



STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

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

Ref No. SUDA-Health/127/08/245

Date 16.11.2017

From : Director, SUDA

To : The Chairman
Naihati Municipality

Sub. : Verification of site for installation of MRI Machine.

Sir,

I am to refer to your communication vide no. 2675/MC-11 dt. 07.11.2017 addressed to the Jt. Secretary, UD & MA Department, with a request for verification of site for installation of MRI machine.

In this context, you are requested to let this office know regarding provision of fund for procurement & installation of said machine, required manpower for the purpose, feasibility & permissibility as well as operation & maintenance.

Thanking you.

Yours faithfully,

Director, SUDA

SUDA-Health/127/08/245/1(1)

Dt. .. 16.11.2017

CC

Ms. Sujata Ghosh, Special Secretary, UD & MA Department

Director, SUDA

e-mail. on 22-11-17

11/8/2017

Gmail - Fwd: Verification of site for installation of MRI machine under Naihati Municipality



PO (H) S

Director, SUDA <wbsudadir@gmail.com>

Fwd: Verification of site for installation of MRI machine under Naihati Municipality

1 message

Joint Secretary MA & UD Department <jsudmadeptt@gmail.com>
To: "Director, SUDA" <wbsudadir@gmail.com>
Cc: OnKar Singh <secy.ma-wb@gov.in>

Tue, Nov 7, 2017 at 5:24 PM

----- Forwarded message -----


From: **Chairperson Naihati** <cnaihati@yahoo.com>
Date: Tue, Nov 7, 2017 at 4:45 PM
Subject: Verification of site for installation of MRI machine under Naihati Municipality
To: Joint Secretary MA & UD Department <jsudmadeptt@gmail.com>

Sir,
Please download the attachment file

Thanking you,

--
- Regards

Special Secretary
Urban Development & Municipal Affairs Department

 **Installation of MRI Machine.pdf**
85K

Memo no...2675/MC-11

Dated...07/11/2017

Office of the Board of Councillors
NAIHATI

Tel: +91 33 2581 2098/ 2580 0290

From
Sri Ashok Chatterjee
Chairman,
Naihati Municipality

To
The Joint Secretary,
To the Govt. Of West Bengal,
Deptt. Of Municipal Affairs,
Poura Prashasan Bhawan
DD-1, Sector-1
Salt Lake City, Kolkata 700 064

Sub: Request for verification of site for installation of MRI Machine.

Ref: Your Memo No. 848/MA/P/C-10/MISC.-7/2015 dt. 08.09.2017

Dear Madam,

In reference to the above, this is to inform you that we are interested to install one MRI Machine at our office compound adjacent to the existing ESOPD & Maternity and Multi-specialty Hospital. One Model Plan has been received from the office of Managing Director & Secretary, Health & Family Welfare Department, Swasthya Bhaban, Salt Lake, Kolkata - 900 091. You are requested to make it convenient to send a team of Technical Expert to visit our office and give us advice for selection of a suitable place for construction of building for the same.

Please treat it as extremely urgent.

Thanking You,

Yours faithfully,

Ashok
7.11.17
Chairman
Naihati Municipality

Chairman
NAIHATI MUNICIPALITY
North 24 Parganas

No. HAU/03

Office of the Board of Councillors
NAIHATI

From: Dr. N.N.Saha
Assistant Health Officer

Chairman / Vice-Chairman
NAIHATI MUNICIPALITY



Phone : 2581-2098

Dated 21.5.2012

To, The Project Officer (Health)
S.U.D.A.
Ilgus Bhavan,
Kolkata - 700 106

Sub : Submission of Growth Chart
CUDP-III & IPP-VIII.

Chhomi
30.5.12

Sir,

I am sending herewith the Growth Chart CUDP-III & IPP-VIII for the Month of February 2012 & March 2012 for your doing the needful.

Please acknowledge the same and oblige.

Thanking You.

Yours faithfully

Maha

Assistant Health Officer
Naihati Municipality

Assistant Health Officer
Naihati Municipality

.....**Naihati**..... Municipal Corporation / Municipality

Reporting Format for Growth Monitoring of Under-five Children
Month of FEBRUARY 2012 & MARCH 2012

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with					No. of Mal-nutrition cases	
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
5177	3584	2266	938	317	60	03	60	03

Maha
 Assistant Health Officer
 Naihati Municipality

Memo No : HAU/14 Date : 14.8.12

Ch. M. M.
16.8.12

Office of the Board of Councillor
NAIHATI

Dr. N. N. SAHA
Assistant Health Officer



To
The Project Officer
S.U.D.A.
Ilgus Bhavan,
kolkata - 700106

Sub : Submission of Growth Chart Report.

Sir,

I am sending herewith the Growth Chart Report for the Month
of June 2012 to . JULY 2012 for your doing the needful.

Please acknowledge the same and oblige.

Maha 14/8/2012
Assistant Health Officer
Naihati Municipality

Assistant Health Officer
Naihati Municipality

Narhati Municipal Corporation / Municipality

Reporting Form for Growth Monitoring of Under-five Children
Months of JUNE 9 JULY 2012

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with					No. of Mal-nutrition cases	
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
4668	3243	2196	753	251	42	01	42	01

Mahr

14/8/2012

Assistant Health Officer
Narhati 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/127/08/343

Date12.03.2012

From : Director, SUDA

**To : Sri B.C. Patra
Jt. Secretary
Department of Municipal Affairs
Writers' Building.**

Sub. : Posting of a Health Officer in Naihati Municipality.

Sir,

Enclosed kindly find herewith communication of the Chairman, Naihati Municipality vide no. 3230/mc-11 dt. 01.03.2012, which speaks for itself.

This is to inform you that the then Health Officer at Naihati Municipality is one of 36 persons who had been engaged in the permanent post as per Notification of the Department of MA bearing no. 522/MA/O/C-9/3R-1/2004 dt. 21.09.2007 (copy enclosed for ready reference).

The Chairman, Naihati Municipality stated that the said Health Officer has retired from his service on 31.12.2011 and he requested for issuance of necessary guideline for filling up the vacancy for the post of Health Officer.

Hence, you are requested to look into the matter to fill up the said vacancy at the earliest.

Thanking you.

Yours faithfully,

Enclo. : As stated.


Director, SUDA

SUDA-Health/127/08/343/1(1)

Dt. .. 12.03.2012

CC

Chairman, Naihati Municipality


Director, SUDA

(1)	(2)	(3)
31.	Dr. Subrata Pal	Nabadwip
32.	Dr. Tepan Kr. Indra	Santipur
33.	Dr. Abir Banerjee	Bankura
34.	Dr. Pralay Kr. Saha	Jalpaiguri
35.	Dr. Mohit Kr. Saha	
36.	Dr. Ujjwal Mani Mukhopadhyay	Asansol M.C.

NON-KMA

The Health Officers shall be in the scale of pay of Rs. 8,000-13,500/- with admissible Dearness Allowance, House Rent Allowance and Medical Allowance.

By order of the Governor,
sd/- S. Bhowmick,

Jt. Secy. to the Government of W. Bengal.

No. 522/1(12)/MA/0/C-9/3R-1/2004

Dated, the 21st Sept., 2007.

Copy forwarded for information and necessary action to -

1. The Pr. Accountant General (A&E), West Bengal, Treasury Buildings, Kolkata-1.
2. The Finance Department, Government of West Bengal.
3. The Director of Local Bodies, W.B., Purta Bhawan, Salt Lake City, Kolkata-91.
4. Health & Family Welfare Department, Swasthya Bhawan, GN-29, Sector-V, Salt Lake City, Kolkata-91.
5. The District Magistrate, _____, P.O. _____, Dist. _____.
6. The Treasury Officer, _____, P.O. _____, Dist. _____.
7. The Sub-Divisional Officer, _____, P.O. _____, Dist. _____.
8. The Mayor /Chairman, _____, Corporation / Municipality, P.O. _____, Dist. _____.
9. Dr. _____, Health Officer, _____, Municipality, P.O. _____, Dist. _____.
10. P.S. to Minister-in-Charge of this Department.
11. P.A. to Secretary of this Department.
12. Guard file of Cell-9.


Jt. Secy. to the Government of W. Bengal.

sm.

No. 522/MK/6/C-9/3R-1/2004

Dated, the 21st Sept., 2007.

NOTIFICATION

The matter of appointment of Health Officers on contractual remuneration on a regular basis was under consideration of the State Government. After due consideration of the matter, the Governor is pleased to consider appointment of following 35 Health Officers to the post of Health Officers in the Municipalities mentioned against the names w.e.f. 01.08.07.

