

**Reference** FOI/2019/489

Number:

From: Private Individual

Date: 03 December 2019

**Subject:** Master vendor

Q1 Do you have a master vendor arrangement in place?

A1 No

Q2 If yes who is your current Master Vendor Provider?

A2 Information not held – not applicable as above

Q3 What fill rates are achieved with your Master Vendor Provider?

A3 Information not held – not applicable as above

Q4 Are you charged a fee for the service and if so what is the cost?

A4 Information not held – not applicable as above

Q5 What is the expiry date for your current contract?

A5 Information not held – not applicable as above