

Annex VIII to Request for Proposals (RFP) N° PCD/09/007

Medical Insurance for WIPO Staff and Dependents

ACKNOWLEDGMENT FORM

Please check out the proper box (see below) and fax this acknowledgement form as soon as possible, to:

Mr. Jaime Sevilla  
Director, Procurement and Contracts Division  
World Intellectual Property Organization  
34, chemin des Colombettes  
1211 GENEVA 20, SWITZERLAND  
FAX: (+41-22) 338 82 10  
e-mail : [procurementLD@wipo.int](mailto:procurementLD@wipo.int)

INTENTION TO SUBMIT A PROPOSAL

We hereby acknowledge receipt of the subject tender. We have perused the documentation and advise that *we intend to* submit a proposal by the set deadline, **on or before May 25, 2009.**

*Our Contact Information for all future communication related to the subject RFP:*

Company Name: .....

Contact Person: .....

Mailing Address: .....  
.....  
.....

Telephone No: .....

Fax No: .....

E-mail Address: .....

Name and Title of Authorizing Officer: .....

Signature: ..... Date: .....

**HOW DID YOU LEARN ABOUT THIS RFP?** *Please select one of the options below.*

WIPO Procurement web site/notices     UNGM Procurement web site     Other (*please specify*)  
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