**GSA/OP/15/19**

**"Complementary health insurance"**

**Annex I.I**

**Statement of Compliance**

The tenderer states full compliance to the all the technical requirements of the Tender Specifications and its Technical Annexes, except:

|  |  |  |
| --- | --- | --- |
| Document Title & Ref # | Level of compliance (partial or no compliance) | Commitment to indicated compliance level or justification in case of no compliance |
|  |  |  |
| (add more rows if necessary) |  |  |

**ATTENTION:** The tenderer must not list any partial or no compliance to the Minimum requirements in section 3.3.1 of the Tender Specifications and to the Annex II – Draft Framework Contract.

**Name of tenderer: …………………………………………..**

**Name of authorized representative: ………………….**

**Date: ……………………….**

**Signature: …………………….**

**END OF DOCUMENT**