

MAG SWA 01: Pricing Questionnaire:

Please complete the table below, with unit prices and other requested information.

* The costs of Visa, plane ticket, Accommodation are the responsibility of MAG, in countries where MAG has a team the consultant can be accommodated in the MAG residence.
* Specify the additional costs that will be applied to your services depending on the different countries of intervention

Please also complete the Declaration at the bottom of the page.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Country** | **Unit cost excluding tax for 1 day of service ( in USD)** | **Unit cost including tax for 1 day of service ( in USD )** | **Other additional costs payable by MAG ( in USD )** | **Comments** |
| **Burkina Faso** |  |  |  |  |
| **Nigeria** |  |  |  |  |
| **Chad** |  |  |  |  |
| **Togo** |  |  |  |  |
| **Benin** |  |  |  |  |
| **Ghana** |  |  |  |  |
| **Ivory Coast** |  |  |  |  |
| **Sierra Leone** |  |  |  |  |
| **Mauritania** |  |  |  |  |
| **Senegal** |  |  |  |  |

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| **Alternatives (please use another sheet if required)** |  |  |  |  |  |  |  |
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Declaration

I, the undersigned, warrant that the information provided in this form is correct, and in the event of changes details will be provided as soon as possible:

|  |  |
| --- | --- |
| Signature: |  |
| Name: (please print) |  |
| Organisation |  |
| Position: |  |
| Date: |  |