Sl. No.	Name of the Health Officer	Name of the ULB.
1.	Dr. Ajay Kr. Mukhopadhyay	Baranagar
2.	Dr. Tapabrata Chowdhury	Barasat
3.	Dr. Ashutosh Chowdhury X	Barrackpore - Retired
4.	Dr. Susanta Kr. Paul	Dum Dum
5.	Dr. Manju Maddali X	Garulia - Resigned
6.	Dr. Manas Das (NON-KMA)	Habra
7.	Dr. Diganta Chatterjee	Halisahar
8.	Dr. Goutam Kr. Saha	Kanchrapara
9.	Dr. Ratan Majumdar	Khardah
10.	Dr. Chandan Chatterjee X	Madhyamgram - Retired
11.	Dr. Surya Kr. Bhattacharya	Naihati - Retired
12.	Dr. Sankar Singha Roy	New Barrackpur
13.	Dr. Apurba Kr. Pal X	North Barrackpur - died
14.	Dr. (Mrs.) Shova Gupta (Karmakar)	Rajarhat Gopalpur
15.	Dr. Samir Kr. Sengupta X	Pahhati - Retired
16.	Dr. (Mrs.) Shika Malakar	North Dum Dum
17.	Dr. Pankaj Kr. Gupta	South Dum Dum
18.	Dr. Gobindalal Sharma	Titagarh - Retired
19.	Dr. Pradyut Baran Chowdhury	Budge Budge
20.	Dr. Shaikh Moaim Ali	Maheshtala
21.	Dr. Subhas Kr. Debnath	Dalpur-Sonarpur
22.	Dr. Mita Bandopadhyay - NON-KMA	Suri
23.	Dr. Pradyut Kanti Mitra - NON-KMA	Cooch Behar
24.	Dr. Sunil-Kr. Das - NON-KMA	Siliguri M.C.
25.	Dr. Swapan Kr. Mondal	Uluberia
26.	Dr. Partha Sarathi Bhattacharya	Baidyabati
27.	Dr. (Mrs.) Suchita Nandi Majumder	Bhadreswar
28.	Dr. Kartick Ch. Ghosh X	Chempdeni - Retired
29.	Dr. Deb Kr. Ghosh	Konnagar
30.	Dr. Shyamal Kr. Ghosh - NON-KMA	Krishnanagar

Contd. 2.



No. 3230/me-11

Phone No.: 2581-2098

Dated : 01-03-12

Office of the Board of Councilors

NAIHATI

From : Sri Dhillon Sarkar
Chairman,
NAIHATI MUNICIPALITY

To

The Director ,
State Urban Development Agency,
Saltlake, Kolkata.

Sir,

Sub:: Posting of a Health Officer.

With reference to above, this is to inform you that the existing Health Officer Sri Surya

g. K/c. Bhattacharyya has retired from his service on 31st December, 2011 and in absence of a Health Officer, we are facing difficulties in providing services to the people of this area through E.S.O.P.D Maternity/ R.D.C.

Hence, I shall be highly obliged if you kindly take necessary steps in filling up of the vacancy as arised.

Thanking you,

Yours faithfully,

Saiton Sarker
Chairman, 1.3.12

Naihati Municipality

Chairman

Naihati Municipality
North 24 Parganas

Copy forwarded for information and taking necessary action to:-

1, The Director, Directorate of Local Bodies, Govt. of West Bengal, Purta Bhaban (1st floor), Kolkata. 2) The Member, C.I.C (Health), Naihati Municipality, 3) The Executive Officer, Naihati Municipality.

Saiton Sarker
Chairman, 1.3.12

Naihati Municipality

Chairman
Naihati Municipality
North 24 Parganas

No. HAU/39



Office of the Board of Councillors
NAIHATI

Phone : 2581-2098

From :
Dr. Surya Kr. Bhattacharya
Health Officer

Dated 14.12.2011

Chairman / Vice-Chairman
NAIHATI MUNICIPALITY

To,
The Project Officer(Health)
S.U.D.A.
Ilgus Bhavan,
Kolkata - 700 106

Sub : Submission of Growth Chart
CUDP-III & IPP-VIII.

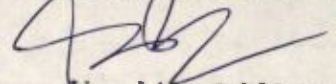
Sir,

I am sending herewith the Growth Chart CUDP-III & IPP-VIII for the Month of OCTOBER 2011 & NOVEMBER 2011 for Your doing the needful.

Please acknowledge the same and oblige.

Thanking You.

Yours faithfully



Health Officer

Naihati Municipality

Health Officer

Naihati Municipality



.....**NAIHATI**..... Municipal Corporation / Municipality

Reporting Format for Growth Monitoring of Under-Five Children
 MONTH OF: **OCTOBER 2011 to NOVEMBER 2011**

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with					No. of Mal-nutrition cases	
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
5304	3741	2361	964	362	51	03	51	03

No. HAU/36



Office of the Board of Councillors
NAIHATI

Phone : 2581-2098

From :

Dr. Surya Kr. Bhattacharya
Health Officer

Chairman / Vice-Chairman
NAIHATI MUNICIPALITY

Dated 23.11.2011

To,

The Project Officer(Health)
S.U.D.A.
Ilgus Bhavan,
Kolkata - 700 106

Sub : Submission of Growth Chart
CUDP-III & IPP-VIII.

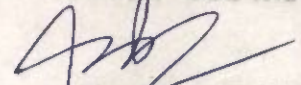
Sir,

I am sending herewith the Growth Chart CUDP-III & IPP-VIII for the Month of August 2011 & September 2011 for Your doing the needful.

Please acknowledge the same and oblige.

Thanking You.

Yours faithfully



Health Officer

Naihati Municipality

Health Officer

Naihati Municipality



.....NAIHATI..... Municipal Corporation / Municipality

Reporting Format for Growth Monitoring of Under-Five Children
MONTH OF : AUGUST 2011 to SEPTEMBER 2011

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with					No. of Mal-nutrition cases	
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
5459	3700	2308	993	354	42	03	42	03


Health Officer
Naihati Municipality

STATE URBAN DEVELOPMENT AGENCY**HEALTH WING
"ILGUS BHAVAN"****H-C BLOCK, SECTOR-III, BIDHANNAGAR, CALCUTTA-700 091
West Bengal**Ref No.**SUDA-Health/127/08/246**Date**09.12.2011****From : Project Officer
Health, SUDA****To : The Chairman
Naihati Municipality****Sub. : Observations of Officials, Health Wing, SUDA while visiting ESOPD &
MH under IPP-VIII on 24.11.2011.**

Sir,

While visiting ESOPD & MH under IPP-VIII on 24.11.2011, Officials of Health Wing, SUDA met with beneficiaries who have expressed satisfaction regarding availability of services and supply of medicine. However, further observations made by them are as under :

- Stock register only for procured medicine is being maintained since financial year 2010-11 as was produced by the Storekeeper. There is no documentation regarding dispensing of medicine in ESOPD. But dispensing register is being maintained by the Maternity Home.
- Pharmacist of ESOPD receives the stock without any work order. Hence, quantity of medicine received by the Pharmacist could not be tallied against work order.
- Medicine stock seemed to be in excess, as a result it is apprehended that many of the medicine may not be utilized within due expiry date.
- Requisition of medicine for both ESOPD & MH could not be shown by the ULB.
- Procurement process including receipt and distribution of medicine by the ULB shall be strengthened.

You are requested to look into the matter and corrective measures be undertaken towards strengthening of services of ESOPD & MH.

Thanking you.

Yours faithfully,


Director, SUDA

Tour report for Naihati Municipality

Date of Visit: 24.11.2011

Purpose of Visit: - Checking of accounts (theoretically and financially) regarding procurement of Medicine at ESOPD of the aforesaid municipality in response to a representation received by this office from -----

1. Met Vice-chairman, health officer, C/I c- Health, pharmacist and clerk-cum-store keeper
2. Checked stock registers, store and the pharmacy.

Observation: - We have examined current procurement of medicine and also the medicine stock of ESOPD store and also the allotment to different ESOPD clinics and came up with the following findings:-

1. Medicine stock in the store seems to be in excess of the required amount. This may cause a huge blockage of fund, and besides that many of the medicines approached the expiry date which may cause wastage of the costly medicines in the store.
2. No registers namely stock, daily usage of medicine and allotment of medicines to different clinics maintained as per proforma.
3. The Pharmacist of the ESOPD receives the stock without any work order and he also has no outflow register for dispensing of medicine to patients. So, stock under his hand could not be tallied.
4. Old stock could not be checked as they couldnot furnish previous stock registers and it was told by the storekeeper that they did not maintain stock registers previously. The stock registers are being maintained currently w.e.f the financial year 2010-11.
5. Though on the checking of medicine usage register in the MH it was seen that proper and upto date stock was maintained.
6. Photocopy of last received stock of medicines along with the date of supply, name of medicines, date of expiry, qty of medicine is enclosed herewith, which shows those medicines having a considerable life span.
7. Had discussion with the patients in the OPD, who are satisfied with the service and supply of medicines.

