**Annex 2: Vendor Information Form**

| **Company Information** to be provided by the Vendor submitting the offer | | | | |
| --- | --- | --- | --- | --- |
| **UNGM Vendor ID Number: *If available*** *– Refer to WHO website for registration process\** |  | | | |
| **Legal Company Name:** *(Not trade name or DBA name)* |  | | | |
| **Company Contact:** |  | | | |
| **Address:** |  | | | |
| **City:** |  | State: | |  |
| **Country:** |  | | **Zip:** |  |
| **Telephone Number:** |  | Fax Number: | |  |
| **Email Address:** |  | **Company Website:** | |  |
| **Corporate information:** | | | | |
| Company **mission statement** |  | | | |
| **Service commitment** to customers and measurements used *(if available)* |  | | | |
| **Organization** structure (include description of those parts of your organization that would be involved in the performance of the work) |  | | | |
| Relevant **experience** (how could your expertise contribute to WHO’s needs for the purpose of this ITB) – *Please attach reference and contact details* |  | | | |
| **Staffing information** |  | | | |

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\* <http://www.who.int/about/finances-accountability/procurement/en/>