

ATTACHMENT 9 – COST PROPOSAL

Proposers interested in responding to this RFP must submit this completed form. All costs, fees, etc. that will apply if awarded should be stated on this form. Indicate on the form if a continuation sheet is attached to address any component.

Please provide cost per visit per location.

<i>Location</i>	<i>Cost per visit</i>	
	<i>Yellow areas</i>	<i>Blue areas</i>
939 W. Main St., El Centro, CA 92243		
220 Main St., Brawley, CA 92227		

Other costs.

Hourly cost for services upon request that are outside of scheduled visits.

\$ _____ per hour.

Certification.

I, the official named below, CERTIFY UNDER PENALTY OF PERJURY, that I am duly authorized to legally bind the proposer. This certification is made under the laws of the State of California.

<i>Company Name (Printed)</i>	<i>Federal ID Number</i>
<i>By (Authorized Signature)</i>	
<i>Printed Name and Title of Person Signing</i>	
<i>Date Executed</i>	<i>Executed in the County of _____ in the State of _____</i>