

**TRUST FUND FOR SPECIALISED MEDICAL CARE**  
**Expression of Interest**  
**Services of Barrister at Law and Attorney at Law**

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1. **Service Providers**.....

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**Date of Expression of Interest** .....

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2. **National Identity No** | | | | | | | | | | | | | | | | | | | | | |

Title   Mr    Mrs    Miss

**Name** : .....

3. **Office Address** : .....

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**Phone No. : Office** .....

**Email address:**.....

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4. **Professional Qualifications**

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5. **Relevant Experience and Expertise**

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**6. Candidates are requested to submit their quotes for each item:**

**A. Barristers**

- Per legal opinion - Rs ..... excluding VAT
- Appearance
  - i) District Court (per case) - Rs ..... excluding VAT
  - ii) Intermediate Court (per case) - Rs ..... excluding VAT
  - iii) Supreme Court (per case) - Rs ..... excluding VAT
  - iv) Legal Opinion/Counselling (EOC, IRP and other related authorities) - Rs ..... excluding VAT
  - v) Legal Advice (general) - Rs ..... excluding VAT
  - vi) Disciplinary Matters - Rs ..... excluding VAT

**B. Attorneys**

- i) District Court (per case) - Rs ..... excluding VAT
- ii) Intermediate Court (per case) - Rs ..... excluding VAT
- iii) Supreme Court (per case) - Rs ..... excluding VAT

**DECLARATION**

I, ....., the undersigned applicant declare that the particulars in this application are true and that I have not willfully suppressed any material fact.

**Date:**.....

**Signature:**.....