**Annex 2**

**FORM FOR SUBMITTING SUPPLIER’S QUOTATION**

***(This Form must be submitted only using the Supplier’s Official Letterhead/Stationery[[1]](#footnote-1))***

We, the undersigned, hereby accept in full the UNDP General Terms and Conditions, and hereby offer to supply the items listed below in conformity with the specification and requirements of UNDP as per RFQ Reference No. **“RfQ16/01419: Design and printing of visibility materials for the Parliament of Republic of Moldova”**:

**TABLE 1: Offer to Supply Goods Compliant with Technical Specifications and Requirements**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Item No.** | **Description/Specification of Goods** | **Quantity****(pieces)** | **Latest Delivery Date** | **Unit Price****MDL** | **Total Price per Item****(VAT 0%)** |
|  | Servicii de design si machetare | 7 |  |  |  |
|  | Buletin Informativ „Parlament Info” | 950 |  |  |  |
|  | Broșură ”Clădirea Parlamentului” | 1000 |  |  |  |
|  | Pliant ”Parlament – structura, rol, funcții” | 1000 |  |  |  |
|  | Fișă informativă/Leaflet ”Implică-te” | 1000 |  |  |  |
|  | Fișă informativă/Leaflet ”Vizitează Parlamentul” | 1000 |  |  |  |
|  | Fișă informativa ”Program de stagii în Parlament” | 300 |  |  |  |
|  | Pliant ”Adoptarea” | 1000 |  |  |  |
|  | **Total** | 6257 |  |  |  |
|  | **Total Final and All-Inclusive Price Quotation** |  |

**TABLE 2: Offer to Comply with Other Conditions and Related Requirements**

|  |  |
| --- | --- |
| **Other Information pertaining to our Quotation are as follows:** | **Your Responses** |
| ***Yes, we will comply*** | ***No, we cannot comply*** | ***If you cannot comply, pls. indicate counter proposal*** |
| Delivery schedule ***14 calendar days upon signature of contract*** |  |  |  |
| Payment Terms |   |  |  |
| All Provisions of the UNDP General Terms and Conditions |  |  |  |

All other information that we have not provided automatically implies our full compliance with the requirements, terms and conditions of the RFQ.

*[Name and Signature of the Supplier’s Authorized Person]*

*[Designation]*

*[Date]*

1. *Official Letterhead/Stationery must indicate contact details – addresses, email, phone and fax numbers – for verification purposes*  [↑](#footnote-ref-1)