

## Inquiry Form

IIPHG(U)/2026-27/21

Date: 29.06.2026

<b>To</b> Indian Institute of Public Health Gandhinagar Opp. Air Force Headquarters, Near Lekavada Bus Stop, Gandhinagar, Gujarat GST: 24AAAAI9398E1ZH	<b>From: (Details of the agency providing quotation)</b>  <b>Organization Name:</b>  <b>Authorized Person Name:</b>  <b>Complete Address:</b>  <b>Contact No.:</b>
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**Sub.: Quotation for purchase of Magnetic Power Bank with Branding.**

Sr. No.	Particular	Qty.	Rate (Rs.)	Amount (Rs.)
1	<b><u>Magnetic Power Bank:</u></b> <b>Brand:</b> Ambrane <b>Model:</b> Aerosync Snap <b>Colour:</b> Purple <b>Battery Capacity:</b> 10,000 Mah, Fast Charging <b>Connector Type:</b> USB <b>Rapid Charging Performance:</b> 22.5w <b>Branding:</b> Single Colour Logos Printing on front side of material as attached in sample image	40 Nos.		
	Total			
	GST@___%			
	<b>Total with GST</b>			

**Note:** The selected vendor shall be required to share a material sample for quality evaluation and approval before proceeding with the complete supply.

1. PAN & GST #:
2. Delivery Period: Within 05 days after receipt of Purchase order.
3. Validity of the quote:
4. Payment Term: 100% within 10 days of receipt of material and invoice.
5. Delivery to be made at Indian Institute of Public Health Gandhinagar, Opp. Air Force HQ., Near Lekavada Bus Stop, Gandhinagar, Gujarat.
6. Please sign and stamp on each page.
7. All quoted rates must be inclusive of applicable taxes, delivery charges, branding charges and all associated costs.
8. For any queries regarding inquiry, please feel free to contact us at: +91 7433910705
9. **Last date to submit the quotation: 05/07/2026**

Stamp and Signature of Authorized person



**Sample Image of Magnetic Power Bank**