



Quotation Form

Name of Bidder: _____

Date of Bid: _____

Request for Quotation No: UNFPA/SYR/RFQ/RH/10-2018/32

Currency of Bid price: _____

Delivery time (*weeks from receipt of order till dispatch*): _____

Expiration of Validity of Quotation (*The quotation shall be valid for a period of at least 3 months/90 days after the Closing date.*): _____

Price Schedule:

No.	Item	Unity of Measure	Quantity	Unit price USD	Total price USD
1	Miconazole 200mg ovule	EA	500,000		
2	Metronidazole Ovule	EA	200,000		



In your offer, please include:

1. Specific technical specifications of products offered
2. Quality standard of the products

Vendor's Comments:

I hereby certify that this company, which I am duly authorized to sign for, accepts the terms and conditions of UNFPA (<http://www.unfpa.org/resources/unfpa-general-conditions-contract>) and we will abide by this quotation until it expires.

Name and title

Date and Place