**ANNEX D: REQUEST FOR PROPOSAL FOR SERVICES FORM**

This form must be completed, signed and returned to UNICEF.

Proposal must be made in accordance with the instructions contained in this Request for proposal for Services (LRFPS).

**TERMS AND CONDITIONS OF CONTRACT**

Any Contract resulting from this LRFPS shall contain UNICEF General Terms and Conditions for Institutional and Corporate Contracts and any other Specific Terms and Conditions detailed in this LRFPS

**INFORMATIONS**

Any request for information regarding this LRFPS must be forwarded by email to the person who prepared this document, with specific reference to the LRFPS number.

The undersigned, having read the Terms and Conditions of Quotation N° **LRFPS-2020-9163779** set out in the attached document, hereby offers the services specified in this document.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name & Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Company: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tel/Cell No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax No : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Adress : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Currency of Proposal \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Validity of Proposal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please indicate which of the following Payment Terms are Offered by you :

10 day 3%  : \_\_\_\_\_%, 15 days 2.5% : \_\_\_\_\_, 20 days % : \_\_\_\_, a 30 days Net   : \_\_\_\_\_Other\_\_\_\_\_\_\_