

15064



Purchase Order

Dispatch via Print

Tanzania

6th Floor
International House
Shaaban Robert St./Garden Avenue
P.O.Box 9182
Dar es Salaam
Tanzania
Tel: 22 2112576
Fax: 22 21111668

Vendor: 0000007455
JOSE ANTONIO CABO BUJAN
17 MONTEPORREIRO
Caldas de Reis
Caldas de Reis PO 36650
Spain

PO Number TZA10-0000012445	Date 05/03/2013	Revision	Page 1
Payment Terms Immediate	Freight / INCOTERMS DES	Ship Via Common	
Buyer Severina Mwakiluma severina.mwakiluma@undp.org	Phone Tel: Fax:	Currency USD	
Approver Titus OSUNDINA			

Ship To: 6th Floor
International House
Shaaban Robert St./Garden Avenue
P.O.Box 9182
Dar es Salaam
Tanzania
Tel: 22 2112576
Fax: 22 21111668

Bill To: 6th Floor
International House
Shaaban Robert St./Garden Avenue
P.O.Box 9182
Dar es Salaam
Tanzania
Tel: 22 2112576
Fax: 22 21111668

Ln-Sch	Item	Description	Quantity	UOM	Due Date	Unit Price	Line Total
✓1-1	80161903E	Intl Consultants-10% upon signing of contract	1.00	EA	05/03/2013	500.00	500.00
2-1	80161903E	2nd installment 40% upon submission and approval of draft report >>Technical	1.00	EA	05/03/2013	2,000.00	2,000.00
3-1	80161903E	3rd installment 50% upon approval of report by both VPO and UNDP >>	1.00	EA	05/03/2013	2,500.00	2,500.00
1	80161903E	Cost of DSA	1.00	EA	05/03/2013	2,000.00	2,000.00
✓3-1	80161903E	Transport costs	1.00	EA	05/03/2013	2,050.00	2,050.00

Reference Number IC No. 007/2013

Total PO Amount USD 9,050.00

This PO is subject to UNDP General terms and conditions.

Authorized Signature

This Purchase Order is Electronically Approved by Titus OSUNDINA and does not require Signature.



Certification of Payment

1. For Personnel use only

Name: Jose Antonio Cabo Bujan Contract No.: 007/2013
 Project Number: 00073448 Fee: (per diem)
 Project Title: Africa Adaptation Programme. Duration: 25 days
 Starting Date: 25/02/2013 Expiry date: 18/03/2013 Expected number of work days per week: 7
 Nationality: Spanish Vendor No.: 7455
 Allotment Number(s): Index no.:
 MOD Number(s):

2. To be completed by the subscriber

Please type or print and mail original and first and second copies, along with your travel claim upon completion of travel, to: United Nations Development Programme, One United Nations Plaza, New York, NY 10017.

Attention: (Finance Officer)

Room No.:

I certify that the dates indicated below are an accurate account of the services and duties performed under the terms of this contract.

Countries visited	Dates worked		No. of days worked	Total Payable
	From	To		
Tanzania	25/02/2013	18/03/2013	25 days	

Please note that payment will be made in the currency of the subscriber's usual residence, unless otherwise indicated in Article 3 of the Special Service Agreement, or paragraph 2 of the Reimbursable Loan Agreement. Payments in other than US dollars will be made at the UN operational rate of exchange in effect at the time payment is made. Bank charges related to payment will be borne by the subscriber.

Please make payment as indicated below:

Name of Bank: NOVA GALICIA BANCO

Account title:

Address:

Account number:

Currency of Account: USD

Social Security or Tax Identification No.: (if applicable)

Signature: _____

Date:

3. To be completed by Area/Requesting Officer

Please check appropriate box

Final report accepted

Assessment sheet attached:

Final report not accepted

Second Assessment to be added:

I certify that the work was satisfactorily performed during the above mentioned dates.

Signature: [Signature]
 Name:

Date: 5/3/2013

4. To be completed by the Certifying Officer

Please process the payment of

to the subscriber in accordance with the payment instructions given above.