SUGGESSTIONS GIVEN:-

1. Stock registers, daily consumption registers should be maintained properly.
2. The ULB was advised to procure medicines which are needed in the concerned OPD clinics, and the procurement order should be initiated by a technical person and not to buy medicines in excess, so as to prevent the blockage of funds and medicine wastage.

Date: - 29.11.2011

Sunanda Basu.
(H. Sunanda Dasu, AFO)
Dipankar Chowdhury.
(Dipankar Chowdhury, F.O)

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

F A X NO. -

39851542

SALE BILL : FI / MUN / 11 - 12 / 184
 BILL DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
 Naihati Municipality
 P.O. - Naihati
 West Bengal

**MUNICIPAL OFFICE
 NAIHATI**
 14 NOV 2011
 8722/mc-11

ORDER NO 146 / ESOPD / 10

DATE - 07.09.2011

ESOPD

CHALLAN 184

2ND. QTR. 2011-12

DATE - 16.09.2011

SL	DESCRIPTION	Date BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	TAB. PARACETAMOL 500	H 948	7/14		2000Tabs	3.60	10'S	720.00	
2	TAB. ATEN 50MG	BD 11039	12/13	840 Tabs					
		BD 10545	7/13	160 Tabs	1000Tabs	46.00	14'S	3285.71	
3	TAB. AMLODIPINE 5MG	9743865	6/14		1000Tabs	35.00	100'S	350.00	
4	TAB. BRUFEN 400	O8801D7	7/14		2000Tabs	9.10	15'S	1213.33	
5	TAB. FLUCONAZOLE 150	O206J-CN	12/13	160 Tabs					
		O3120 - CN	5/13	40 Tabs	200Tabs	6.00	TAB	1200.00	
6	BETNOVATE C OINT.	N 4540	7/13	95 Tubes					
		N 4275	5/13	5 Tubes	100 Tubes	24.90	TUBE	2490.00	
7	PHENYLE LIQ.	O90911 - 2	3/13		20 Jars	169.00	JAR	3380.00	
8	TAB. METOCHLOPRAMIDE 10	RT 110629	5/13		500 Tabs	2.80	10'S	140.00	
9	PROMETHAZINE SYRUP	PZ 59	2/12	30 Phiels					
		PZ 63	12/12	70 Phiels	100 Phiels	18.00	100ML	1800.00	
10	TAB. DERIPHYLLINE	H 698	7/13		500 Tabs	40.00	100'S	200.00	
11	TAB. ELTROXIN 50MG	N 511	7/13		25 Phiels	58.00	PHIEL	1450.00	
12	TAB. ELTROXIN 100MG	NC 823	6/13		25 Phiels	103.00	PHIEL	2575.00	
13	INJ. LIGNOCAIN 2% with AD	BC 293	7/12		10 Vails	12.50	VAIL	125.00	
14	TAB. PARACETAMOL KID	H 950	7/14		2000Tabs	18.00	100'S	360.00	
15	TAB. NORFLOXACIN 400	NF 1103	1/13		2000Tabs	12.80	10'S	2560.00	
16	TAB. ISOSORBIDE DINITRA.	SBB0006	2/13		1000Tabs	40.00	50'S	800.00	
17	SILVER SULPHADIAZINE	SPG 015	6/13		500 Tubes	12.80	TUBE	6400.00	

29049.05

29049.05

Remarks :
 Rupees :

Subject to Kolkata Jurisdiction

14/11/11

For Florence India
 [Signature]
 Authorised Signatory

CHALLAN

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

FAX NO. -

39851542

SALE CHALLAN : 184

CHALLAN DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
Naihati Municipality
P.O. - Naihati
West Bengal

ORDER NO 146 / ESOPD / 10

DATE - 07.09.2011

ESOPD
2ND. QTR. 2011-12

SL	DESCRIPTION	BATCH	EXP.	QUANTITY	TOTAL	MFG	EXP	
1	TAB. PARACETAMOL 500	H 948			2000Tabs	8/11	7/14	03
2	TAB. ATEN 50MG	BD 11039		840 Tabs		1/11	12/13	↓
		BD 10545		160 Tabs	1000Tabs	8/10	7/13	125
3	TAB. AMLODIPINE 5MG	9743865			1000Tabs	7/11	6/14	130
4	TAB. BRUFEN 400	O8801D7			2000Tabs	8/11	7/14	08
5	TAB. FLUCONAZOLE 150	O206J-CN		160 Tabs		6/11	12/13	
		O3120 - CN		40 Tabs	200Tabs	12/10	5/13	280
6	BETNOVATE C OINT.	N 4540		95 Tubes		8/11	7/13	275
		N 4275		5 Tubes	100 Tubes	4/11	5/13	↓
7	PHENYLE LIQ.	O90911 - 2			20 Jars	9/11	3/13	238
8	TAB. METOCHLOPRAMIDE 10	RT 110629			500 Tabs	6/11	5/13	141
9	PROMETHAZINE SYRUP	PZ 59		30 Phiels		9/10	2/12	↓
		PZ 63		70 Phiels	100 Phiels	7/11	12/12	172
10	TAB. DERIPHYLLINE	H 698			500 Tabs	8/10	7/13	158
11	TAB. ELTROXIN 50MG	N 511			25 Phiels	8/11	7/13	106
12	TAB. ELTROXIN 100MG	NC 823			25 Phiels	7/11	6/13	107
13	INJ. LIGNOCAIN 2% with AD	BC 293			10 Vails	2/11	7/12	01
14	TAB. PARACETAMOL KID	H 950			2000Tabs	8/11	7/14	66
15	TAB. NORFLOXACIN 400	NF 1103			2000Tabs	2/11	1/13	26
16	TAB. ISOSORBIDE DINITRA.	SBB0006			1000Tabs	3/10	2/13	223
17	SILVER SULPHADIAZINE	SPG 015			500 Tubes	7/11	6/13	248

Remarks :

Basanta
Tabs
16.9.11

Subject to Kolkata Jurisdiction

For Florence India
[Signature]
Authorised Signatory

No. 146/ESOPD/10

Office of the Board of Councillors
NAIHATI

Phone No. : Dhatpara 2581-2098

Dated 07/09/11 200

To

The Florence India,
32, Ezra Street,
Kolkata - 700 001.

From: Sri Dhillen Sarkar

Chairman/~~Vice Chairman~~
NAIHATI MUNICIPALITY

Sub : Medicine Order for E.S.O.P.D. 2nd Quarter 2011 - 2012.

Dear Sir,

We hereby request you to supply the undermentioned order for
E.S.O.P.D. 2nd Quarter 2011 - 2012.

1. Tab. Paracetamol 500mg	2000Tabs	3.60	10s	Rs. 720.00
2. Tab. Aten 50mg	1000Tabs	46.00	14s	Rs. 3285.71
3. Tab. Amlodipine	1000Tabs	35.00	100s	Rs. 350.00
4. Tab. Brufen 400mg	2000Tabs	9.10	15s	Rs. 1213.33
5. Tab. Fucenazele 150mg	200Tabs	6.00	1s	Rs. 1200.00
6. Betnevate - C Oint.	100Tubes	24.90	Tube	Rs. 2490.00
7. Phenyle Liq. (5ltr)	20Jars	169.00	Jar	Rs. 3380.00
8. Tab. Metroclopramide 10mg	500Tabs	2.80	10s	Rs. 140.00
9. Syp. Promethazyme 100ml	100Phils	18.00	Phil	Rs. 1800.00
10. Tab. Depyfylline	500Tabs	40.00	100s	Rs. 200.00
11. Tab. Eltrexine 50mg	25Phils	58.00	Phil	Rs. 1450.00
12. Tab. Eltrexine 100mg	25Phils	103.00	Phil	Rs. 2575.00
13. Inj. Lignecain 2% with Adr. 30ml.	10Vials	12.50	Vial	Rs. 125.00
14. Tab. Paracetamol Kid	2000Tabs	1.80	10s	Rs. 360.00
15. Tab. Norflexacin 400mg	2000Tabs	12.80	10s	Rs. 2560.00
16. Tab. Ise Sarbide Dinit 10mg	1000Tabs	40.00	50s	Rs. 800.00
17. Silver Sulphadiazine Oint. 15gm	500Tubes	12.80	Tube	Rs. 6400.00

Total Rs. 29049.05

Rupes Twenty nine thousand forty nine & five paise only

Mem No :

Date :

Chairman
Naihati Municipality

1. F.O. Naihati Municipality

2. Actt. Naihati Municipality

Sri Dhillen Sarkar

7.9.11
Chairman
Naihati Municipality

07/09/11

No. 145/MAT/10

Office of the Board of Councillors
NAIHATI

Phone No. :- Bhatpara 2581-2098

Dated 07/09/11 200

To
The Florence India,
32, Ezra Street,
Kolkata - 700 001.

