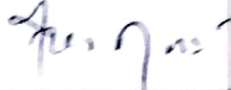








ATTENDANCE SHEET

ATTENDANCE SHEET OF **PROCUREMENT COMMITTEE MEMBERS**
FOR OPENING OF BIDS VIDE DOC # LUMHS / PMU /459, DATED: 30-05-2023
AND SPPRA ID NO: T01773-22-0014 DATED: 01-06-2023 FOR **"EXTERNAL
DEVELOPMENT WORK FOR MALE PG HOSTEL AT LUMHS, JAMSHORO"**
UNDER THE PROJECT TITLE: **"STRENGTHENING & UPGRADATION OF
ACADEMIC, RESEARCH AND SPORTS FACILITIES AT LUMHS, JAMSHORO"**,
ON **20-06-2023 (TUESDAY) AT 11:30 A.M.** AT OFFICE OF THE PROJECT
COORDINATOR, PROJECT MANAGEMENT UNIT (PMU), 2ND FLOOR,
INSTITUTE OF DENTISTRY, LUMHS, JAMSHORO.

S.No	DESIGNATIONS OF OFFICER	NOMINATED	SIGNATURE
1.	Prof. Dr. Feroze Ali Kalhoro Dean, Faculty of Dentistry, LUMHS, Jamshoro.	Convener	
2.	Engr. Saghir Ahmed Memon Director (P&D)/Works, MUET, Jamshoro	External Member	
3.	Mr. Nadeem Shakoor Javeri Director Finance, LUMHS, Jamshoro.	Member	
4.	Engr. Gulzar Ahmed Project Coordinator, Project Management Unit (PMU), LUMHS, Jamshoro.	Member / Secretary	
5.	Engr. Mukesh Kumar Vasu Assistant Engineer, SABS University, Jamshoro.	External Member	

ATTENDANCE SHEET

ATTENDANCE SHEET OF **CONTRACTORS / FIRMS PARTICIPATED FOR**
OPENING OF BIDS VIDE DOC # LUMHS / PMU /459, DATED: 30-05-2023 AND
SPPRA ID NO: T01773-22-0014 DATED: 01-06-2023 FOR **"EXTERNAL**
DEVELOPMENT WORK FOR MALE PG HOSTEL AT LUMHS, JAMSHORO"
UNDER THE PROJECT TITLE: "STRENGTHENING & UPGRADATION OF
ACADEMIC, RESEARCH AND SPORTS FACILITIES AT LUMHS, JAMSHORO",
ON **20-06-2023 (TUESDAY) AT 11:30 A.M.** AT OFFICE OF THE PROJECT
COORDINATOR, PROJECT MANAGEMENT UNIT (PMU), 2ND FLOOR,
INSTITUTE OF DENTISTRY, LUMHS, JAMSHORO.

S. No	NAME OF CONTRACTORS	SIGNATURE
1.	M/S. <u>ICE, Pakwan</u> Name:- <u>Ghulam Mustafa</u> Designation: - <u>CEO -</u> CNIC No. <u>45302-2699106-3</u> Cell # <u>03003232352</u>	
2.	M/S. <u>Ishad Ali Daryi</u> Name:- <u>Zahid Hussain</u> Designation: - <u>Project manager</u> CNIC No. <u>0300341504-03476581</u> Cell # <u>03003077534</u>	
3.	M/S. _____ Name:- _____ Designation: - _____ CNIC No. _____ Cell # _____	
4.	M/S. _____ Name:- _____ Designation: - _____ CNIC No. _____ Cell # _____	