

REQUEST FOR QUOTATION (RFQ)

RFQ Reference: 4200715401

Date: 21 August 2024

SECTION 1: REQUEST FOR QUOTATION (RFQ) for the Procurement of medications and supplies to medical teams in Alkufra and Tobruk (L3 Sudan Response)

International Organisation for Migration (IOM) kindly requests your quotation for the provision of goods detailed in Annex 1 of this RFQ.

This Request for Quotation comprises the following documents:

Section 1: This request letter

Section 2: RFQ Instructions and Data

Annex 1: Schedule of Requirements

Annex 2: Quotation Submission Form

Annex 3: Technical and Financial Offer

When preparing your quotation, please be guided by the RFQ Instructions and Data. Please note that quotations must be submitted using **Annex 2: Quotation Submission Form and Annex 3 Technical and Financial Offer**, by the method and by the date and time indicated. It is your responsibility to ensure that your quotation is submitted on or before the deadline. Quotations received after the submission deadline, for whatever reason, will not be considered for evaluation.

Thank you and we look forward to receiving your quotations.

Approved by:

Supply Chain Unit

IOM Libya Mission

SECTION 2: RFQ INSTRUCTIONS AND DATA

Deadline for the Submission of Quotation	25th August 2024 17:00 If any doubt exists as to the time zone in which the quotation should be submitted, refer to http://www.timeanddate.com/worldclock/ .
Method of Submission	<p>Quotations must be submitted as follows:</p> <p><input type="checkbox"/> E-tendering <input checked="" type="checkbox"/> Email <input type="checkbox"/> Courier / Hand delivery <input type="checkbox"/> Other Click or tap here to enter text.</p> <p>Bid submission address: iomlibyaproposal@iom.int</p> <ul style="list-style-type: none"> ▪ File Format: Pdf and Excel ▪ File names must be maximum 60 characters long and must not contain any letter or special character other than from Latin alphabet/keyboard. ▪ All files must be free of viruses and not corrupted. ▪ Max. File Size per transmission: 30 MB ▪ Mandatory subject of email: RFQ Company name ▪ Multiple emails must be clearly identified by indicating in the subject line “email no. X of Y”, and the final “email no. Y of Y.” ▪ It is recommended that the entire Quotation be consolidated into as few attachments as possible. ▪ The proposer should receive an email acknowledging email receipt.
Cost of preparation of quotation	IOM shall not be responsible for any costs associated with a Supplier's preparation and submission of a quotation, regardless of the outcome or the manner of conducting the selection process.
Supplier Code of Conduct	All prospective suppliers must read the UN Supplier Code of Conduct and acknowledge that it provides the minimum standards expected of suppliers to the UN. The Code of Conduct, which includes principles on labour, human rights, environment and ethical conduct may be found at: Supplier Code of Conduct (ungm.org) .
Conflict of Interest	UN encourages every prospective Supplier to avoid and prevent conflicts of interest, by disclosing to UN if you, or any of your affiliates or personnel, were involved in the preparation of the requirements, design, specifications, cost estimates, and other information used in this RFQ.
General Conditions of Contract	Any Purchase Order or contract that will be issued as a result of this RFQ shall be subject to the IOM General Conditions of Contract for provision of goods/services/transportation/medical services available at https://www.iom.int/do-business-us-procurement .
Eligibility (Upon conditional awarding)	<p>Bidders shall have the legal capacity to enter into a binding contract with IOM and to deliver in the country, or through an authorized representative.</p> <p>QA documents required before engaging in any contract:</p> <p>Pharmaceuticals:</p> <p>Low Risk: Prequalified Lists WHO - Prequalification of Medical Products (IVDs, Medicines, Vaccines and Immunization Devices, Vector Control)/SRA Certification or</p> <p>Medium Risk:</p> <ul style="list-style-type: none"> A. COO, COA, Batch Release Certificate, Certificate of Good Manufacturing Practice for QA verification or B. FDCC Clearance certificate of each medicine with detailed specifications and batches intended to be supplied and C. FDCC Registration of the local vendors