From:
Sri Dhillon Sarkar

Chairman/Vice-Chairman
NAIHATI MUNICIPALITY

Sub : Medicine Order for Maternity Home 2nd Quarter 2011 - 2012.

Dear Sir,

We hereby request you to supply the undermentioned order for Maternity Home 2nd quarter 2011 - 2012.

1. Silk (No. I)	25Rills	320.00	Rill	Rs.8000.00
2. Spinocain Needle 23 NO.	75Pcs	52.00	Pc	Rs.3900.00
3. Kit Kath - 18	100Pcs	10.80	Pc	Rs.1080.00
4. Leukepur - 3"	100Rills	82.00	Rill	Rs.8200.00

Total Rs. 21180.00

Rupes Twenty one Thousand one hundred eighty only

Memo No :

Date :

Chairman
Naihati Municipality

1. F.O. Naihati Municipality
2. Aett. Naihati Municipality

Sri Dhillon Sarkar
Chairman 7.9.11
Naihati Municipality

07/09/11

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

FAX NO. -

39851542

SALE BILL : FI / MUN / 11 - 12 / 183
 BILL DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS
 The Chairman
 Naihati Municipality
 P.O. - Naihati
 West Bengal

ORDER NO 146 / ESOPD / 10
 DATE - 07.09.2011
 CHALLAN 183
 DATE - 16.09.2011

ESOPD
 1ST. QTR. 2011-12

MUNICIPAL OFFICE
 NAIHATI
 14 NOV 2011
 8723/mc-11

SL	DESCRIPTION	No. Dats BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	TAB. AMOXYCILLIN 125	9743741	2/13		2000 Tabs	8.90	10'S	1780.00	
2	CAP. AMPI 250 + CLOXA 250	UCN 1042	2/13		5000 Caps	28.50	10'S	14250.00	
3	CAP. AMOXYCILLIN 250	9752008	4/13		5000 Caps	12.80	10'S	6400.00	
4	TAB. CIPROFLOXACIN 500	9749048	2/14		3000 Tabs	18.50	10'S	5550.00	
5	TAB. ERYTHROMYCIN 250	TER 576	10/12		3000 Tabs	30.00	10'S	9000.00	
6	TAB. ANTACID	O - 9003	1/14		5000 Tabs	3.20	10'S	1600.00	
7	TAB. RANITIDINE 150	TGL 11573	5/13		5000 Tabs	3.80	10'S	1900.00	
8	TAB. FAMOTIDINE 20	JK 11009	4/14	4900 Tabs					
		JK 11006	2/14	100 Tabs	5000 Tabs	2.40	10'S	1200.00	
9	TAB. FOLIC ACID	511130	4/13		15000 Tabs	1.40	10'S	2100.00	
10	TAB. FERROUS SULPHATE	CT - 110505	4/13		15000 Tabs	50.00	1000'S	750.00	
11	TAB. VITAMIN B COMPLEX	511190	6/13		10000 Tabs	2.00	10'S	2000.00	
12	TAB. DICYCLOMINE 10MG	910	1/13		1000 Tabs	3.50	10'S	350.00	
13	TROPICASYL PLUS DROP	S 11019	4/13		20 Phiels	26.90	PHIEL	538.00	
14	CANDIBIOTIC DROP	11110406	10/12		100 Phiels	43.90	PHIEL	4390.00	
15	CAP. AMOXY 125 + CLOXA 125	TA 2223	11/12		2000 Tabs	26.50	10'S	5300.00	
16	TAB. METROGYL 400	TM 81202	4/15		10000 Tabs	6.83	10'S	6830.00	
								63938.00	
								63938.00	

Rupees :

Subject to Kolkata Jurisdiction

14/11/11

For Florence India
[Signature]
 Authorised Signatory

CHALLAN

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL. NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

FAX NO. -

39851542

SALE CHALLAN : 183

CHALLAN DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
Naihati Municipality
P.O. - Naihati
West Bengal

ORDER NO 146 / ESOPD / 10

DATE - 07.09.2011

ESOPD

1ST. QTR. 2011-12

SL	DESCRIPTION	BATCH	QUANTITY	TOTAL	MFG	EXP.	
1	TAB. AMOXYCILLIN 125	9743741		2000 Tabs	3/11	2/13	16
2	CAP. AMPI 250 + CLOXA 250	UCN 1042		5000 Caps	3/11	2/13	242
3	CAP. AMOXYCILLIN 250	9752008		5000 Caps	5/11	4/13	11
4	TAB. CIPROFLOXACIN 500	9749048		3000 Tabs	3/11	2/14	21
5	TAB. ERYTHROMYCIN 250	TER 576		3000 Tabs	11/10	10/12	37
6	TAB. ANTACID	O - 9003		5000 Tabs	2/11	1/14	50
7	TAB. RANITIDINE 150	TGL 11573		5000 Tabs	6/11	5/13	70
8	TAB. FAMOTIDINE 20	JK 11009	4900 Tabs		5/11	4/14	60
		JK 11006	100 Tabs	5000 Tabs	3/11	2/14	↑
9	TAB. FOLIC ACID	511130		15000 Tabs	5/11	4/13	76
10	TAB. FERROUS SULPHATE	CT - 110505		15000 Tabs	5/11	4/13	85
11	TAB. VITAMIN B COMPLEX	511190		10000 Tabs	7/11	6/13	95
12	TAB. DICYCLOMINE 10MG	910		1000 Tabs	1/11	1/13	120
13	TROPICASYL PLUS DROP	S 11019		20 Phiels	5/11	4/13	212
14	CANDIBIOTIC DROP	11110406		100 Phiels	5/11	10/12	277
15	CAP. AMOXY 125 + CLOXA 125	TA 2223		2000 Tabs	12/10	11/12	18
16	TAB. METROGYL 400	TM 81202		10000 Tabs	5/11	4/15	231

Remarks :

Received
16.9.11

Subject to Kolkata Jurisdiction

For Florence India
[Signature]
Authorised Signatory

No. 146/E.S.O.P.D/10

Phone No. : Bhatpara 2581-2098

Dated 07/09/11 200

Office of the Board of Councillors
NAIHATI

To
The Florence India,
32, Ezra Street,
Kolkata - 700 001.

From: Sri Dhillon Sarkar

Chairman/~~Vice Chairman~~
NAIHATI MUNICIPALITY

Sub : Medicine Order for E.S.O.P.D. Ist Quarter 2011 - 2012.

Dear Sir,

We hereby request you to supply the undermentioned order for E.S.O.P.D. Ist Quarter 2011 - 2012.

1. Cap. Amoxycillin 125mg	2000Caps	8.90	10s	Rs. 1780.00
2. Cap. Ampic + Cloxa 500mg	5000Caps	28.50	10s	Rs. 14250.00
3. Cap. Amoxycillin 250mg	5000Caps	12.80	10s	Rs. 6400.00
4. Tab. Ciproflexacin 500mg	3000Tabs	18.50	10s	Rs. 5550.00
5. Tab. Erythromycin 250mg	3000Tabs	30.00	10s	Rs. 9000.00
6. Tab. Antacid	5000Tabs	3.20	10s	Rs. 1600.00
7. Tab. Rantac 150mg	5000Tabs	3.80	10s	Rs. 1900.00
8. Tab. Fametidine 20mg	5000Tabs	2.40	10s	Rs. 1200.00
9. Tab. Folic Acid	15000Tabs	1.40	10s	Rs. 2100.00
10. Tab. Ferrous Sulphed	15000Tabs	50.00	1000s	Rs. 750.00
11. Tab. Vit. B Complex	10000Tabs	2.00	10s	Rs. 2000.00
12. Tab. Dicyclomine 10mg	1000Tabs	3.50	10s	Rs. 350.00
13. Tropicacylplus Drop.	20Phils	26.90	Phil	Rs. 538.00
14. Candibiotic	100Phils	43.90	Phil	Rs. 4390.00
15. Cap. Amoxy + Cloxa 250mg	2000Caps	26.50	10s	Rs. 5300.00
16. Tab. Metrezil 400mg	10000Tabs	6.83	10s	Rs. 6830.00

