Section II – Cost Proposal

Tab I – Title Page

Part II – Cost Proposal	
RFQ Title:	***Federal Grant Development and Management***
RFQ:	***3435***
Vendor Name:	***Gary Bess Associates, Inc.***
Address:	***6931 Skyway, Paradise, CA 95969***
Opening Date:	May 18, 2017
Opening Time:	2:00 PM

Tab II – Cost Proposal

RFQ 3435
FEDERAL GRANT DEVELOPMENT AND MANAGEMENT

Vendor:
Gary Bess Associates, Inc.

Services Provided	**Hourly Rate**
GRANT CONSULTING	*$125*
RESEARCH	*$75*
APPLICATION DEVELOPMENT AND WRITING	*$125*
TRAINING	*$125*
OTHER ON GOING EXPENSES	
GIS Mapping + Data Analytics	*$125*
TRAVEL EXPENSES – PLEASE DETAIL	
Mileage: $0.50/mile x 382 mile round trip	*$191*
Hotel: $125/night	*$125*
Per Diem: $51/day x 2 days	*$102*
Total:	***$418***

ATTACHMENT I – COST PROPOSAL CERTIFICATION OF COMPLIANCE WITH TERMS AND CONDITIONS OF RFQ

I have read, understand and agree to comply with ***all*** the terms and conditions specified in this Request for Qualifications.

YES ✓ I agree to comply with the terms and conditions specified in this RFQ.

NO _____ I do not agree to comply with the terms and conditions specified in this RFQ.

If the exception and/or assumption require a change in the terms in any section of the RFQ, the contract, or any incorporated documents, vendors ***must*** provide the specific language that is being proposed in the tables below. If vendors do not specify in detail any exceptions and/or assumptions at time of proposal submission, the State will not consider any additional exceptions and/or assumptions during negotiations. ***Note: Only cost exceptions and/or assumptions should be identified on this attachment. Do not restate the technical exceptions and/or assumptions on this attachment.***

Gary Bess Associates
Company Name

Signature

GARY BESS
Print Name

5-11-17
Date

Vendors MUST use the following format. Attach additional sheets if necessary.

EXCEPTION SUMMARY FORM

EXCEPTION #	RFQ SECTION NUMBER	RFQ PAGE NUMBER	EXCEPTION (Complete detail regarding exceptions must be identified)

ASSUMPTION SUMMARY FORM

ASSUMPTION #	RFQ SECTION NUMBER	RFQ PAGE NUMBER	ASSUMPTION (Complete detail regarding assumptions must be identified)

This document must be submitted in Tab III of vendor's cost proposal.
This form MUST NOT be included in the technical proposal.