Travel Claim received

Certifying Officer

Certifying Bureau/Division

Date

PO# 12445

Requisition



Ship To: 6th Floor
International House
Shaaban Robert St./Garden Avenue
P.O.Box 9182
Dar es Salaam
Tanzania

Business Unit: TZA10		
REQ Number	Date	Page
0000010693	01/03/2013	1
Requester		
Gemma ALITI		
Tel:		
Fax:		
gemma.aliti@undp.org		
Approver		

Line-Schd	Item	Description	Quantity	UOM	Due Date	Unit Price	Line Total
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1-1	80161903E	E) Intl Consultants-Technical	1.0000	EA	01/03/13	500.00	500.00
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Acc No	OU	GL Unit	Fund	Dept	Imp Agent	Donor	Project	Activity	Res Type	Percent	Amount
71205	TZA	UNDP1	04000	38205	001459	00012	00073448	ACTIVITY1		100	500.00

Buyer: Fina Masaro
<< 10% upon signing of contract >>

Line Total: 500.00

2-1	80161903E	E) Intl Consultants-Technical	1.0000	EA	01/03/13	2,000.00	2,000.00
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Acc No	OU	GL Unit	Fund	Dept	Imp Agent	Donor	Project	Activity	Res Type	Percent	Amount
71205	TZA	UNDP1	04000	38205	001459	00012	00073448	ACTIVITY1		100	2,000.00

Buyer: Fina Masaro
<< 2nd installment 40% upon submission and approval of draft report >>

Line Total: 2,000.00

3-1	80161903E	E) Intl Consultants-Technical	1.0000	EA	01/03/13	2,500.00	2,500.00
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Acc No	OU	GL Unit	Fund	Dept	Imp Agent	Donor	Project	Activity	Res Type	Percent	Amount
71205	TZA	UNDP1	04000	38205	001459	00012	00073448	ACTIVITY1		100	2,500.00

Buyer: Fina Masaro
<< 3rd installment 50% upon approval of report by both VPO and UNDP >>

Line Total: 2,500.00

4-1	80161903E	E) Intl Consultants-Technical	1.0000	EA	01/03/13	2,000.00	2,000.00
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Requisition

Ship To: 6th Floor
International House
Shaaban Robert St./Garden Avenue
P.O.Box 9182
Dar es Salaam
Tanzania

Business Unit:	TZA10	
REQ Number	Date	Page
0000010693	01/03/2013	3
Requester	Gemma ALITI	
Tel:		
Fax:	gemma.aliti@undp.org	
Approver		

Line-Schd	Item	Description	Quantity	UOM	Due Date	Unit Price	Line Total
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This order is subject to UN General Terms and Conditions available at WWW.UNDP.ORG, which can also be provided upon request.

Approval Signature
approved Gemma

4th March 2013

Confirmation

Requested For: Gemma ALITI
Requisition Name: CABO BUJAN, JOSE ANTONIO
Requisition ID: 0000010693
Business Unit: TZA10
Priority: Medium
Budget Status: Not Checked


Number of Lines: 5
Total Amount: 9,050.00

UNDP Approval

▽ CABO BUJAN, JOSE ANTONIO: Pending

UNDP Approval

Pending

 Multiple Approvers
UNDP Approval

approved Juan
1/03/2013

UNDP. 71200. TZA. 04000. 88205. TZA10. 00073448. ACT1
001459. 00012

1/03/2013

Maria



- This is a consultant for
AAP - 73448
- Please assist Severina on
the LOA. The Gloria.

Programa de las Naciones Unidas para el Desarrollo
www.undp.org/spanish

UNITED NATIONS DEVELOPMENT PROGRAMME



No. 007/2013

Contract for the Services of an Individual Contractor END OF PROJECT EVALUATION OF THE AFRICA ADAPTATION PROGRAMME IN TANZANIA

This Contract is entered into on 20th February 2013 between the United Nations Development Programme (hereinafter referred to as "UNDP") and Mr. Cabo Bujan, Jose Antonio (hereinafter referred to as "the Individual Contractor") whose address is:

Cabo Bujan, Jose Antonio,
17, Monteporreiro, 36650 Caldas de Reis,
Spain.
Email: antonio.cabo@yahoo.es
Phone No. +34986540123/+9779840059151

WHEREAS UNDP desires to engage the services of the Individual Contractor on the terms and conditions hereinafter set forth, and:

WHEREAS the Individual Contractor is ready and willing to accept this Contract with UNDP on the said terms and conditions,

NOW, THEREFORE, the Parties hereby agree as follows:

1. Nature of services

The Individual Contractor shall perform the services as described in the Terms of References which form an integral part of this Contract and are attached hereto as Annex I in the following Duty Station(s): Dar-Es-Salaam.