Total Rs. 63938.00

Rupes Sixty three thousand nine hundred thirty eight only

Memo No :
1. F.O. Naihati Municipality
2. Actt. Naihati Municipality

Date :

Chairman
Naihati Municipality

Sri Dhillon Sarkar
Chairman 7-9.11
Naihati Municipality

[Signature]

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. - 2235 - 7094
F A X NO. - 39851542

SALE BILL : FI / MUN / 11 - 12 / 180
BILL DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
Naihati Municipality
P.O. - Naihati
West Bengal

ORDER NO 145/ MAT - 10

DATE - 07.09.2011

CHALLAN 180

DATE - 16.09.2011

MATERNITY
1ST. QTR. 2011-12

OFFICE
 NAIHATI
 14 NOV 2011
 No. 8724/MC-11
 Date

SL	DESCRIPTION	BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	INJ. DEXTROSE 5% (with set)	1A - 205	7-14		600 Bott	17.00	Bott	10200.00	
2	INJ. RINGER LACTATE (SET)	1D - 303	7-14		600 Bott	24.00	Bott	14400.00	
3	INJ. SUCCYNIL CHLORIDE	248136	11/12		25 Vails	62.00	VAIL	1550.00	
4	INJ. METHERGIN	116031KP	5/13		50 Amps	36.67	AMP	1833.50	
5	INJ. RANITIDINE	MI 319	6/12		500 Amps	3.23	AMP	1615.00	
6	INJ. VOVERON	115099KP	4/13		500 Amps	12.20	AMP	6100.00	
7	INJ. GENTICIN	PT 1359	8/13		500 Vails	7.00	VAIL	3500.00	
8	INJ. METRONIDAZOLE	INS- 112	6-14		600 Phiels	12.00	PHIEL	7200.00	
9	INJ. AMPI 250 + CLOXA 250	SK 1251	3/13		10 Vails	6.50	VAIL	65.00	
10	INJ. REGLAN	RAB 1115	4/15		200 Amps	7.00	AMP	1400.00	
11	INJ. NEOSTIGEMIN	156	4/14		100 Amps	2.20	AMP	220.00	
12	INJ. MEPHENTINE 15MG	3426	6/12		50 Amps	17.00	AMP	850.00	
13	INJ. DEXTROSE 10%	OAB 3911	9/13		10 Bott	14.00	Bott	140.00	
14	FOLEYS CATHETER (16)	906120930	11/14		15 Pcs	68.00	PC	1020.00	
15	FOLEYS CATHETER (18)	906120930	11/14		15 Pcs	68.00	PC	1020.00	
16	RYLES TUBE (16)	1011800	10/14		10 Pcs	17.00	PC	170.00	
17	RYLES TUBE (18)	1010641	9/14		10 Pcs	17.00	PC	170.00	
18	SALINE SET	15215	5/15		10 Pcs	10.90	PC	109.00	
19	SURGICAL BLADE 10No.	L 03108	7/15		200 Pcs	2.80	PC	560.00	
20	THROMBOPHOP GEL	TL 120	5/14		10 Tubes	81.00	20GRM	810.00	

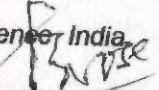
52932.50

Remarks :

52932.50

Rupees : **Fifty two thousand Nine hundred Thirty two & paise Fifty only.**

Subject to Kolkata Jurisdiction

For Florence India

 Authorised Signatory

14/11/11

CHALLAN

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

FAX NO. -

39851542

SALE CHALLAN : 180

CHALLAN DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
Naihati Municipality
P.O. - Naihati
West Bengal

ORDER NO 145/ MAT - 10

DATE - 07.09.2011

MATERNITY

1ST. QTR. 2011-12

SL	DESCRIPTION	BATCH	QUANTITY	TOTAL	MFG.	EXP.	P.No
1	INJ. DEXTROSE 5% (with set)	1A - 205		600 Bott	8-11	7-14	131
2	INJ. RINGER LACTATE (SET)	1D - 303		600 Bott	8-11	7-14	136
3	INJ. SUCCYNIL CHLORIDE	248136		25 Vails	6/11	11/12	140
4	INJ. METHERGIN	116031KP		50 Amps	6/11	5/13	141
5	INJ. RANITIDINE	MI 319		500 Amps	7/10	6/12	83
6	INJ. VOVERON	115099KP		500 Amps	5/11	4/13	77
7	INJ. GENTICIN	PT 1359		500 Vails	3/11	8/13	83
8	INJ. METRONIDAZOLE	1NS-112		600 Phiels	7-11	6-14	125
9	INJ. AMPI 250 + CLOXA 250	SK 1251		10 Vails	4/11	3/13	142
10	INJ. REGLAN	RAB 1115		200 Amps	5/11	4/15	143
11	INJ. NEOSTIGEMIN	156		100 Amps	5/11	4/14	148
12	INJ. MEPHENTINE 15MG	3426		50 Amps	7/10	6/12	147
13	INJ. DEXTROSE 10%	OAB 3911		10 Bott	10/10	9/13	171
14	FOLEYS CATHETER (16)	906120930		15 Pcs	12/10	11/14	175
15	FOLEYS CATHETER (18)	906120930		15 Pcs	12/10	11/14	176
16	RYLES TUBE (16)	1011800		10 Pcs	11/10	10/14	177
17	RYLES TUBE (18)	1010641		10 Pcs	10/10	9/14	178
18	SALINE SET	15215		10 Pcs	6/11	5/15	172
19	SURGICAL BLADE 10No.	L 03108		200 Pcs	7/10	7/15	31
20	THROMBOPHOP GEL	TL 120		10 Tubes	6/11	5/14	38

Remarks :

AK
17-10-11

Subject to Kolkata Jurisdiction

For Florence India
[Signature]
Authorised Signatory

No. 145/MAT/10

Office of the Board of Councillors
NAIHATI

Phone No. : Bhatpara 2581-2098

Dated 07/09/11 200

To
The Florence India,
32, Ezra Street,
Kolkata - 700 001.

From: Sri Dhillon Sarkar

Chairman/Vice-Chairman
NAIHATI MUNICIPALITY

Sub : Medicine Order for Maternity Home Ist Quarter 2011 - 2012.

Dear Sir,

We hereby request you to supply the undermentioned order for Maternity Home Ist Quarter 2011 - 2012.

1.	Inj. Dextrose 5%(with Set) 450ml	600Betts	17,00	Bett	Rs.10200.00
2.	" Ringerlactate (with set) 450ml	600Betts	24,00	Bett	Rs.14400.00
3.	" Succinyl Chloride 25Vials	25Vials	62.00	Vial	Rs. 1550.00
4.	" Engemetrine Maleate 50Amps	50Amps	36.67	Amp	Rs.1833.50
5.	" Ranitidine 500Amps	500Amps	3.23	Amp	Rs. 1615.00
6.	" Diclifence Sodium 500Amps	500Amps	12.20	Amp	Rs. 6100.00
7.	" Gentamycin 80mg 500Vials	500Vials	7.00	Vial	Rs. 3500.00
8.	" Metronidazole 600Phils	600Phils	12.00	Phil	Rs. 7200.00
9.	" Amp 250 + Cloxa 250 10Vials	10Vials	6.50	Vial	Rs. 65.00
10.	" Metochlopramide 200Amps	200Amps	7.00	Amp	Rs. 1400.00
11.	" Neostigmine 100Amps	100Amps	2.20	Amp	Rs. 220.00
12.	" Mephentine 15mg 50Amps	50Amps	17.00	Amp	Rs. 850.00
13.	" Dextrose 10% 450ml 10Betts	10Betts	14.00	Bett	Rs. 140.00
14.	" Feleys Catheter(16-18) 30Pcs	30Pcs	68.00	Pe	Rs. 2040.00
15.	" Ryles Tube (16 -18) 20Pcs	20Pcs	17.00	Pc	Rs. 340.00
16.	" Saline Set 10Pcs	10Pcs	10.90	Pc	Rs. 109.00
17.	" Surgical Blade 10 No. 200Pcs	200Pcs	2.80	Pc	Rs. 560.00
18.	" Thrombepheb Oinment 20gm 10Tubes	10Tubes	81.00	Tube	Rs. 810.00

Total Rs. 52932.50

Rupus Fifety two thousand nine hundred thirty two & fifety paise only

Memo No :

Date :

1. F.O. Naihati Municipality
2. Actt. Naihati Municipality

Chairman
Naihati Municipality

Chairman 7.9.11
Naihati Municipality

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

FAX NO. -

39851542

SALE BILL : FI / MUN / 11 - 12 / 181
 BILL DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
 Naihati Municipality
 P.O. - Naihati
 West Bengal

