


**Consultant/Vendor Name:    Jean-Luc Simon**

**Part I: To be completed by the vendor/consultant.**

<b>To: UNICEF</b>	Date: Friday, 3 May 2013
Name:           Jean-Luc Simon	
Address: 45, rue Riquet, A 664, 75019 Paris	
<b>Payment details:</b>	
Payment requested for services provided to the <u>      <b>Disability</b>      </u> Section, UNICEF.	
Detail of works being billed as per below deliverables.	
1. Co moderated the online discussion in <u>  French  </u> for the High - level Meeting on Disability and Development to be held in September 2013 between 8 <sup>th</sup> of March and 5 <sup>th</sup> of April on <a href="http://www.worldwewant.org">www.worldwewant.org</a> .	
2. Compiled and uploaded the contents of post from contributors on the public domain every week.	
3. Prepared a final report in English summarising the contributions of the entire online consultations in <u>  French  </u> and submitted it to the global moderator no later than 15th of April, 2013.	
(Continue if applicable.)	
Period or phases covered: From: <b>8<sup>th</sup> of March</b> To: <b>15<sup>th</sup> of April</b>	
Total Amount: <span style="display:inline-block; width:20px; height:15px; background-color:orange; vertical-align: middle;"></span>	Currency: <b>USD</b>
Signature of the Vendor/Consultant:	

**Part II: For UNICEF use, please do not write below.**

Date Invoice Received	Vendor #	Invoice Amount (US\$)	Submitted by
			(Name/ Ext. #)
<b>PO/FC/WBS</b>			
	<b>Name (Pls. print)</b>	<b>Signature</b>	<b>Date</b>
<b>Goods/Services Received (Certifying Officer)</b>			
<b>Payment Approved (Approving Officer)</b>			