	<p>Medical supplies and equipment:</p> <p>Low Risk: SRA Certificate or</p> <p>Medium Risk: CE Certificate or</p> <p>High-Risk: FDCC certificate of each medical supplies (if applicable) and FDCC Registration of the local vendors.</p>
Currency of Quotation	Quotations shall be quoted in USD
Duties and taxes	<p>The International Organization for Migration is exempt from all direct taxes, except charges for public utility services, and is exempt from customs restrictions, duties, and charges of a similar nature in respect of articles imported or exported for its official use. All quotations shall be submitted net of any direct taxes and any other taxes and duties, unless otherwise specified below:</p> <p>All prices shall:</p> <p><input type="checkbox"/> be inclusive of VAT and other applicable indirect taxes</p> <p><input checked="" type="checkbox"/> be exclusive of VAT and other applicable indirect taxes</p>
Language of quotation and documentation including catalogues, instructions and operating manuals	English
Documents to be submitted	<p>Bidders shall include the following documents in their quotation:</p> <p><input checked="" type="checkbox"/> Annex 2: Quotation Submission Form duly completed and signed</p> <p><input checked="" type="checkbox"/> Annex 3: Technical and Financial Offer duly completed and signed and in accordance with the Schedule of Requirements in Annex 1</p> <p><input checked="" type="checkbox"/> Other Bidder not already registered with IOM must submit the following documents: Company Profile, Valid Company Registration Certificates, Company Articles of association, Company Organogram, Bank account letter, Audited financial statement for last two years or Bank account statement for one year, Tax Certificate, references.</p>
Quotation validity period	Quotations shall remain valid for 60 days from the deadline for the Submission of Quotation.
Price variation	No price variation due to escalation, inflation, fluctuation in exchange rates, or any other market factors shall be accepted at any time during the validity of the quotation after the quotation has been received.
Partial Quotes	<p><input type="checkbox"/> Not permitted</p> <p><input checked="" type="checkbox"/> Permitted <i>(per line item)</i></p>
Payment Terms	<p><input checked="" type="checkbox"/> 100% within 30 days after receipt of goods, works and/or services and submission of payment documentation.</p> <p><input type="checkbox"/> Other Click or tap here to enter text.</p>
Contact Person for correspondence, notifications and clarifications	<p>Focal Person: Procurement focal point</p> <p>E-mail address: iomlibyaproposal@iom.int</p>
Clarifications	Requests for clarification from bidders will not be accepted any later than 3 days before the submission deadline. Responses to request for clarification will be communicated by email by 01 July 2024
Evaluation method	<p><input checked="" type="checkbox"/> The contract will be awarded to the lowest price substantially compliant offer with required QA Documents.</p> <p><input type="checkbox"/> Other Click or tap here to enter text.</p>
Evaluation criteria	<p><input checked="" type="checkbox"/> Full compliance with all requirements as specified in Annex 1 (dosage form, concentration, active ingredients. Etc)</p> <p><input checked="" type="checkbox"/> Full acceptance of the General Conditions of Contract</p> <p><input checked="" type="checkbox"/> Comprehensiveness of after-sales services</p> <p><input checked="" type="checkbox"/> Earliest Delivery /shortest lead time</p> <p><input checked="" type="checkbox"/> Expiry date no less than 18 months</p> <p><input type="checkbox"/> Others <i>(for ex, environmental criteria/considerations, etc)</i></p>

Right not to accept any quotation	IOM is not bound to accept any quotation, nor award a contract or Purchase Order
Right to vary requirement at time of award	At the time of award of Contract or Purchase Order, IOM reserves the right to vary (increase or decrease) the quantity of services and/or goods, by up to a maximum 25% of the total offer, without any change in the unit price or other terms and conditions.
Type of Contract to be awarded	PO for goods
Expected date for contract award.	01 September 2024
Policies and procedures	This RFQ is conducted in accordance with Policies and Procedures of IOM
UNGM registration	IOM is encouraging all suppliers to register at the United Nations Global Marketplace (UNGM) website at www.ungm.org . The Bidder may still submit a quotation even if not registered with the UNGM, however, if the Bidder is selected for Contract award of USD 100,000 and above, the Bidder is recommended to register on the UNGM prior to contract signature. For vendors who do not have the technical means to register in UNGM, the UNGM has implemented an assisted vendor registration functionality that allows IOM procurement personnel to add local vendors to the UNGM.
Partial Awarding	<input type="checkbox"/> Not permitted <input checked="" type="checkbox"/> Permitted <i>(per line item)</i>