MUNICIPAL OFFICE
 NAIHATI
 14 NOV 2011
 No 8721 / mcl-11
 Date ---

ORDER NO 145/ MAT - 10

DATE - 07.09.2011

MATERNITY

CHALLAN 181

2ND. QTR. 2011-12

DATE - 16.09.2011

SL	DESCRIPTION	BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	INJ. SYNTHOCINON	116037 KP	5/13		300 Amps	30.40	AMP	9120.00	
2	TAB, PARACETAMOL 500	H 948	7/14	400 Tabs					
		D 857	3/14	100 Tabs	500 Tabs	29.00	100'S	145.00	
3	CAP. AMPI 250 + CLOXA 250	UCN 1042	2/13		100 Caps	26.50	10'S	265.00	
4	TAB. NEFIDIPINE 10MG	AS 7005	3/12		100 Tabs	12.00	10'S	120.00	
5	NITROFURAZONE POWDER	0311-CN	9/12		10 Conts	6.00	CONT	60.00	
6	TAB. ANTACID	O - 9003	1/14		500 Tabs	3.20	10'S	160.00	
7	TAB. RANITIDINE 150	TGL - 11573	5/13		1000 Tabs	3.40	10'S	340.00	
8	GAUZE THAN 8M				75 Than	112.00	THAN	8400.00	
9	CATGUT ATROMETIC -1(4259)	B 1038	4/16		180 Pcs	96.00	PC	17280.00	
10	CATGUT ATROMETIC -1-0	B 1041	4/16		350 Pcs	96.00	PC	33600.00	
	4241								
								69490.00	

Remarks :

Rupees : **Sixty nine thousand Four hundred Ninety only.**

69490.00

Subject to Kolkata Jurisdiction

12/11/11

For Florence India
 Authorised Signatory

INVOICE

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001

DL.NO. - 5364 SW / 4319 SBW

VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. -

2235 - 7094

F A X NO. -

39851542

SALE BILL : FI / MUN / 11 - 12 / 186
BILL DATE : 16.09.2011

AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS

The Chairman
Naihati Municipality
P.O. - Naihati
West Bengal

ORDER NO

DATE - 07.09.2011
CHALLAN 186
DATE - 16.09.2011

C U D P - III
1ST. QTR. 2011-12

MUNICIPAL OFFICE
NAIHATI
14 NOV 2011
8719/mc-11

SL	DESCRIPTION	Date BATCH	EXP.	QUANTITY	TOTAL	RATE	PER	VALUE	
								RS.	P
1	TAB. ANTACID	101050039	10/12	13000Tabs					
		101050038	9/12	2000Tabs	15000Tabs	75.00	500'S		2250.00
2	TAB. BROMHEXINE 8MG	TF/780211	1/14		2000 Tabs	25.00	100'S		500.00
3	TAB. C.P. MALEATE	511187	6/14		4000 Tabs	50.00	1000'S		200.00
4	TAB. FERROUS SULPHATE	CT 110505	4/13		10000Tabs	62.00	1000'S		620.00
5	TAB. FOLIC ACID 5MG	TF/050611	11/12		10000Tabs	180.00	1000'S		1800.00
6	TAB. FURAZOLIDONE 100	TF/040611	5/14		6000Tabs	190.00	1000'S		1140.00
7	TAB. MEBENDAZOLE 100	TF/180610	5/13		1000 Tabs	1.80	6'S		300.00
8	TAB. METRONIDAZOLE 200	511176	6/14		3000Tabs	32.00	100'S		960.00
9	ORAL REHYDRATION SALT	711084	5/13	260 Pkts					
		711085	5/13	240 Pkts	500 Pkts	3.00	PKT		1500.00
10	TAB. OXYPHENONIUM BROM	510070	4/13		500 Tabs	34.00	100'S		170.00
11	TAB. PARACETAMOL 500	511167	5/14		8000Tabs	29.00	100'S		2320.00
12	TAB. COTRIMOXAZOLE (SS)	TSS 1118	2/14		8000 Tabs	63.00	100'S		5040.00
13	NITROFURAZONE OINTMENT	HP - 24AB	10/13		500 Tubes	7.00	Tube		3500.00
14	CHLORAMPHENICOL E/APP	EHS - 44	12/12		1000 Apps	30.00	100'S		300.00
15	COTTON	208	7/16		15 Pkts	22.00	PKT		330.00
16	ABSORBENT GAUZE	11	1/14		200 Pcs	5.50	PC		1100.00
17	ADHESIVE PLASTER	AT - 156	2/14		12 Rills	50.00	RILL		600.00
18	BENZYL BENZOATE LOTION	183	7/13		6 Phiels	50.00	450ML		300.00
19	PHENYLE	O90911 -2	3/13		3 Jars	172.00	JAR		516.00
20	TAB. COTRIMOXAZOLE KID	TF/770211	1/14		500 Tabs	25.00	100'S		125.00
21	METRONIDAZOLE SUSP.	113214001	1/13		50 Phiels	10.00	60ML		500.00
22	TAB. VITAMIN B COMPLEX	PLT 050	3/13		2000Tabs	45.00	500'S		180.00
23	TAB. PARACETAMOL KID	H 750	7/14		200Tabs	20.00	100'S		40.00

24291.00

24291.00

Rupees : Twenty four thousand Two hundred Ninety one only.

Subject to Kolkata Jurisdiction

For Florence India
Authorized Signatory

No. HAU/26

Office of the Board of Councillors
NAIHATI

Phone No. : Bhatpara 2581-2098

Dated 07/09/11 20

To

M/S Florence India,
32, Ezba Street,
Kolkata - 700 001.

From:

Sri Dhillon Sarkar

~~Chairman/Vice-Chairman~~

NAIHATI MUNICIPALITY

Sub : Medicine Order for IPP-VIII Ist & 2nd
Unit 2nd Quarter 2011 - 2012.

Dear Sir,

We hereby request you to supply the undermentioned order for
IPP-VIII Ist & 2nd Unit 2nd Quarter 2011 - 2012.

1. Antacid Tab. 500 mg	35,000 Tabs	75.00	500 s	5250.00
2. Ferrous Sulphate	35,000 Tabs	62.00	1000 s	2170.00
3. Folic Acid	35,000 Tabs	180.00	1000 s	6300.00
4. Furazolidone Tab	35,000 Tabs	190.00	1000 s	6650.00
5. Metronidazole 200mg	35,000 Tabs	32.00	100 s	11200.00
6. O.R.S.	1,000 Pkts	3.00	Pkt	3000.00
7. Paracetamol 500mg	35,000 Tabs	29.00	100 s	10150.00
8. SMX 400mg + TMP 80mg	5,000 Tabs	63.00	100 s	3150.00
9. Nitrofurazone Oint.	500 Tubes	7.00	Tube	3500.00
10. Cotton 100gm	35 Pkts	22.00	Pkt	770.00
11. S.T. Kid (Cotrimoxazole)	5,000 Tabs	25.00	100 s	1250.00
12. Metronidazole Susp	100 Phils	10.00	Phil	1000.00
13. Vit. B. Complex	36,000 Tabs	45.00	500 s	3240.00
14. Paracetamol Kid	10,000 Tabs	20.00	100 s	2000.00

Total Rs. 59,630.00

Rupess Fifty nine thousand six hundred thirty only.

Memo No :

Dt.

Copy to :

✓ Actt. Naihati Municipality

Chairman
Naihati Municipality

Sri Dhillon Sarkar

Chairman
Naihati Municipality

07/09/11

CHALLAN

FLORENCE INDIA

32, EZRA STREET, KOLKATA - 700001
 DL.NO. - 5364 SW / 4319 SBW
 VAT NO. - 19570965023 CST NO. - 19570965217

PHONE NO. - 2235 - 7094
 F A X NO. - 39851542

SALE CHALLAN : 186
 CHALLAN DATE : 16.09.2011
 AGENT CODE & NAME :

CUSTOMER NAME & ADDRESS The Chairman Naihati Municipality P.O. - Naihati West Bengal	ORDER NO DATE - 07.09.2011 C U D P - III 1ST. QTR. 2011-12
--	---

