एचएलएल लाइफ़केयर लिमिटेड HLL LIFECARE LIMITED (भारत सरकार का उद्यम) (A GOVT.OF INDIA ENTERPRISE) पेरूरकडा पी.ओ. PEROORKADA. P.O,

तिरुवनन्तपुरम-695005 THIRUVANANTHAPURAM-69005

PHONE NO:0471 2435325; FAX NO:0471 2435013; EMAIL: materialspft@lifecarehll.com

Tender No: PUR/08/R1/PQ/OCP /1-REV/2015-16

AMENDMENT NO.1 September 11, 2015

Sub: Amendment to the tender for Supply of Wallet & Carton Ref: Tender No: PUR/08/R1/PQ/OCP /1-REV/2015-16

With reference to the above, we hereby incorporate the following amendment to the tender documents as detailed below:-

Amendment No. 01

Revised Schedule A -Specification for Belgaum enclosed.

SENIOR MANAGER (PURCHASE)

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SCHEDULE - A Page 1 of 1

TECHNICAL BID

SPECIFICATION: WALLETS & CARTONS

A.WALLETS /CATCH COVER FOR W 01-MN:

1.SIZE:23 X 11.5 CM (OPEN WALLET)
2.GSM: 250(minimum)

3.WHITE BACK DUPLEX BOARD, with "Matt UV-Varnish" after printing .PRINTED IN FIVE COLOURS ON FRONT SIDE and BACK SIDE AS PER ARTWORK. 4.CUT, CREASED, & SUPPLIED FLAT. Supply in bundles of 100.

B.WALLETS FOR W02-MA:

250 GSM. WHITE BACK DUPLEX BOARD ,with "Matt UV -Varnish" after printing. PRINTED IN FIVE COLOURS ON FRONT SIDE and BACK SIDE AS PER ARTWORK. Dimensions(ID): 92 (L) X 53 (W) X 10.5 (H) mm. Batch stamping area should be free from lamination.

BLACK COLOUR PRINTING MATTER BACK SIDE AS PER ARTWORK No of colours for printing= 05.

Supply in bundles of 100.

C.WALLETS FOR W03-MD:

250 GSM. Grey back duplex board ,with "Matt UV -Varnish".
PRINTED IN FIVE COLOURS ON FRONT SIDE and BACK SIDE AS PER ARTWORK.
Dimensions(ID): 92 (L) X 53 (W) X 14.0 (H) mm. Batch stamping area should be free from lamination.
No of colours for printing= 05
Supply in bundles of 100.

D.CARTONS FOR D01-MD:

3 Ply ' E ' flute Duplex Board with top open. Printed as per artwork. 450 GSM. Dimensions(ID): $150(L) \times 100 (W) \times 60 (H)$ mm. 250 GSM Duplex Board as the top layer and other inner layers are virgin craft paper of 100 GSM each

We hereby agree to supply the above material as per the specification listed herein.

PLACE: NAME & SIGNATURE OF THE APPLICANT

DATE: (WITH OFFICE SEAL)

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