

## SCHEDULE OF PARTICIPATION RECEIVED

|                   |  |               |                |
|-------------------|--|---------------|----------------|
| Item Description: | EQ09138 Low Profile Gastrostomy Kits 16Fr, 0.8cm | ERU Ref:      |                |
|                   |  | Closing Date: | 2 Month, 2019. |

|    | <u>Participating Bidders</u> | <u>Offers Received in Time</u> | <u>Remarks</u> |
|----|------------------------------|--------------------------------|----------------|
| 1. | Associated Equip             | Yes                            |                |
| 2. |                              | Yes                            |                |
| 3. |                              | Yes                            |                |
| 4. |                              | Yes                            |                |
| 5. |                              | Yes                            |                |

This is to certify that 1 offers were received at the opening session.

|                   |                    |   |
|-------------------|--------------------|---|
| Chairperson Name: | FRANKLIN CAMILLERI | Members of the Adjudication Board:SYLVANA SAID/ FIONA GRECH |
| Signature:        |                    |   |
| Date:             |                    |   |

## SCHEDULE OF PARTICIPATION RECEIVED

|                          |  |                      |                |
|--------------------------|--|----------------------|----------------|
| <b>Item Description:</b> | S-SETS-313 Insufflation gas filter tubing to fit Karl Storz insufflators | <b>ERU Ref:</b>      |                |
|                          |  | <b>Closing Date:</b> | 2 Month, 2019. |

|     | <u>Participating Bidders</u> | <u>Offers Received in Time</u> | <u>Remarks</u> |
|-----|------------------------------|--------------------------------|----------------|
| 6.  | nil                          | Yes                            |                |
| 7.  |                              | Yes                            |                |
| 8.  |                              | Yes                            |                |
| 9.  |                              | Yes                            |                |
| 10. |                              | Yes                            |                |

This is to certify that 0 offers were received at the opening session.

|                          |                    |   |
|--------------------------|--------------------|---|
| <b>Chairperson Name:</b> | FRANKLIN CAMILLERI | <b>Members of the Adjudication Board:</b> SYLVANA SAID/ FIONA GRECH |
| <b>Signature:</b>        |                    |   |
| <b>Date:</b>             |                    |   |

## SCHEDULE OF PARTICIPATION RECIEVED

|                          |                        |                      |                |
|--------------------------|------------------------|----------------------|----------------|
| <b>Item Description:</b> | Complete Trauma System | <b>ERU Ref:</b>      |                |
|                          |                        | <b>Closing Date:</b> | 2 Month, 2019. |

|     | <u>Participating Bidders</u> | <u>Offers Received in Time</u> | <u>Remarks</u> |
|-----|------------------------------|--------------------------------|----------------|
| 11. | NIL                          | Yes                            |                |
| 12. |                              | Yes                            |                |
| 13. |                              | Yes                            |                |
| 14. |                              | Yes                            |                |
| 15. |                              | Yes                            |                |

This is to certify that 0 offers were received at the openeing session.

|                          |                    |   |
|--------------------------|--------------------|---|
| <b>Chairperson Name:</b> | FRANKLIN CAMILLERI | <b>Members of the Adjudication Board:</b> SYLVANA SAID/ FIONA GRECH |
| <b>Signature:</b>        |                    |   |
| <b>Date:</b>             |                    |   |

## SCHEDULE OF PARTICIPATION RECIEVED

|                          |                               |                      |                 |
|--------------------------|-------------------------------|----------------------|-----------------|
| <b>Item Description:</b> | EQ11220 Closed Suction System | <b>ERU Ref:</b>      |                 |
|                          |                               | <b>Closing Date:</b> | 2 Month, 2019 . |

|     | <u>Participating Bidders</u> | <u>Offers Received in Time</u> | <u>Remarks</u> |
|-----|------------------------------|--------------------------------|----------------|
| 16. | nil                          | Yes                            |                |
| 17. |                              | Yes                            |                |
| 18. |                              | Yes                            |                |
| 19. |                              | Yes                            |                |
| 20. |                              | Yes                            |                |

This is to certify that 0 offers were received at the openeing session.

|                          |                    |   |
|--------------------------|--------------------|---|
| <b>Chairperson Name:</b> | FRANKLIN CAMILLERI | <b>Members of the Adjudication Board:</b> SYLVANA SAID/ FIONA GRECH |
| <b>Signature:</b>        |                    |   |
| <b>Date:</b>             |                    |   |

## SCHEDULE OF PARTICIPATION RECEIVED

|                          |   |                      |                |
|--------------------------|---|----------------------|----------------|
| <b>Item Description:</b> | EQ01013 Bandages Plaster of Paris 7.5cm | <b>ERU Ref:</b>      | []             |
|                          |   | <b>Closing Date:</b> | 2 Month, 2019. |

|     | <u>Participating Bidders</u> | <u>Offers Received in Time</u> | <u>Remarks</u> |
|-----|------------------------------|--------------------------------|----------------|
| 21. |                              | Yes                            |                |
| 22. |                              | Yes                            |                |
| 23. |                              | Yes                            |                |
| 24. |                              | Yes                            |                |
| 25. |                              | Yes                            |                |

This is to certify that 5 offers were received at the opening session.

|                          |                    |   |
|--------------------------|--------------------|---|
| <b>Chairperson Name:</b> | FRANKLIN CAMILLERI | <b>Members of the Adjudication Board:</b> SYLVANA SAID/ FIONA GRECH |
| <b>Signature:</b>        |                    |   |
| <b>Date:</b>             |                    |   |

## SCHEDULE OF PARTICIPATION RECEIVED

|                          |  |                      |                |
|--------------------------|--|----------------------|----------------|
| <b>Item Description:</b> | EQ02083 Surgical Adhesive Drapes 160cm x 175cm | <b>ERU Ref:</b>      | [ ]            |
|                          |  | <b>Closing Date:</b> | 2 Month, 2019. |

|     | <u>Participating Bidders</u> | <u>Offers Received in Time</u> | <u>Remarks</u> |
|-----|------------------------------|--------------------------------|----------------|
| 26. | [ ]                          | [Yes ]                         | [ ]            |
| 27. | [ ]                          | [Yes ]                         | [ ]            |
| 28. | [ ]                          | [Yes ]                         | [ ]            |
| 29. | [ ]                          | [Yes ]                         | [ ]            |
| 30. | [ ]                          | [Yes ]                         | [ ]            |

This is to certify that 5 offers were received at the opening session.

|                          |                       |   |
|--------------------------|-----------------------|---|
| <b>Chairperson Name:</b> | [FRANKLIN CAMILLERI ] | <b>Members of the Adjudication Board:</b> SYLVANA SAID/ FIONA GRECH |
| <b>Signature:</b>        |                       |   |
| <b>Date:</b>             |                       |   |