

To be filled by SPMC / Local Manufacturer

Part – A

Name of the Personnel to be signed :-.....

Name of the Organization :-

Address :-

Director / MSD

Invoice No:..... Order No:PO

No:.....

With reference to the consignment is ready to deliver under captioned details, certified copies /Originals of the following authentic documents are submitted herewith for your kind perusal.

1. Certificate of Analysis (COA)

Yes		No		N/A	
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Remarks : (In case of not applicable(N/A)) :

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Signature & Rubber stamp

Date

.....

1.Original document of the PO is Available in file

(i) PO No: Tally with the Invoice

Part – B		For MSD use only			
Yes		No		N/A	

(ii) Order No: Tally with the Invoice

Yes		No		N/A	
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Yes		No		N/A	
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(iii) Item Name & Specification: Tally with the Invoice (For the surgical items CAT No./ Ref No. Serial No. are considered)

Yes		No		N/A	
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(iii) Has signed and kept the rubber stamp

Yes		No		N/A	
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2 .NMRA Registration verified with the MSD file at accountant/Supplies Section.(Where necessary with NMRA)

(I) Registration is not expired

Yes		No		N/A	
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(ii) Item Name: Apparently tally with the invoice

Yes		No		N/A	
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Yes		No		N/A	
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(iii) Manufacturer: Tally with the PO & invoice

Yes		No		N/A	
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(iv) Signed by CEO/NMRA and kept the rubber stamp

Yes		No		N/A	
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3. Original document of the Certificate of Analysis (COA), Certificate of Conformity (COC) or Performance Report is attached

(i) Item Name Tally with the relevant PO & invoice (if name is not mentioned CAT No./ Ref No. Serial No. to be considered)	Yes	No	N/A
(ii) Strength : Tally with the relevant PO & invoice (Not applicable for the surgical items)	Yes	No	N/A
(iii) Pharmacopeial Standard : Tally with the relevant PO (Only for the pharmaceuticals)	Yes	No	N/A
(iv) Batch NO /s: Tally with the Invoice/The packing list	Yes	No	N/A
(v) Manufacturing Date: Tally with the invoice /Packing list	Yes	No	N/A
(vi) Expiry Date: Tally with the invoice / Packing list	Yes	No	N/A
(vii) Does final conclusion of the COA/COC /PR is satisfied or confirmed the conformity?	Yes	No	N/A
(viii) Has signed and kept the rubber stamp	Yes	No	N/A

★ N/A – Not Applicable

Remarks: if observed deviations :-

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Submitted document can be accepted ☐ Submitted document Can not be accepted ☐

Decision of the committee

Recommended / Not recommended to proceed for sample checking

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SCO/..... HSCO/..... AD/.....

Approved / Not approved to proceed for sample checking

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Director /MSD