION	QUANTITY
AESCLAP, GERMANY MAKE HIGH END DIAGNOSTIC AND OPERATING LAPAROSCOPY SYSTEM.	
SYSTEM	One
❖ 3-CHIP CAMERA SYSTEM PAL W.LENS	One
❖ XENON LIGHT SOURCE 180 WATT	One
❖ LIGHTCABLE	One
❖ 20L INSUFFLATOR	One
❖ 0 DEGREE TELESCOPE	One
❖ CO2 CYLINDER	One
❖ LCD TV (SONY/SAMSUNG)	One
❖ DIATHERMY MACHINE	

HAND INSTRUMENT

❖ VERESS NEEDLE	One
❖ DESSECTOR (MARYLAND)	One
❖ GRASPER	Two
❖ CLIP APPLICATOR	One
❖ SUCTION AND IRRIGATION CANNULA	One
❖ ELECTRODE, HOOK (BALL)	One
❖ TROCAR AND CANNULA (5 MM)	Two
❖ TROCAR AND CANNULA (10 MM)	Two
❖ DIATHERMY CABLE	One
❖ GALL BLADDER EXTRACTOR	One
❖ REDUCER	One
❖ TROLLEY FOR LAPROSCOPY SYSTEM	One
❖ STABILIZER	One

BUDGETARY PRICE 22 LACS



Government of West Bengal
Directorate of Health Services
State Family Welfare Bureau
Swasthya Bhavan, A- wing, 3rd Floor
GN- 29, Sector- V, Salt Lake
Kolkata- 700091

Tele- 033 2357 2873, Fax- 033 23573680

e. mail- sfwo@wbhealth.gov.in

Memo No- H/SFWB/777

Date - 16/09/2011

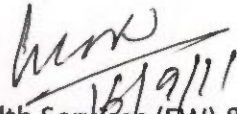
To

✓ The Director, SUDA
Ilgus Bhavan

Sub: Fund under urban RCH

This is a matter of concern that Rs.35,52,964/- was released to you during 2010-11 vide cheque No. 962741 Dated 28/02/2011 for betterment of service delivery at 29 identified maternity homes but till date you had not submitted any expenditure. It is expected that the fund was expensed for the purpose it was provided. You are requested to submit the utilization certificate along with statement of expenditure immediately.

This is for your further information that Government of India had approved Rs. 58.00 lakhs during the current financial year for the same purpose. You are requested to submit proposal of requirement of fund for 29 Maternity Homes within 15 days of receipt of this memo otherwise the fund will be reallocated to other units for providing services to the Urban area. The expenditure to be made within February 2011 and the utilization to be submitted latest by 31st March 2011.

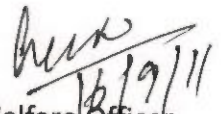

16/9/11
Jt. Director of Health Services (FW) &
State Family Welfare Officer

Memo No. H/SFWB/ 777/1(2)

Date: 16/09/2011

Copy for information to:

1. Commissioner (FW) & Secretary
2. Controller of Finance & Jt. DHS.


16/9/11
State Family Welfare Officer

Government of West Bengal
Directorate of Health Services
State Family Welfare Bureau
Swasthya Bhavan, A-wing, 3rd Floor
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This is for your further information that Government of India had approved Rs. 58.00 lakhs during the current financial year for the same purpose. You are requested to submit proposal of requirement of fund for 29 Maternity Homes within 15 days of receipt of this memo otherwise the fund will be reallocated to other units for providing services to the Urban area. The expenditure to be made within February 2011 and the utilization to be submitted latest by 31st March 2011.

[Signature]
16/9/11
Jt. Director of Health Services (FW) &
State Family Welfare Officer

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[Signature]
16/9/11
State Family Welfare Officer