ANNEX 1: SCHEDULE OF REQUIREMENTS

Technical Specifications for Goods

Delivery Requirements

Delivery Requirements	
Delivery date and time	Bidder shall deliver the goods to Benghazi and Alkufra After Contract signature.
Delivery Terms (INCOTERMS 2020)	DAP
Customs clearance (must be linked to INCOTERM)	<input checked="" type="checkbox"/> Not applicable Shall be done by: <input type="checkbox"/> Name of organisation <input type="checkbox"/> Supplier/bidder <input type="checkbox"/> Freight Forwarder
Exact Address(es) of Delivery Location(s)	Alkufra / Benghazi
Distribution of shipping documents (if using freight forwarder)	N/A
Packing Requirements	N/A
After-sales service and local service support requirements	At least 1 year warranty
Preferred Mode of Transport	Land
Other information	N/A

Technical Specifications:

No	Description	Unit	Total Qty
1	Albendazole Oral suspension 200 mg/5 ml	10 ml Bottle	30
2	Albendazole Tablet 400 mg.	Pack of one Tablet	30
3	Antihemorroidal cream containing Lidocaine/Fluocinolone Acetonide	20 g Tube	40
4	Amlodipine 5 Mg Tablet	Pack of 28 Tab	120
5	Amlodipine 10mg Tablet	Pack of 28 Tab	100

6	Adult Cough syrup contains Ammonium Chloride, Diphenhydramine Hcl, Menthol, and Sodium Citrate	Bottle 120 ml	100
7	Atorvastatin 20mg Tablet	Pack of 30 Tab	55
8	Aspirin 75 Mg Tablet	Pack of 56 Tab	60
9	Azithromycin 500mg Tablet	Pack of 3 Tab	100
10	Azithromycin Syrup 200mg/5ml	Bottle of 15 ml	60
11	Benzyl Benzoate Lotion 25%	Bottle of 125 ml	300
12	Bisacodyl 5mg Tablet	Pack of 30 Tab	30
13	Bisoprolol Fumarate 5 Mg	Pack of 28 Tab	50
14	Candesartan cilexetil 8 mg	Pack of 28 Tab	40
15	Candesartan cilexetil 16 mg	Pack of 28 tab	40
16	Calcium and minerals Tablet.	Pack of 30 Table	35
17	Calamine Lotion	Bottle of 100 ml	100
18	Carbimazole 5 Mg Tablet	Pack of 100 Tab	20
19	Cefixime 100 Mg/5 MI Suspension	Bottle 30 ml	60
20	Cefixime 400 mg Capsule	Pack of 5 Cap	80
21	Ceftriaxone 1g IM/IV	Pack of 1 Vial	60
22	Chloramphenicol 1% Eye Ointment	5g Tube	30
23	Chlorpheniramine Syrup 2mg/5ml	Bottle 100 ml	60
24	Ciprofloxacin 500mg Tablet	Pack of 10 Tab	150
25	clobetasol propionate 0.05% ointment	Tube of 25 gram	80
26	Clopidogrel 75 Mg Tablet	Pack of 28 Tab	10
27	Clotrimazole Skin Cream 1%	20 g Tube	140
28	Amoxicillin + clavulanic acid 156 Mg/5ml suspension.	Bottle 100 ml	50
29	Amoxicillin + clavulanic acid suspension. 457 Mg/5ml	Bottle 70 ml	50
30	Amoxicillin + clavulanic acid 625 Mg Tablet	Pack of 20 Tab	250
31	Amoxicillin + clavulanic acid 1g Tablet	Pack of 14 Tab	200
32	Docusate Sodium 0.5% ear drops	Bottle 10 ml	15

33	Dexamethasone 4mg/ml injection	Pack of 10 Amp	6
34	Diclofenac Sodium 1% Gel	30 g Gel Tube	200
35	Diclofenac Sodium 50 Mg Tablet	Pack of 20 Tablet	1000
36	Diclofenac Sodium 75mg/3ml Injection	Pack of 5 Amp	40
37	Domperidone 10mg suppository	Pack of 5 Supp	20
38	Doxycycline 200mg Tablet.	Pack of 8 Tablet	50
39	Ferrous Sulphate 200mg Tablet	Pack of 30 Tab	150
40	Fluconazole 150mg Tablet	Pack of 1 Tab	20
41	Folic Acid 5mg Tablet	Pack of 28 Tab	100
42	Fusidic acid 2% ointment	15 g Tube	150
43	Eurosemide 20mg/2ml Ampule.	Pack of 10 Amp	1
44	Gentamicin 0.3% Eye Drops	5 ml bottle	90
45	Glibenclamide 5mg Tablet	Pack of 60 Tab	150
46	Glimepiride 4 mg tablet	Pack of 30 Tab	100
47	Glycerin suppository children	Pack of 5 Suppositories	30
48	Ibuprofen 100mg/5ml	Bottle 100 ml	100
49	Ibuprofen 400mg Film Coated	Pack of 24 Tab	200
50	hexamine 500.00 mg . Piperazine citrate 190.00 mg . Khellin 1.83 mg Combination	Pack of 12 sach	200
51	Hydrochlorothiazide 25 mg Tablet	Pack of 20 Tablet	10
52	Hydrocortisone 100mg Vial	Vial	20
53	Hydrocortisone Acetate Ointment 1%	15 g Tube	200
54	Hyoscine Butylbromide 10 mg Tablet	Pack of 20 Tab	100
55	Hyoscine Butylbromide 20 mg/ml	Pack of 6 Amp	10
56	Lactulose syrup 3.35g/5mL	Bottle of 200 ml	60
57	Levothyroxine 100 mcg Tablet	Pack of 50 Tab	65
58	Chlordiazepoxide 5mg /2.5 clidinium bromide Tablet	Pack of 30 Tab	50
59	Loperamide 2mg Capsule	Pack of 10 Capsule	40

