

**Proforma - 11**

(On the letterhead of the Agency duly stamped and signed)

**RFP No:**

**List of Clients lost during last 5 years**

<b>SN</b>	<b>Name of Client</b>	<b>Year in which lost (in chronological order)</b>	<b>Reason for losing client</b>
1			
2			
3			
4			
5			

Signature of Authorized person:

Signed at \_\_\_\_\_ dated \_\_\_\_\_ by \_\_\_\_\_

Designation \_\_\_\_\_ for \_\_\_\_\_ Agency

Seal of Agency