

Annex A – Similar experience table

Complete all fields. Attach copies of the three (3) corresponding contracts. Only these will be evaluated.

SN	Activity Description	Contract Amount in USD	Activity implemented location	Year of implementation	Name of the Organization worked and their contact email
1					
2					
3					

Declaration:

I hereby certify that the information provided in this annex is accurate, complete, and supported by the attached contract documents with BoQs and Annexes.

- Signature: _____
- Name: _____
- Title: _____
- Date: _____