PRICE Quotation Form

|  |  |
| --- | --- |
| **Name of Bidder:** |  |
| **Date of the quotation:** | Click here to enter a date. |
| **Request for quotation Nº:** | UNFPA/IDN/RFQ/20/002 |
| **Currency of quotation :** | IDR |
| **Delivery charges based on the following 2010 Incoterm:** | N/A |
| **Validity of quotation:**  *(The quotation must be valid for a period of at least 3 months after the submission deadline)* |  |

* Quoted rates must be **exclusive of all taxes**, since UNFPA is exempt from taxes.
* The format provided shall be used as a model in preparing the Price Quotation. The format includes specific expenditures, which may or may not be required or applicable but are indicated to serve as examples.
* In case of discrepancy between unit price and total price, the lower price shall prevail and the higher price shall be corrected. If the Bidder does not accept the correction of errors, its Proposal will be rejected.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item No.** | **Product Name and Description** | QTY | **Unit** | **Unit price**  **(IDR)** | **Total price**  **(IDR)** | **Delivery schedule\***  **(calendar days)** |
| 1 | Maternity Kit | 100 | Kits |  |  |  |
| 2 | Post Delivery Kit | 100 | Kits |  |  |  |
| 3 | Female Elderly Kit | 100 | Kits |  |  |  |
|  | | | | **TOTAL** |  |  |

\*from the date of order confirmation by UNFPA

*Vendor’s Comments:*

I hereby certify that the company mentioned above, which I am duly authorized to sign for, has reviewed RFQ Nº UNFPA/IDN/RFQ/20/002 including all annexes, amendments to the RFQ document (if applicable) and the responses provided by UNFPA on clarification questions from the prospective service providers. Further, the company accepts the General Conditions of Contract for UNFPA and we will abide by this quotation until it expires.

|  |  |  |
| --- | --- | --- |
|  | Click here to enter a date. |  |
| Name and title | Date and place | |