

**Cost Proposal**  
**Children and Family Services Forensic Accountant**  
**Request for Proposal Number 114352 O3**

**Bidder Name:** \_\_\_\_\_

**Bidders must complete this form and submit with their Request for Proposal response.**

**Bidder shall bid the cost for each year of the initial term, and all renewal options.**

<b>Initial One Year Term</b>		
<b>Description</b>	<b>Unit of Measure</b>	<b>Bid Rate in Dollars</b>
Fee for services per each Adult Protective Service case analysis with exception of court appearances.	Each	\$
Hourly Rate (all-inclusive of travel) for providing testimony in court appearances.	Hourly rate	\$

<b>Optional Renewal, Year Two</b>		
<b>Description</b>	<b>Unit of Measure</b>	<b>Bid Rate in Dollars</b>
Fee for services per each Adult Protective Service case analysis with exception of court appearances.	Each	\$
Hourly Rate (all-inclusive of travel) for providing testimony in court appearances.	Hourly Rate	\$