SL	DESCRIPTION	BATCH	QUANTITY	TOTAL	MFG	EXP
1	TAB. ANTACID	101050039	13000Tabs			10/12
		101050038	2000Tabs	15000Tabs		9/12
2	TAB. BROMHEXINE 8MG	TF/780211		2000 Tabs		1/14
3	TAB. C.P. MALEATE	511187		4000 Tabs		6/14
4	TAB. FERROUS SULPHATE	CT 110505		10000Tabs		4/13
5	TAB. FOLIC ACID 5MG	TF/050611		10000Tabs		11/12
6	TAB. FURAZOLIDONE 100	TF/040611		6000Tabs		5/14
7	TAB. MEBENDAZOLE 100	TF/180610		1000 Tabs		5/13
8	TAB. METRONIDAZOLE 200	511176		3000Tabs		6/14
9	ORAL REHYDRATION SALT	711084	260 Pkts			5/13
		711085	240 Pkts	500 Pkts		5/13
10	TAB. OXYPHENONIUM BROM	510070		500 Tabs		4/13
11	TAB. PARACETAMOL 500	511167		8000Tabs		5/14
12	TAB. COTRIMOXAZOLE (SS)	TSS 1118		8000 Tabs		2/14
13	NITROFURAZONE OINTMENT	HP - 24AB		500 Tubes		10/13
14	CHLORAMPHENICOL E/APP	EHS - 44		1000 Apps		12/12
15	COTTON	208		15 Pkts		7/16
16	ABSORBENT GAUZE	11		200 Pcs		1/14
17	ADHESIVE PLASTER	AT - 156		12 Rills		2/14
18	BENZYL BENZOATE LOTION	183		6 Phiels		7/13
19	PHENYLE	O 90911 - 2		3 Jars	9/11	3/13
20	TAB. COTRIMOXAZOLE KID	TF/770211		500 Tabs		1/14
21	METRONIDAZOLE SUSP.	113214001		50 Phiels		1/13
22	TAB. VITAMIN B COMPLEX	PLT 050		2000Tabs		3/13
23	TAB. PARACETAMOL KID	H 750		200Tabs		7/14

P-9
 P-15
 P-2A
 P-35
 P-4A
 P-52
 P-18A
 68
 79
 193
 90
 207
 274
 105
 136
 12A
 11A
 243
 173
 163
 214
 154
 14A

*Recieve receipt
 from
 07/11/11 - and 3 Jan 2012.*

Subject to Kolkata Jurisdiction

For Florence India
 Authorised Signatory

No. HAU/27

Office of the Board of Councillors
NAIHATI

Phone No. : Bhatpara 2581-209

Dated 07/09/11 20

To

M/S, Florence India,
32, Ezra Street,
Kolkata - 700 001.

From:

Sri Dhillon Sarkar

Chairman

Chairman/Vice-Chairman

NAIHATI MUNICIPALITY

Sub : Medicine Order for CUDP-III 1st Quarter 2011 - 2012

Dear Sir,

We hereby request you to supply the undermentioned order for
CUDP - III 1st Quarter 2011 - 2012.

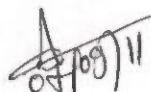
1. Antacid Tab. 500 mg.	15,000 Tabs	75.00	500 s	2250.00
2. Bromhexine Hyde. 8mg.	2,000 Tabs	25.00	100 s	500.00
3. C.P.Maleate 4 mg.	4,000 Tabs	50.00	1000 s	200.00
4. Ferrous Sulphate	10,000 Tabs	62.00	1000 s	620.00
5. Folic Acid 5mg	10,000 Tabs	180.00	1000 s	1800.00
6. Furazolidone 100mg.	6,000 Tabs	190.00	1000 s	1140.00
7. Mebendazole 100mg	1,000 Tabs	1.80	6 s	300.00
8. Metronidazole 200mg	3,000 Tabs	32.00	100 s	960.00
9. Oral Rehydration Salt	500 Pkts	3.00	Pkt	1500.00
10. Oxypnenium Bromide	500 Tabs	34.00	100 s	170.00
11. Paracetamol 500mg	8,000 Tabs	29.00	100 s	2320.00
12. SMX 400mg. + TMP 80mg	8,000 Tabs	63.00	100 s	5040.00
13. Antiseptic Lotion	-	-	-	-
14. Mercurochrome 20gm	-	-	-	-
15. Nitrofurazone Oint.	500 Tubes	7.00	9 grms	3500.00
16. Chlorampheni Eye Appli.	1,000 Apps.	30.00	100 s	300.00
17. Absorbent Cotton(100gm)	15 Pkts	22.00	Pkt.	330.00
18. Absorbent Gauge	200 Pcs	5.50	Pcs	1100.00
19. Adhesive Plaster	12 Rills	50.00	Rill	600.00
20. Benzyle Benzoate	06 Phls	50.00	500 Ml	300.00
21. Phenyle	03 Jars	172.00	5 Ltr.	516.00
22. Salbutamol 4 mg.	-	-	-	-
23. S.T.Kid(Cetrimexazole)	500 Tabs	25.00	100 s	125.00
24. Metronidazole Susp.	50 Phls	10.00	60 Ml.	500.00
25. Vitamin B Complex	2,000 Tabs	45.00	500 s	180.00
26. Paracetamol Kid.	200 Tabs	20.00	100 s	40.00

Total Rs. 24,291.00

Rupes Twenty four thousand two hundred ninety one only.

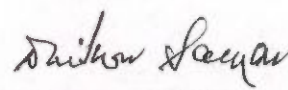
Memo No :

Copy to :



Chairman
Naihati Municipality

- . F.O. Naihati Municipality.
- . Actt. Naihati Municipality


Chairman 7.9.11
Naihati Municipality

SENDING REPORT

Nov. 23 2011 12:17PM

YOUR LOCAL NUMBER: 3323347805
YOUR FAC. NO.: +91 3323347805
SERV. (HEALTH) SUDA KOLKATA

NO.	OTHER FACSIMILE	START TIME	PAGE TIME	MODE	STATUS	RESULT
01	025800290	Nov. 23 12:17	0'34	SND	OK	OK

TO TURN OFF REPORT, PRESS *
THEN SELECT OFF BY USING *
1.
.

SUDA

STATE URBAN DEVELOPMENT AGENCY

HEALTH WING

"ILGUS BHAVAN"

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

Ref No.SUDA-Health/127/08/216

Date .18.11.2011.

From : Director, SUDA

**To : The Chairman
Naihati Municipality**

**Sub. : Visit of Dr. S. Basu, APO and Shri Dipankar Chowdhury, FO, Health,
SUDA on 24.11.2011.**

Sir,

This is to intimate you that Dr. S. Basu, APO and Shri Dipankar Chowdhury, FO, Health, SUDA will be visiting to your ULB on 24.11.2011 for monitoring & supervision of activities under IPP-VIII. All the documents & records shall be made available for the purpose.

You are requested to instruct your office to make necessary arrangement in this regard.

Thanking you.

Yours faithfully



Director, SUDA

Dt. .. 18.11.2011

SUDA-Health/127/08/216/1(2)

CC

- 1. Dr. Sunanda Basu, APO, Health, SUDA**
- 2. Shri Dipankar Chowdhury, FO, 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/127/08/216

Date 18.11.2011.

From : Director, SUDA

To : The Chairman
Naihati Municipality

Sub. : Visit of Dr. S. Basu, APO and Shri Dipankar Chowdhury, FO, Health,
SUDA on 24.11.2011.

Sir,

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You are requested to instruct your office to make necessary arrangement in this regard.

Thanking you.

Yours faithfully



Director, SUDA

SUDA-Health/127/08/216/1(2)

Dt. .. 18.11.2011

CC

1. Dr. Sunanda Basu, APO, Health, SUDA
2. Shri Dipankar Chowdhury, FO, Health, SUDA



Director, SUDA

To
Shibani Goswami
Project Officer (Health)
SUDA,
ILGUS BHAVAN
H.C. Block, Sector-III
Bidhannagar, Kolkata.

