

ANNEX VII: Price Schedule Form

Consultancy for CMR Action Plan

RFP No. UNFPA/LBN/Year/RER #

Item (examples)	Description	Number & Description of Staff by Level	Hourly Rate US\$	Hours to be Committed	Total US\$
1. Steps					
Desk Review					
Stakeholders meetings/ consultations					
Focus group discussions					
Data collection					
Data analysis					
Report writing					
Other					
TOTAL PROFESSIONAL FEES					
2. Estimated out-of-pocket expenses					
TOTAL OUT-OF-POCKET EXPENSES					
TOTAL FEES (Professional + out-of-pocket expenses)					

Signature of Bidder

Name and title
