**Annex 2, Detailed Pricing/ Financial Offer;**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **#** | **Medicine/Item** | **Unit Pack** | **Unit** | **Quantity** | **Unit Price / SYP** | **Total Price / SYP** |
| 1 | Pen & Strep Injection | Bottle | 100 ml | 500 |   |   |
| 2 | Anti-Histamine Injection | Bottle | 100 ml | 500 |   |   |
| 3 | Ivermectin Injection | Bottle | 100 ml | 500 |   |   |
| 4 | oxytetracycline Injection | Bottle | 100 ml | 500 |   |   |
| 5 | Multi-Vitamin Injection | Bottle | 100 ml | 500 |  |  |
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|
| 6 | Oxy-blue spray | Spray | 250 - 500 ml | 500 |   |   |
| 7 | Dexamethasone Injection | Bottle | 100 ml | 500 |   |   |
| 8 | Cypermethrin  | Bottle | 1000 ml | 500 |   |   |
| 9 | Multi-mast | Package | 10 g | 2500 |   |   |
|
|
|
| 10 | Anti-diarrhea paste | Package | 70 g | 2500 |   |   |
|
|
| 11 | Sulphur Ointment  | Ointment | 70 g | 500 |   |   |
| 12 | Vitamins and minerals powder | Package | 1 kg  | 1000 |   |   |
| 13 | Metalgen Injection | Bottle | 100 ml | 500 |   |   |
| 14 | Thermometer | Piece | Piece | 500 |   |   |
| 15 | Syringes | Syringe | 5 ml | 5000 |   |   |
| 16 | Niclozamid | Package | 30 tablets | 500 |   |   |
| 17 | Bag | Bag | Piece | 500 |   |   |

|  |  |
| --- | --- |
| **Total price: numbers**  |  |
| **Total price: writing** |  |

**Transportation Prices:**

|  |  |
| --- | --- |
| **Location** | **Price/SYP** |
| Damascus Governorate |  |
| Homs Governorate |  |

**Note:** **Prices should be inclusive of all applicable taxes, transportation to the final delivery address, loading and offloading, transit Insurance, and all other related costs involved.**

**I acknowledge that the above information and documents are reliable and correct and I agree with the general terms and conditions of the Syrian Arab Red Crescent Society.**

Name: ……………………………………. Position: ……………………………………. Company: …………………….

Signature: ……………………………. Date: ……………………………………….. Company Stamp: