#

# Tender Document Delivery/Collection Form

Laos-VNT-Regional Malaria-Mar-19-003

I hereby acknowledge receipt of the Tender Bid Documents for the Project:

**Project code: 433**

|  |  |
| --- | --- |
| Name of Company/Supplier |   |
| Name of official Company Representative |   |
| Signature |   |
| Date |   | Time:  |

This is to verify that the above mentioned company/supplier wishes to submit a bid for the project described and has received/collected all relevant bid documents:

HPA Staff:

(Name and signature)