

RFI Annex. 2

Additional Procurement Information

Instructions:

Fill out the information that is applicable to the product. **Complete one questionnaire per product.**

Complete the fields in this questionnaire as applicable.

- Tick or place an X in any of the blocks that are true/applicable.
- Add rows to tables to include requested information. Alternatively, you may attach information in a separate sheet using the same format requested.
- In some instances, it may be required to duplicate sections, copy the section and paste as needed. Alternatively, duplicate copies of the section may be completed and attached.
- Update the table of contents when completed.

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1.0 Applicant Information

Questionnaire Submission Date (DD/MON/YYYY)	
Company Name (Supplier) <i>(name of company submitting bid)</i>	

2.0 Product Characteristics: Emergency Contraceptives

	1 Tablet Presentation	2 Tablets Presentation
Average lead-time		
Minimum order quantity required for order placement, if applicable		

3.0 Vendor-Managed Stock

	1 Tablet Presentation	2 Tablets Presentation
Is stock of finished product actively maintained?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
If stock of finished product is actively maintained, at what shelf-life/frequency is stock rotated?		

4.0 Indicative Pricing

Indicative pricing (information provided is non-binding and subject to negotiation in any future official RFP or RFQ)

	1 Tablet Presentation	2 Tablets Presentation	Comments
Average/typical Pricing (USD\$)	Average:	Average:	
Tiered Pricing Available?	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	

5.0 Authorization

Authorization for sharing information with other Agency(ies)

I, the undersigned [ENTER FULL NAME] , confirm that the company has no objection to the information contained herein being shared with USAID | GHSC and partner organizations, WHO and The Global Fund. The information in this questionnaire may also be shared with UNFPA, UNICEF, MSF and Global Drug Facility upon establishing appropriate agreements.

Name

Signature

Date (DD/MON/YYYY)

Full title/Position

Company name