2. Duration

This Individual Contract shall commence on 22nd February 2013, and shall expire upon satisfactory completion of the services described in the Terms of Reference mentioned above, but not later than 18th March 2013, (including travel days) unless sooner terminated in accordance with the terms of this Contract. This Contract is subject to the General Conditions of Contract for Individual contractors which are available on UNDP website at www.undp.org/procurement and are attached hereto as Annex II.

3. Consideration

As full consideration for the services performed by the Individual Contractor under the terms of this contract, including, unless otherwise specified, his/her travel to and from the duty station(s), any other travel required in the fulfillment of the Terms of Reference in Annex I, and living expenses in the Duty Station(s), UNDP shall pay the Individual Contractor a total of US\$ 9,050.00 in accordance with the table set forth below. Payments shall be made upon certification by Government/Ministry of Finance and UNDP that the services related to each deliverable, as described below, have been satisfactorily performed and the Deliverables have been achieved by or before the due dates specified below, if any.

DELIVERABLE	AMOUNT IN US\$
10% Upon signing of contract (22 nd Feb 2013)	500
40% upon submission and Approval of the Draft Report (11 th March 2013)	2000
50% after approval of final report by both VPO and UNDP (18 th March 2013)	2,500
DSA (22 nd Feb 2013)	2,000
Transport Costs (22 nd Feb 2013)	2,050
Total Amount for 25 days	9,050

If unforeseen travel outside the Duty Station not required by the Terms of Reference is requested by UNDP, and upon prior written agreement, such travel shall be at UNDP's expense and the Individual Contractor shall receive a *per diem* not to exceed United Nations daily subsistence allowance rate in such other location(s).

Where two currencies are involved, the rate of exchange shall be the official rate applied by the United Nations on the day the UNDP instructs its bank to effect the payment(s).

4. Rights and Obligations of the Individual contractor

The rights and obligations of the Individual Contractor are strictly limited to the terms and conditions of this Contract, including its Annexes. Accordingly, the Individual Contractor shall not be entitled to any benefit, payment, subsidy, compensation or entitlement, except as expressly provided in this Contract. The Individual Contractor shall be solely liable for claims by third parties arising from the Individual Contractor's own acts or omissions in the course of performing this Contract, and under no circumstances shall UNDP be held liable for such claims by third parties.

5. Beneficiary

The Individual Contractor selects PRESSIA ARIFIN as beneficiary of any amounts owed under this Contract in the event of death of the Individual Contractor while performing services hereunder. This includes the payment of any service-incurred liability insurance attributable to the performance of the services for UNDP.

Mailing address, email address and phone number of beneficiary:

17, Monteporreiro, 36650 Caldas de Reis, Spain. Email: antonio.cabo@yahoo.es Phone No. +34986540123/+9779840059151

arifincabo@gmail.com

Mailing address, email address and phone number of emergency contact (if different from beneficiary): N/A

IN WITNESS WHEREOF, the Parties hereto have executed this Contract.


By signing below, I, the Individual Contractor, acknowledge and agree that I have read and accept the terms of this Contract, including the General Conditions of Contracts for Individual contractors available on UNDP website at www.undp.org/procurement and attached hereto in Annex II which form an integral part of this Contract, and that I have read and understood, and agree to abide by the standards of conduct set forth in the Secretary-General's bulletins ST/SGB/2003/13 of 9 October 2003, entitled "Special Measures for Protection from Sexual Exploitation and Sexual Abuse" and ST/SGB/2002/9 of 18 June 2002, entitled "Regulations Governing the Status, Basic Rights and Duties of Officials other than Secretariat Officials, and Experts on Mission".

