**OBGYN Quotation:**

**Doctor’s Name**

Based on the tender Ref#EH042024-G description provided by WATAD,

I **Dr. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** offer my Medical Services and Expertise as per the attached CV to the “EmpowerHer” project. I ensure my availability and agree to provide the Medical Consultation for women & girls in Tripoli at Nozha Medical Center For a:

* Fees of\_\_\_\_ USD per consultation
* And\_\_\_\_\_\_\_ USD per Ultrasound Examination (including consutation).

Tripoli: \_\_\_\_\_/\_\_\_\_\_\_\_/\_\_\_\_\_\_\_

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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