



REQUEST FOR QUOTATION

Date RFQ sent out:	6-Feb-24
Response deadline (day+ hour + Time zone):	22-Feb

RFQ #	Sleeping Kit001
PR #	

Vendor's information: for vendor to fill in	
Vendor Name:	
Contact name & Title:	
E-mail:	
Phone / Fax:	
Address:	

Union Relief & Development Associations	
Contact Name:	Jana Manasfi
Title:	Procurement Officer
E-mail:	urda.procurement@urda.org.lb
Phone / Fax:	71679710
Address:	Khalde, behind Al Rammal supermarket, Al Anwar bldg. Ground floor. Mount Lebanon

Date goods/services required by:	
Delivery address:	
Delivery method (if applicable)/ Incoterm:	
Payments Terms	

Number of samples required:	1
Kitting required (If yes provide details below):	

For vendor's to fill in								
Line Item	Description	Quantity requested	Unit of Measure	Currency	Unit Price	Total Price	Quantity Available (in Unit or %)	# of days needed to complete remaining quantity
1	Blanket 1.2 kg	1	kg	USD	\$ -	\$ -		
2	Blanket 1.4 kg	1	kg	USD	\$ -	\$ -		
3	Blanket 1.5 kg	1	kg	USD	\$ -	\$ -		
4	Blanket 1.6 kg	1	kg	USD	\$ -	\$ -		
5	Blanket 1.8 kg	1	kg	USD	\$ -	\$ -		
6	Blanket 2kg	1	kg	USD	\$ -	\$ -		
7	Mattresses 7cm	1	unit	USD	\$ -	\$ -		
8	Mattresses 8cm	1	unit	USD	\$ -	\$ -		
9	Pillow	1	unit	USD	\$ -	\$ -		

Validity of the quotation:	0
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INCOTERM (if different from the one requested)	NA
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Sub total	\$ -	
Delivery charge (if applicable)	\$ -	
Shipping insurance cost (if applicable)	\$ -	
Taxes (if applicable)	\$ -	LBP -
Discount	0.00%	
TOTAL + VAT		
USD	\$ -	

Partial Quotation : Union Relief & Development Association **May Not** consider a partial quotation.

Union Relief & Development Associations main selection criteria is based on best value for money including : vendor's eligibility / meeting minimum technical criteria / delivery time lines / price / shelf life / warranty / after sale support / and other, as applicable to the individual transaction

Additional information required: Delivery Location:

Supplier's offer confirmation: *by signing this document I acknowledge that I have reviewed and accepted all instructions below and I am authorized to present offer on behalf supplier*

Name	
Title	
Signature	

Supplier stamp



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