60	Loratadine 10mg Tablet	Pack of 10 Tab	570
61	Metformin 500 Mg Tablet	Pack of 30 Tab	75
62	Metformin 850 Mg Tablet	Pack of 56 Tab	100
63	Metoclopramide 10mg Injection	Pack of 10 Amp	6
64	Metronidazole 125 Mg/5ml Suspension	Bottle 100 ml	75
65	Metronidazole 500mg Tablet	Pack of 30 Tab	125
66	Miconazole Vaginal Cream 2%	50 g Tube	100
67	Multivitamins Children Syrup	Bottle 120 ml	100
68	Multivitamins Tablet	Pack of 50 Tab	150
69	Naphazoline hydrochloride+ Chlorpheniramine maleate eye/Nasal drops	15 ml Dropper Bottle	100
70	Nystatin Suspension 100 000 IU/ ml	Bottle of 30 ml	40
71	Normal saline 0.9% infusion.	Bag of 500 ml	120
72	Omeprazole 40 mg Vial	Pack of 1 vial	40
73	Omeprazole 40 mg Tablet	Pack of 28 Tablet	600
74	ORS (oral rehydration salt)	Pack of 10 sach	50
75	Paracetamol 1000mg /100ml Infusion	100 ml Pack	40
76	Paracetamol 125mg Suppository	Pack of 10 Supp	100
77	Paracetamol 250mg/5 ml Suspension	Bottle 100 ml	320
78	Paracetamol 500 Mg Tablet	Pack of 100 Tab	175
79	Paracetamol, chlorpheniramine, and phenylephrine Tablet combination	Pack of 20 Tab	150
80	Paracetamol 450 mg & Orphenadrine Citrate 35 mg/Tab	Pack of 20 Tablet	175
81	Prednisolone 5 Mg Tablet	Pack of 20 Tablet	20
82	Sodium Valproate 500 mg Tablet	Pack of 40 Tablet	12
83	Salbutamol 0.1 Mg/Dose Inhaler	200 Doses Inhaler	45
84	Simethicone Oral Drops	Bottle 15 ml	40
85	Sulphur Soap	Singel Pack	300
86	Sterile Water For Injection 10ml ampoule	Pack of 50 Ampoule	6

87	Tamsulosin 0.4mg Tablet	Pack of 30 Tab	20
88	Tetanus antitoxin injection	Single Ampule	20
89	Thiocolchicoside 4mg/2ml	Pack of 6 Amp	14
90	Vitamin B Complex Tablet	Pack of 30 Tab	120
91	Vitamin B Complex IM Injection	Pack of 5 Amp	30
92	Vitamin C (Ascorbic Acid) 500mg	Pack of 20 Tab	200
93	Xylometazoline 0.05% Nasal Drops	Singel Pack	100
94	Xylometazoline 0.1% Nasal Drops	Singel Pack	100
95	Alcohol solution 75%	1000 ml Bottle	10
96	Alcohol medical swabs	Pack of 100	10
97	Adhesive non woven wound dressing 10 m x 15 cm Roll	Roll	24
98	Absorbent Cotton Wool	500 g Roll	18
99	Biohazard Bags 10 L	Roll of 10	14
100	Blood Lancet for Glucometer 28G	Pack of 100	7
101	Disposable non -woven Bed sheets-30-35 gram	EA	300
102	Elastic Crepe Bandages 10 cm X 4m	Roll	500
103	Gauze bandage roll 10 cm cmx 4.5 m	Roll	200
104	Infusion giving set,sterile	EA	200
105	Cannula IV short 22G, sterile	EA	100
106	Cannula IV short 20G, sterile	EA	100
107	Nebulizer Masks (Adult size)	EA	20
108	Nebulizer Masks (Pediatric size)	EA	20
109	Medical Nitrile examination Gloves, Powder free, dipsosable	Box of 100	40
110	Non Sterile Gauze Pads 7.5cm X 7.5cm	Pack of 100	50
111	Paraffin Dressing Gauze 10cm X10 Cm	Pack of 10	10
112	Povidone Iodine 10% solution	Bottle of 1000 ml	10
113	Pregnancy Rapid Test Kit	EA	40
114	Sterile Gauze 12 ply 10cm x10 cm	Pack of 100	30
115	Sterile Surgical Blades no 22	Pack of 100	4
116	Surgical gown Reinforced sterile size L	EA	35
117	Sterile surgical gloves size 7.5	50 Pair	2
118	Syringes Insulin U-100 1ml	Single unit	200
119	Syringe, 3ml, Sterile with detached needle, 21Gx1 1/2" (0.80 x 40mm), disposable	Single unit	200

