

CALIBRATION QUOTATION



Sunshine Biomedical Solutions
No:68, First Floor, Poomagal Main Road, Ekkatuthangal,
Chennai, Tamil Nadu 600032
E-Mail: sales1.sunshine2013@gmail.com
Web: www.sunshinebiomedical.com
GSTIN: 33BABPK7432A1ZC, **PAN:** BABPK7432A

To,
The Medical Officer (Mudiyanur)
Government Primary Health Centre, Mudiyanur, Kallakurichi-606203
GSTIN :
Phone No : 9789770067

Order No : **CALQ/0750/23-24**
Date : **03/10/2023**
Reference No : **CALQ/0750/23-24**
Reference Date : **03/10/2023**

Dear Sir ,

Sub : Quotation for your Enquiry - reg
Kind Attn : We are pleased to offer our lowest prices for the following products as requested by you.

S.NO	Part Code	Equipment Name	Parameter	HSN	QTY	RATE	VALUE
1	CAL-001	Semi Auto Analyzer Calibration Charges	Electrical Safety Test	9987	1.00	350.00	350.00
2	CAL-002	Centrifuge Calibration Charges	RPM Test	9987	1.00	370.00	370.00
3	CAL-003	Microscope Calibration Charges	Electrical Safety Test	9987	1.00	350.00	350.00
4	CAL-004	Micropipette Calibration Charges	Volume Test	9987	4.00	400.00	1,600.00
TOTAL					7.00		2,670.00

Terms and conditions :

Payment 100% In Advance
Order Should Be Placed In Favour Of Sunshine Biomedical Solutions
Work Shedule With in Two Weeks From The Date Of Order Confirmation
GST As Extra To Be Paid
Quote valid Till 30 Days

CGST	9.00 %	240.30
SGST	9.00 %	240.30
Round Off	0.00 %	0.40

Net Amount (in Words) : INR THREE THOUSAND ONE HUNDRED FIFTY-ONE ONLY

Net Amount ₹ 3,151.00

Remarks :

Bank Details

Bank Name and Branch : Axis Bank and 11 th Avenue Ashok Nagar
Account No : 919030011610953
IFSC Code : UTIB0003334

For **Sunshine Biomedical Solutions**

Authorized Signatory