**Media Production Services EOI Response Form No.YEME22EOI.4**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Company / Organization’s competencies/ capacities** | | | |
|  | **List of WFP requirements/evaluation criteria** | **Yes** | **Comments** |
| 1 | Access to all areas of Yemen (South or North). | ☐ |  |
| 2 | Ability to hire and contract with individuals when it’s needed. | ☐ |  |
| 3 | Profile includes documentary, commercial or artistic work of videography, photography, and montage. | ☐ |  |

**Media Monitoring and Analysis Services** **EOI Response Form No. YEME22EOI.4**

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| --- | --- | --- | --- |
| 1. **Company / Organization’s competencies/ capacities** | | | |
|  | **List of WFP requirements/evaluation criteria** | **Yes** | **Comments** |
| 1 | Ability to provide 24/7 daily, weekly, and monthly reports. | ☐ |  |
| 2 | Flag news or trends about WFP, UN agencies, and Yemen in all majors like a humanitarian, political, economic, development, etc. | ☐ |  |
| 3 | Have monitoring and analysis tools and methods for modern and traditional media. | ☐ |  |
| 4 | Ability to provide quarterly, semi-annual and annual summary reports. | ☐ |  |

**Graphic Design Services** **EOI Response Form No. YEME22EOI.4**

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| --- | --- | --- | --- |
| 1. **Company / Organization’s competencies/ capacities** | | | |
|  | **List of WFP requirements/evaluation criteria** | **Yes** | **Comments** |
| 1 | Portfolio includes artistic, illustration, infographic, digital, motion, and any other type of graphic design. | ☐ |  |

**Printing Production Services EOI Response Form No.** **YEME22EOI.4**

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| --- | --- | --- | --- |
| 1. **Company / Organization’s competencies/ capacities** | | | |
|  | **List of WFP requirements/evaluation criteria** | **Yes** | **Comments** |
| 1 | At least two printing methods (Desktop, Digital, Offset, etc.) | ☐ |  |
| 2 | Delivery access to all WFP AOs and FOs. | ☐ |  |
| 3 | Ownership documents of the printing machines. | ☐ |  |
| 4 | Audit Financial statement of the company for the latest three years. | ☐ |  |

**Visibility and Promotional Items** **EOI Response Form No. YEME22EOI.4**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. **Company / Organization’s competencies/ capacities** | | | |
|  | **List of WFP requirements/evaluation criteria** | **Yes** | **Comments** |
| 1 | Delivery access to all WFP AOs and FOs. | ☐ |  |
| 2 | Ability to provide a variety of items with good quality and reasonable prices. | ☐ |  |
| 3 | Ability to print the WFP branding the items with different methods. | ☐ |  |

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| --- | --- | --- | --- | --- | --- | --- |
| 1. **Company / Organization’s Background Information** | | | | | | |
| 1 | Legal Name of Company/Organization: | | | | | |
| 2 | Full address: | | | | | |
| 3 | E-mail address: | | | Website address: | | |
| 4 | Telephone: | | | Fax: | | |
| 5 | Contact person, title: | | | Tel./E-mail of contact person: | | |
| 6 | Registration with UNGM | Yes  No | | UNGM No. | | |
| 7 | Type of Business | Corporate/Limited | | Partnership | | Other (specify) |
| 8 | Goods / Services: | | | | | |
| 9 | Company/Organization Business Registration Number: | | 6 | | Date of Registration: | |
| 10 | Additional company/organization background information: [If applicable, insert not more than 100 words] | | | | | |

**ANNEX 1. SUPPLIER INFORMATION FORM**.

**ANNEX 2. SUPPLIER FINANCIAL STATUS**

|  |  |
| --- | --- |
| 1. **Company / Organization’s Financial Status** | |
| **Item** | **Value USD** |
| Gross Turnover [Insert year] |  |
| Gross Turnover [Insert year] |  |
| Gross Turnover [Insert year] |  |
| *Maximum contract value in relation to which your Company can be engaged:* |  |
| USD 0 – 30,000 |  |
| USD 30,000 – 100,000 |  |
| USD 100,000 – 500,000 |  |
| above USD 500,000 |  |
| Maximum “Bank Guarantee” amount available to the Company/Organization |  |
| Last two years audited accounts or alternative assessed within WFP’s discretion are attached to prove the information stated above |  |

**ANNEX 3. SUPPLIER RELEVANT EXPERIENCE**

List at least 4 contracts in the last two years relevant to the supply of [Insert description of goods and/or services concerned].

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Company / Organization’s Financial Status** | | | | |
| **Commenced** | **Completed** | **Type of Contract** | **Total Value (USD)** | **Client** |
| **(Month / Year)** | **(Month / Year)** |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Provide CVs of senior staff (no more than three) [if applicable].

|  |  |
| --- | --- |
| 1. **Signatory** | |
| Name of Company/Organization: | |
| Name: | Title: |
| Signature: | Date: |

**Company/Organization Stamp**