120	Syringe, 5ml, sterile, with detached (bi-packed / mounted) needle, 21Gx1 1/2" (0.80 x 40mm), disposable	Single unit	200
121	Syringe, 10ml, sterile, with detached (bi-packed / mounted) needle , 21Gx1 1/2" (0.80 x 40mm), disposable	Single unit	400
122	Wooden Tongue depressor (Sterile)	Pack of 100	10
123	Portable cool Box 45 Liter with four 500ml Ice Pack. EA	Single unit	5
124	Clinically Validated digital Sphygmomanometer replaceable battery powered device with digital screen and suitable for arm blood pressure measurement, inclduing Cuff for children preferabley Riester or equivalnet. With CE marking	Single unit	2
125	Finger Pulse oximeter Portable Digital Reading LED Display. Blood Oxygen Saturation Monitor (SpO2) with Pulse Rate Measurements.	Single unit	2
126	High quality Dual Head Stethoscope . Acoustic Chrome-plated binaural metal with diaphragm & cone and non-chill large bell. With CE marking	Single unit	2
127	Glucometer with glucose test strips-Digital device with battery , lancets , lancet pin .	Single unit	2
128	Glucometer test strips .	Pack of 50 strips	10
129	Digital thermometer, Oral Thermometer reading within 30 second. Measurement range 32 °C - 42 °C.	Single unit	4
130	Professional Diagnostic Led, Medical Penlight.	Single unit	4
131	Otoscope. 2.7V vacuum lamp. Removable magnifying lens with 2.5x magnification, Simple bulb replacement at the base of the instrument head, Screw fitting for secure attachment to the handle Supplied in a sturdy nylon pouch.	Single unit	2
132	Disposable Otoscope Specula 4mm.	Single unit	200
133	Transportation to Alkufra and Tobruk	Single unit	1

ANNEX 2: QUOTATION SUBMISSION FORM

Bidders are requested to complete this form, including the Company Profile and Bidder's Declaration, sign it and return it as part of their quotation along with Annex 3: Technical and Financial Offer. The Bidder shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

Name of Bidder:	Click or tap here to enter text.	
RFQ reference:	4200715401	Date: Click or tap to enter a date.

VENDOR INFORMATION SHEET¹

Please attach the latest vendor information sheet to be filled in and signed by the vendor

BIDDER'S DECLARATION OF CONFORMITY²

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I hereby represent and warrant that neither the Supplier, nor any person having powers of representation, decision-making or control over it or any member of its administrative, management or supervisory body, has been the subject of a final judgement or final administrative decision for one of the following reasons: bankruptcy, insolvency or winding-up procedures; breach of obligations relating to the payment of taxes or social security contributions; grave professional misconduct, including misrepresentation, fraud; corruption; conduct related to a criminal organisation; money laundering or terrorist financing; terrorist offences or offences linked to terrorist activities; child labour and other trafficking in human beings, any discriminatory or exploitative practice, or any practice that is inconsistent with the rights set forth in the Convention on the Rights of the Child or other prohibited practices; irregularity; creating or being a shell company.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier is financially sound and duly licensed.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier has adequate human resources, equipment, competence, expertise and skills necessary to complete the contract fully and satisfactorily, within the stipulated completion period and in accordance with the relevant terms and conditions.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier complies with all applicable laws, ordinances, rules and regulations.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier will in all circumstances act in the best interests of IOM.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that no official of IOM or any third party has received from, will be offered by, or will receive from the Supplier any direct or indirect benefit arising from the contract.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier has not misrepresented or concealed any material facts during the contracting process.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier will respect the legal status, privileges and immunities of IOM as an intergovernmental organization.

