**Annex No. 1 to the Request for Proposal**

|  |  |
| --- | --- |
| ………………………………………………………….  Stamp and signature of the Contractor or Contractors bidding jointly for the contract | ……………………………………..  place and date |

Ph./fax.…………………………………………………………………

REGON…………………………………………..NIP………………………………………………

www.………………………………………..e-mail………………………………………………

**O F F E R**

Referring to a Request for Proposal for **the review and update service of the international project proposal for the EU Framework Programme Horizon2020 WIDESPREAD-05-2020: Twinning,** we hereby offer the following service.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **No.** | **The subject matter** | **Net value** | | **VAT %** | | **Gross value** | |
| **1.** | **Review and update service of the international project proposal for the EU Framework Programme Horizon2020 WIDESPREAD-05-2020: Twinning** |  | |  | |  | |
| **Gross value in words:** | | | | | | | |
| **2.** | **Success fee for the EU Commission invitation for the Grant Agreement Preparation** | |  | |  | |  |
| **Gross value in words:** | | | | | | | |
| **3.** | **TOTAL GROSS VALUE**  **(item 1+2)** | |  | | | | |
| **Total gross value in words:** | | | | | | | |

**For values ​​indicated by the Contractor in a currency other than PLN, the Employer will adopt a conversion rate according to the average NBP exchange rate on the day of initiating these proceedings, and if the average exchange rate is not published on that day, the Employer will adopt the average exchange rate from the last table before initiating the procedure.**

1. I declare that I am bound by this offer for a period of 30 days.

2. I declare that the indicated in item 1. cost includes a full service of reviewing the proposal and preparation of opinions and recommendations, as well as delivering them to the Wroclaw Medical University.

Signatures of persons authorised to make

Date declarations of intent on behalf of the Contractor