



Annex 1- Quotation Form

Name of Bidder: _____

Date of Bid: _____

Bidder Contact Details: (Phone No., Email) _____

Request for Quotation No: UNFPA-SYR-RFQ-RH-01-2024-1 medical devices

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 **three months** after the Closing date):* _____

Price Schedule:

#	Item	Quantity	UOM	Unit Cost	Total Cost
1	Oxygen cylinder with accessories	20	Each		
2	X-Ray board viewer for the neonatal bed	4	Each		
3	UV-C Disinfection lighting	8	Each		
4	Plus Oximeter	5	Each		
5	Baby scale	4	Each		
6	Hematocrit centrifuge	1	Each		
7	Auto chemical analyzer	1	Each		
8	Auto Hematology analyzer	2	Each		
9	ESR device	1	Each		



United Nations Population Fund,
UNFPA Syria
Website: www.unfpa.org

UNFPA-SYR-RFQ-RH-02-2022-04

10	Spectrophotometer	1	Each		
		Grand total Cost			

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