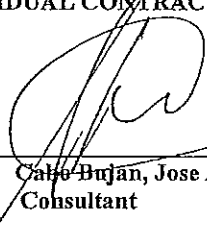
The Individual Contractor has submitted a Statement of Good Health and confirmation of immunization.

AUTHORIZING OFFICER:

INDIVIDUAL CONTRACTOR:

United Nations Development Programme (UNDP)


Mr. Titus Osundina
Deputy Country Director (O)


Calle Duján, Jose Antonio,
Consultant

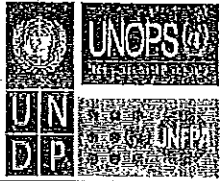
Date: 20/02/13

Date: 25/02/2013



JACB

7450



Vendor /Person Profile Update

SECTION 1 (For Internal Use only)		UN INFORMATION	
Requesting Person:	Date:	Atlas Vendor No:	
First Name/Last Name/Extension:		UN Index No:	
VENDOR TYPE: <input type="checkbox"/> STAFF <input type="checkbox"/> SSA <input type="checkbox"/> SERVICE CONTRACT <input type="checkbox"/> MEETING PARTICIPANT <input type="checkbox"/> NGO <input type="checkbox"/> SUPPLIER <input type="checkbox"/> OTHER			
VENDOR APPROVER SIGNATURE:		DATE:	

Complete either Section 2 or Section 3 (not both)

SECTION 2 PERSON INFORMATION (For Individuals only)			
Last Name Middle Name	CABO BUJAN	First Name	JOSE ANTONIO
Nationally	SPANISH	Sex: Male <input checked="" type="checkbox"/>	Female <input type="checkbox"/>
Address 17, MONTEPORREIRO			
City	CALDAS DE REIS	State/Province/County	PONTEVEDRA
		Postal Code (ZIP)	36650
		Country	SPAIN
E-mail Address	antonio.cabo@yahoo.es	Telephone Number	+34 697 702 193
		Fax Number	

SECTION 3 SUPPLIER INFORMATION (For Companies only)			
Company Name:	Parent Company Name (if applicable)	Web Site URL: (if applicable)	
Street Address			
City	State/Province/County	Postal Code	Country
Contact Person (MAIN ADDRESS):	Telephone	Fax	E-mail Address
Name:			
Title:			

SECTION 4 BENEFICIARY BANKING INFORMATION			
Bank Name NOVA GALICIA BANCO			
Bank ID:	For US banks only use whether: (9 digits)	SWIFT code 8 or 11 characters (required for overboard payments)	
	ACH <input type="checkbox"/>	<input type="checkbox"/> Fed wire	CAGLESMMXXX
Branch ID: (for Canadian Banks only) 9 digits routing no.	Branch Name: CALDAS DE REIS		
Street Address: 2, RUA JOSE SALGADO			
City	State/Province	Postal Code	Country
CALDAS DE REIS		36650	SPAIN

SECTION 5 BENEFICIARY BANK ACCOUNT DETAILS			
Account Name: (name as it appears on bank account)		Bank Account Currency	
20805019 JOSE ANTONIO CABO BUJAN		<input type="checkbox"/> US\$ <input checked="" type="checkbox"/> Other (PLEASE INDICATE) EURO	
Bank Account No.:	(ENTER WITH NO PUNCTUATION, NO DOTS, DASHES OR SPACES)	Account Type:	<input type="checkbox"/> Checking <input type="checkbox"/> Savings
20805019453000158706			
IBAN (European Banks) ES 6320805019453000158706			
Transit Code (5 digit) Canadian Banks	Sort Code (6 digits) UK Banks	BSB code (6 digit) Australia Banks	

Bank Information for Intermediary/Correspondent Bank (if applicable)		
Name of Bank:	Address of Bank:	
Bank Account No (of beneficiary bank with intermediary bank)	SWIFT Code:	FED WIRE No. (US BANKS ONLY)

I, JACB, in my capacity as INDIVIDUAL CONSULTANT hereby authorize the agency to direct payments for goods and services to the above account.

Signature: 