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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **#** | **Item** | **QTY** | **Unit** | **Unit Price**  **SYP** | **Total Price**  **SYP** |
| 1. | GLOVES - EXAMINATION - NON STERILE | 20,000 | Box of 100 |  |  |
| Total price: numbers | | |  | | |
| Total price: writing | | |  | | |

**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: