

# **Uttar Pradesh Medical Supplies Corporation Limited**

(A Govt. of Uttar Pradesh Undertaking)

Registered Office: SUDA Bhawan, 7/23, Sector-7, Gomti Nagar Extension, Lucknow-226002 E-Mail: <a href="mailto:drugs@upmsc.in">drugs@upmsc.in</a> Website: <a href="mailto:www.upmsc.in">www.upmsc.in</a> Contact Number: 0522-2838102

### Corrigendum-1 date- 01.06.2024

With reference to tender no. UPMSCL/Drugs-211/01 dated 20.05.02024 a corrigendum is being issued as follows:

#### A. Date Corrigendum

Reference of Tender Document	Existing Date	Revised Date	
Last Date and Time for Online	03 June 2024 UPTO 15:00 Hrs	07 June 2024 UPTO 15:00 Hrs	
Submission of Tender			
Date and Time of Opening of Technical	03 June 2024 UPTO 15:30 Hrs	07 June 2024 UPTO 15:30 Hrs	
BID-COVER 'A'			

#### B-Technical corrigendum details for Annexure-A (Schedule of Requirement)

Sr No.	Drug Code	Item Description	Existing shelf life (in months)	Revised shelf life (inmonths)
1	D040077	Bedaquiline (BDQ) 100 mg, 188 Tab in Jar	36	24

#### C-Revised Format - VI, Refer Annexure- A

Note: Rate should be quoted per tab/per capsule/per FDC tab

All other terms & conditions of the tender document shall remain same.

MANAGING DIRECTOR UPMSCL

## <u>Annexure-A</u> Revised Format – VI

### AVERAGE ANNUAL TURNOVER CERTIFICATE

Γο,
Managing Director, UPMSCL Ltd.
SUDA Bhawan, 7/23, Sector-7, Gomti Nagar Extension,
Lucknow, Uttar Pradesh-226010
We hereby certify that $\underline{\mathbf{M/s}}$ (the name of participant in the
tender) who is participating the tender for Supply of Drugs, called by UPMSCL Ltd. Lucknow, vide Tender reference
numberhas a Pharmaceutical manufacturing/Sales turnover given as below:-
Turnover in the year of 2020- 21 RS.
Γurnover in the year of 2021-22 RS.
Turnover in the year of 2022-23 RS.
The above information is correct and true.
Office seal:
Signature
Signature Name of Proprietor / Partner/Authorized Signatory of bidder
-
Name of Proprietor / Partner/Authorized Signatory of bidder
Name of Proprietor / Partner/Authorized Signatory of bidder
Name of Proprietor / Partner/Authorized Signatory of bidder
Name of Proprietor / Partner/Authorized Signatory of bidder with firm's rubber stamp/seal  CETRIFIED BY CHARTERED ACCOUNTANT (CA)
Name of Proprietor / Partner/Authorized Signatory of bidder with firm's rubber stamp/seal  CETRIFIED BY CHARTERED ACCOUNTANT (CA)  Name of Chartered Accountant (In capital letter):
Name of Proprietor / Partner/Authorized Signatory of bidder with firm's rubber stamp/seal  CETRIFIED BY CHARTERED ACCOUNTANT (CA)
Name of Proprietor / Partner/Authorized Signatory of bidder with firm's rubber stamp/seal  CETRIFIED BY CHARTERED ACCOUNTANT (CA)  Name of Chartered Accountant (In capital letter):
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Name of Proprietor / Partner/Authorized Signatory of bidder with firm's rubber stamp/seal  CETRIFIED BY CHARTERED ACCOUNTANT (CA)  Name of Chartered Accountant (In capital letter):  Regd. No. of Chartered Accountant:
Name of Proprietor / Partner/Authorized Signatory of bidder with firm's rubber stamp/seal  CETRIFIED BY CHARTERED ACCOUNTANT (CA)  Name of Chartered Accountant (In capital letter):  Regd. No. of Chartered Accountant:  NOTE: The turnover of other than participant will not be accepted. Audited balance sheet & profit & loss statement for last three years (Self attested & Certified by CA shall also be enclosed as proof of the claim).
Name of Proprietor / Partner/Authorized Signatory of bidder with firm's rubber stamp/seal  CETRIFIED BY CHARTERED ACCOUNTANT (CA)  Name of Chartered Accountant (In capital letter):  Regd. No. of Chartered Accountant:  NOTE: The turnover of other than participant will not be accepted. Audited balance sheet & profit & loss statement