# Financial Offer Form

Call: 39/2024/GWP-Med

Supplier’s Details:

|  |  |
| --- | --- |
| Type of Business (Company/Self-employed – Freelancer) |  |
| Company Name/supplier name:  |  |
| Address: |  |
| Tel/ e-mail address:  |  |
| VAT or Tax registration No: |  |
| Name of Legal Representative:  |  |

Offer:

Total price of is to be quoted in **Euros** **Including VAT and any other Tax or Fee** that should apply for any reason.

|  |  |  |  |
| --- | --- | --- | --- |
| Item | Description | Details  | Total (€) |
| Part A | Audit Services for the verification of Financial Reports of GWP-Med for the Horizon Europe Project SpongeWorks (101156116), for the period 1/9/2024 to 31/08/2028 | Three (3) Financial Reports (Month 18, Month 36 and Month 48) and the provision of a certificate on the financial statements (CFS) of GWP-MED at the end of the project for the period 1/9/2024 to 31/08/2028. |  |
| Part B | Audit Services for the verification of Financial Reports of GWP-Med for the Project MNE-RS-004, for the period of 24 months (23/08/2024 – 22/08/2026) | 2 Financial Reports for the periods:23/08/2024 – 31/12/202501/01/2026 – 22/08/2024 |  |
| GRAND TOTAL (€) |

The Participant I am representing (“We”) has examined, and accept in full and in its entirety, the content of this quotation document (including subsequent Clarification Notes issued by the Contracting Authority). We hereby accept the contents thereto in their entirety, without reservation or restriction. We also understand that any disagreement, contradiction, alteration, deviation or omission shall lead to our offer not being considered any further. We offer to provide, in accordance with the terms of the tender document and the conditions and time limits laid down, without reservation or restriction, the requirements of this Call For Offers

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*Signature Date*