

Rajasthan Grameen Aajeevika Vikas Parishad

Third Floor, RFC Block, Udyog Bhawan, Tilak Marg, Jaipur, Rajasthan

Phone No. 2227011, 4259914, Fax-2227723

No.F8(48)RD/RGAVP/2015 / 50561

Jaipur, Dated : 10/11/2016

NOTICE BOARD

Dear Sir

Sub:- Invitation for Quotation for Printing Services .

You are invited to submit your most competitive quotations for Selection/empanelment of Printing Services for one year. The detailed specifications are given below:-

Sr. N.	Brief Description of the Goods	Specification*	Quantity	Delivery Period	Place of Delivery	Installation Requirement if any
1	Annual Report	About 30 pages, Colored printing on A4 size Glossy Paper with Cover and Back page of 140 GSM and inner pages of 100 GSM	600	1 Month	Udyog Bhawan	No
2	Visiting Cards	As per requirement	As per requirement	1 year	Udyog Bhawan	No
3	ID Cards	As per requirement	As per requirement	1 Year	Udyog Bhawan	No
4	Letter Heads	A4 and A5 size letter heads with colour printing on 100 GSM paper	1000 each	1 month	Udyog Bhawan	No

Government of India has received a credit from the International Development Association (IDA) i.e. World Bank.

You are requested to provide your quotation in a sealed envelope clearly superscripted as "Quotation for Printing services" at office address mentioned above during office hours latest by November 21th, 2016, 5.00 pm.

-Sd-
SPM(Admin & HR)
RGAVP

FORMAT OF QUOTATION
(In letterhead of the supplier with seal)

To: _____

Date: - _____

Sr. N.	Description of Item	Unit Quoted	Rate Quoted in INR	Numbers Quoted	Total Price	Delivery Within days

Gross Total cost: RS. _____

We agree to supply the above goods in accordance with the technical specifications for a total contract price of Rs. _____ (Amount in figures) (Rupees _____ amount in words) as per the delivery schedule given in Quotation above.

We also confirm that the normal commercial warranty/guarantee of _____ months shall apply to the offered goods.

We confirm that the above offer is valid for _____ days.

We hereby certify that we have taken steps to ensure that no person acting for us or on our behalf will engage in fraudulent or corrupt practices.

Signature of Supplier

Name: _____

Contact No. _____

(Seal)