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INDIAN INSTITUTE OF SCIENCE EDUCATION AND RESEARCH KOLKATA

**Mohanpur Campus, Mohanpur – 741 252, Dist. Nadia, West Bengal.**

# Quotation Opening Committee

Indent No.:

Name of Indentor:

Name of the Item:

Value of indent:

Minimum no. of quotations required:

**To**

**HOD / DoFA / DoRD / Chairman (Purchase Committee) / Registrar**

**IISER Kolkata**

Please authorize three members in presence of whom the quotations shall be opened and examined for onward submission to Purchase Committee. The required number of quotations has been received.

## \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Signature of Indentor**

The following members are authorized to conduct the above formalities as per purchase procedure.

1.

2.

3.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOD / DoFA / DoRD / Chairman (Purchase Committee) / Registrar**

**Date:**