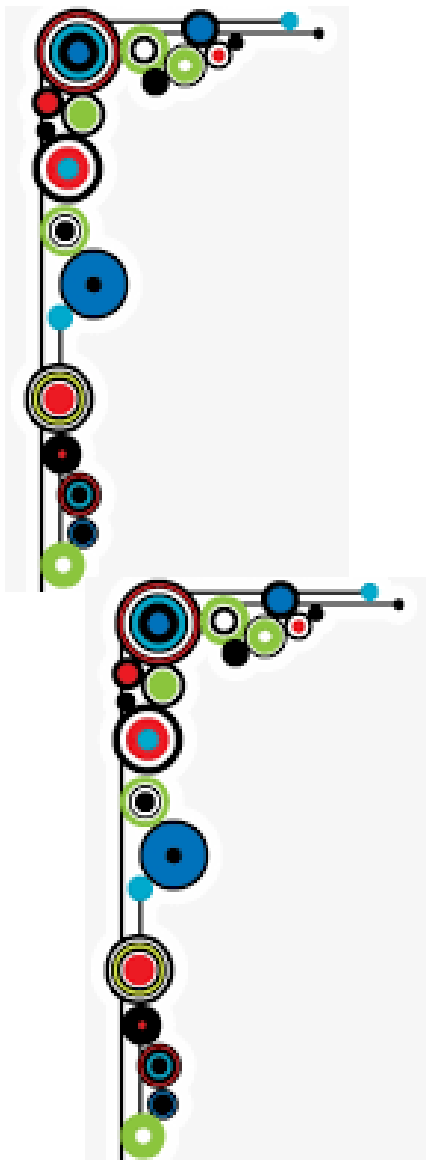


**IB 2024-21- SUPPLY, DELIVERY AND INSTALLATION OF  
AUTOMATED CPR MANIKINS AND MATERNAL CARE  
PATIENT SIMULATOR**

**SECTION 6 –  
SCHEDULE OF  
REQUIREMENTS**



# IB 2024-21- SUPPLY, DELIVERY AND INSTALLATION OF AUTOMATED CPR MANIKINS AND MATERNAL CARE PATIENT SIMULATOR

*The delivery schedule expressed as weeks/months stipulates hereafter a delivery date which is the date of delivery to the project site.*

Item Number	Description	Quantity	Delivered, weeks/ Months
1	Automated CPR Manikin	3 sets	<b>45 calendar days from receipt of PO and NTP</b>
2	Maternal Care Patient Simulator	1 set	
	XXXXXXXXXXXXXXXXXX		

\_\_\_\_\_

*Name of Bidder over Printed Name*

\_\_\_\_\_

*Designation*

\_\_\_\_\_

*Date*