¹ [Vendor Information Sheet.xlsx](#)

² This form is mandatory to fill in and sign by every vendor who submits quotation

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that neither the Supplier nor any persons having powers of representation, decision-making or control over the Supplier or any member of its administrative, management or supervisory body are included in the most recent Consolidated United Nations Security Council Sanctions List (the “UN Sanctions List”) or are the subject of any sanctions or other temporary suspension. The Supplier will immediately disclose to IOM if it or they become subject to any sanction or temporary suspension.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier does not employ, provide resources to, support, contract or otherwise deal with any person, entity or other group associated with terrorism as per the UN Sanctions List and any other applicable anti-terrorism legislation.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that, the Supplier will apply the highest ethical standards, the principles of efficiency and economy, equal opportunity, open competition and transparency, and will avoid any conflict of interest.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I further represent and warrant that the Supplier undertakes to comply with the Code of Conduct, available at https://www.ungm.org/Public/CodeOfConduct .
<input type="checkbox"/>	<input type="checkbox"/>	It is the responsibility of the Supplier to inform IOM immediately of any change to the information provided in this Declaration.
<input type="checkbox"/>	<input type="checkbox"/>	On behalf of the Supplier, I certify that I am duly authorized to sign this Declaration and on behalf of the Supplier I agree to abide by the terms of this Declaration for the duration of any contract entered into between the Supplier and IOM.
<input type="checkbox"/>	<input type="checkbox"/>	IOM reserves the right to terminate any contract between IOM and the Supplier, with immediate effect and without liability, in the event of any misrepresentation made by the Supplier in this Declaration.

Signature: _____

Name: Click or tap here to enter text.

Title: Click or tap here to enter text.

Date: Click or tap to enter a date.

ANNEX 3: TECHNICAL AND FINANCIAL OFFER - GOODS

Bidders are requested to complete this form, sign it and return it as part of their bid along with Annex 2: Quotation Submission Form. The Bidder shall fill in this form in accordance with the instructions indicated. No alterations to its format shall be permitted and no substitutions shall be accepted.

Name of Bidder:	Click or tap here to enter text.	
RFQ reference:	4200715401	Date: Click or tap to enter a date.

Detailed description of expiry date, brand, dosage form and concentration of the pharmaceuticals is MANDATORY, sample pictures are advantages.

Financial and technical offer MUST be signed and stamped. Please use the [excel sheet](#) through this link to fill up your offer

Currency of the Quotation: USD					
INCOTERMS: DAP					
Item No	Description	UOM	Qty	Unit price	Total price
1.	Click or tap here to enter text.				
2.	Click or tap here to enter text.				
3.	Click or tap here to enter text.				
4.	Click or tap here to enter text.				
5.	Click or tap here to enter text.				
Total Price					
Transportation Price					
Insurance Price					
Installation Price					
Training Price					
Other Charges (specify)					
Total Final and All-inclusive Price					

Compliance with Requirements

	You Responses		
	Yes, we will comply	No, we cannot comply	If you cannot comply, pls. indicate counter proposal
Minimum Technical Specifications	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Delivery Term (INCOTERMS)	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Delivery Lead Time	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Warranty and After-Sales Requirements	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.

Validity of Quotation	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Payment terms	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.
Other requirements <i>[pls. specify]</i>	<input type="checkbox"/>	<input type="checkbox"/>	Click or tap here to enter text.

Other Information:

Estimated weight/volume/dimension of the Consignment:	Click or tap here to enter text.
Country/ies of Origin: <i>(if export licence required this must be submitted if awarded the contract)</i>	Click or tap here to enter text.

I, the undersigned, certify that I am duly authorized to sign this quotation and bind the company below in event that the quotation is accepted.	
<i>Exact name and address of the company</i> Company Name: Click or tap here to enter text. Address: Click or tap here to enter text. Click or tap here to enter text. Phone No.: Click or tap here to enter text. Email Address: Click or tap here to enter text.	Authorized Signature: Date: Click or tap here to enter text. Name: Click or tap here to enter text. Functional Title of Authorised Signatory: Click or tap here to enter text. Email Address: Click or tap here to enter text.