**Annex 3: Vendor Information Form**

| **Company Information** to be provided by the Vendor submitting the proposal |
| --- |
| **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 RFP) – *Please attach reference and contact details* |  |
| **Staffing information** |  |

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

**Annex 4: Budget Form**

|  |
| --- |
| **1. Project budget by type of expenditure item** |
|

|  |  |
| --- | --- |
| **Items of Expenditures** | **Amount** **(Indicate currency)** |
| Personnel |  |
| Supplies |  |
| Travel |  |
| Meetings |  |
| Data collection/analysis |  |
| Communication  |  |
| Other expenditures |  |
| Total estimated budget: |  |

Details should be provided below in 2. Budget justification. |

| **2. Budget justification**  |
| --- |
| *Justify each budget line by explaining how the planned cost relates to the planned activities, and how the cost figures were calculated in relation to those activities. Specifically, show an itemized breakdown of each cost figure (e.g. cost per unit; daily rate and number of days to be worked for each project staff member, etc.)* |
| **Personnel** Enter text here |
| **Supplies**Enter text here |
| **Travel** Enter text here |
| **Meetings**Enter text here |
| **Data collection/analysis**Enter text here |
| **Communication**Enter text here |
| **Other expenditures**Enter text here |