বিষয়: নৈহাটি পৌরসভার অন্তর্গত সরকারী সাহায্য প্রাপ্ত E.S.O.P.D.
এবং তৎসহ অন্যান্য চিকিৎসার ক্ষেত্রে জাল ঔষধ সরবরাহ করিয়া
অর্থ তহরুপের বিরুদ্ধে তদন্তের আবেদন।

মহাশয়,

আমরা নিম্ন স্বাক্ষরকারীগণ নৈহাটি পৌরসভার অন্তর্গত বাসিন্দাগণ আপনার দৃষ্টি আকর্ষণ করিয়া জানাইতেছি যে বর্তমান নৈহাটি পৌরসভা তৃনমূল পরিচালিত, গত ২২শে জুন ২০১০ সালে CPM-এর নিকট হইতে পৌরবোর্ডের দায়িত্ব গ্রহণ করে বর্তমান তৃনমূল বোর্ড।

পৌরসভার বিভিন্ন ভারপ্রাপ্ত দপ্তরের মধ্যে E.S.O.P.D. ও সাথে চিকিৎসার অন্যান্য দপ্তরের দায়িত্ব পায় Chairman-in-council শ্রী রাজেন্দ্র গুপ্ত। অতীতের CPM দ্বারা পরিচালিত বোর্ডের ধারাকে অনুসরণ করে এই বোর্ডের কর্তৃপক্ষও আপনাদের নিকট হইতে প্রাপ্ত E.S.O.P.D. ও অন্যান্য চিকিৎসার ক্ষেত্রে বিপুল অর্থ ব্যয় করিয়া সম্পূর্ণ 'জাল' ও Expiry ঔষধ স্থানীয় বিভিন্ন ড্রাগ লাইসেন্স বহির্ভূত ব্যক্তিদের নিকট হইতে সংগ্রহ করিয়া এই মারণমুখী ঔষধ রুগীদের মধ্যে সরবরাহ করিয়া পৌরসভার এই দপ্তর চালাইতেছেন। পৌরসভার বোর্ড গঠনের পর হইতে পৌরপ্রধানের ইচ্ছামত এই দপ্তরের C.I.C-এর যৌথ যোগাসাজসে এই অর্থ তহরুপের ঘটনা ঘটিতেছে। আজ পর্যন্ত এই ঔষধ কেনার কোন 'বিলই' পৌরসভার বোর্ড-অব-কাউন্সিলরদের সভায় অনুমোদনের জন্য আনা হয় নাই। এইরূপ আপনাদের পাঠান অর্থের বহু ঔষধ E.S.O.P.D.-এর দপ্তরে দিনের পর দিন অব্যবহৃত অবস্থায় রহিয়াছে। সাধারণ মানুষ পৌরসভার এই 'জাল' ঔষধের খবর জানিয়া বিনামূল্যে এই দপ্তর হইতে ঔষধ সংগ্রহ করিতে ভয় পায়।

এই জালিয়াতি ঔষধ কেনা-বেচার মাধ্যমে পৌরসভায় একটি সমাজ-বিরোধী চক্র খুবই সক্রিয়। মানুষ ভয়ে প্রতিবাদ করিতে ভয় পায়। কারণ পৌরপ্রধানের কাছ হইতে কোনরূপ প্রতিকার না পাওয়ায় মানুষ হতাশ।

তাই আপনার দৃষ্টি আকর্ষণ করিয়া আমরা আশাবাদী যে আপনাদের প্রেরিত অর্থ সত্যি সত্যি জনগণের সেবায় নিয়োজিত কিনা বা অর্থ অন্ধকার পথে আত্মসাৎ হইতেছে কিনা তাহা অবিলম্বে অনুসন্ধান করিয়া যথাযথ ভাবে সঠিক সিদ্ধান্ত গ্রহণ করিলে কৃতজ্ঞ থাকিব।

তাঃ - ৩০-৯-১১

ধন্যবাদান্তে,

কপি প্রেরিত হইল —

- ক) মাননীয় মমতা ব্যানার্জী
মুখ্যমন্ত্রী
পশ্চিমবঙ্গ সরকার,
রাইটার্স বিল্ডিং, কলিকাতা -১
- খ) To
The Chief-Executive Officer,
K.M.D.A.
"Prasason Bhavan"
DD-1, Sec-1, Salt Lake City
Kolkata- 700 064

ইতি —

1. Bipal Shew
2. Shivkumar Roy
3. সুগাচ পাণ্ডা
4. অজয় ঘোষ
5. পানু সেন গুপ্ত
6. পুলক পাল

- 7) Rajkumar Keshari
- 8) Chandan Choudhary
- 9) Peeyush anand
- 10) Suraj Choudhary
- 11) Manoj Mehta
- 12) Sukhdeo Jha
- 13) Raj Kumar goud
- 14) Md. Rahim Khan
- 15) निरंजन साह
- 16) कृष्णा कुमार साव
- 17) सुब्रत जून
- 18) जितेंद्र यादव
- 19) रघु दास
- 20) शंकर दास
- 21) विश्व (विश्व)
- 22) रमेश यादव
- 23) Nantu Ghosh
- 24) गोपाल साह
- 25) नरोत्तम यादव
- 26) शंकर दास
- 27) Jogindra yadav
- 28) Manoj Shaw
- 29) Mantu Pan
- 30) मन्मथ साह
- 31) Raju shaw

To
The Project officer (Health)
S.U.D.A.
ILGus Bhavom,
Kolkata - 700 106



.....Naihati..... Municipal Corporation / Municipality

Reporting Format for Growth Monitoring of Under-Five Children

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with				No. of Mal-nutrition cases		
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
5406	3600	2194	997	364	44	01	44	01


Health Officer
Naihati Municipality

To
 The Project Officer (Health)
 S.U.D.A.
 Ilgus Bhavan,
 Kolkata - 700 106.



[Handwritten signature]

Chktn.
01.08.11

.....N.A.I.H.A.I.I..... Municipal Corporation / Municipality

Reporting Format for Growth Monitoring of Under-Five Children

ROUND : APRIL '2011 & MAY '2011

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with				No. of Mal-nutrition cases		
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
5459	3673	2249	1014	361	49	0	49	0

[Handwritten signature]
 19/7/11
Health Officer
Neihati Municipality

No. HAU/63.....

Chhatu.
25.3.11
SK

Phone : 2581-2098

Dated 23/3/2011

Office of the Board of Councillors
NAIHATI
From: Dr. Surya Kr. Bhattacharya
Health Officer
Chairman / Vice-Chairman
NAIHATI MUNICIPALITY

To, The Project Officer (Health)
S.U. D.A.
Ilgus Bhavan,
Kolkata - 700 106.

Sub : Submission of Growth Chart
CUDP-III & IPP-VIII.

Sir,

I am sending herewith the Growth Chart CUDP-III & IPP-VIII for the Month of December 2010 to January 2011 for your doing the needful.

Please acknowledge the same and oblige.

Thanking You.



Yours faithfully

Enclo : As stated above.


[Signature]
Health Officer
Naihati Municipality

.....NAIHATI..... Municipal Corporation / Municipality

Reporting Format for Growth Monitoring of Under-Five Children

DECEMBER 10 to JANUARY 2011

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with					No. of Mal-nutrition cases	
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
5849	3669	2171	1053	381	59	05	59	05


10/2/11
Health Officer
Naihati Municipality

No. HAU/47.....

Office of the Board of Councillors
NAIHATI

From :
Dr. Surya Kr. Bhattacharya
Health Officer

Chairman / Vice-Chairman
NAIHATI MUNICIPALITY

Chhohn
23.12.10

Phone : 2581-2098

Dated 20/12/2010

To, The Project Officer (Health)
S.U.D.A.
Ilgus Bhavan,
Kolkata - 700 106



Sub : Submission of Growth Chart
CUDP-III & IPP-VIII.

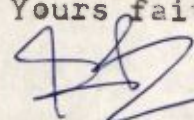
Sir,

I am sending herewith the Growth Chart CUDP-III & IPP-VIII for the Month of October 2010 to November 2010 for Your doing the needful.

Please acknowledge the same and oblige.

Thanking You.

Yours faithfully


16/12/10
Health Officer


Naihati Municipality

Health Officer
Naihati Municipality

.....**NAIHATI**..... Municipal Corporation / Municipality

Reporting Format for Growth Monitoring of Under-Five Children

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with						No. of Mal-nutrition cases	
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised	
5844	4009	2527	1054	365	61	02	61	02	


 Health Officer
 Naihati Municipality
 16/12/10

No. HAU/40

Chh. M.
20.11.10

Phone : 2581-2098

Dated 21-11-2010

Office of the Board of Councillors
NAIHATI

From :
Dr. Surya Kr. Bhattacharya
Health Officer
Chairman / Vice-Chairman
NAIHATI MUNICIPALITY

To, The Project Officer,
S.U.D.A.
Ilgus Bhavan, H.C. Block,
Sector-III, Bidhannagar,
Kolkata - 700 106.



Sub : Submission of Growth Chart
CUDP-III & IPP-VIII.

Sir,

I am sending herewith the Growth Chart CUDP-III & IPP-VIII for the Month of August 2010 & September 2010 for your doing the needful.

Please acknowledge the same and oblige.

Thanking You.


Yours faithfully

[Signature]
Health Officer 20/11/10.
Naihati Municipality

.....**NALHATI**..... Municipal Corporation / Municipality

Reporting format for Growth Monitoring of Under-Five Children

Total No. of U-5 Children	No. of U-5 Children Weighed	No. of U-5 Children with					No. of Mal-nutrition cases	
		Normal Weight	Gr. - I	Gr. - II	Gr. - III	Gr. - IV	Referred	Hospitalised
5842	3974	2423	1089	397	56	09	56	09


Health Officer
Nalhati Municipality