

Bidder Name: Armored Knights, Inc.

All expenses associated with the Courier Services must be bid as all-inclusive, including service fees, salaries, wages, prevailing wages, payroll taxes, benefits, materials, equipment, tools, parts, supplies, preventative and remedial maintenance contracts, insurance, and damage deposits. No additional costs shall be billed. Respondent may provide a response to all of Group A, Group B, or both. Preference may be given to respondent(s) who can provide services to more than one (1) option.

Bidders must provide cost per the unit of measure outlined below. Bidders shall not make any budgeting assumptions based on any estimated values. 21.7/mo

WORK PLAN - GROUP A (MAIL COURIER SERVICES)	UNIT OF MEASURE	Initial contract term		Renewal 1			Renewal 2		
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6		
LINCOLN FACILITIES	MONTH	9,500	9,500	9,900	10,296	10,708	11,136		
OMAHA FACILITIES	MONTH	500	500	520	541	563	585		
YORK FACILITY	MONTH	5,200	5,200	5,408	5,624	5,849	6,083		
TECUMSEH FACILITY	MONTH	5,200	5,200	5,408	5,624	5,849	6,083		

WORK PLAN - GROUP B (1X WEEK MEDICAL COURIER SERVICES)	UNIT OF MEASURE	Initial contract term		Renewal 1			Renewal 2		
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6		
DNA SAMPLES	MONTH	2,500	2,500	2,600	2,704	2,812	2,925		

WORK PLAN - GROUP B (DAILY MEDICAL COURIER SERVICES)	UNIT OF MEASURE	Initial contract term		Renewal 1			Renewal 2		
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6		
PHARMACY MEDICATION BOX DELIVERY - LINCOLN FACILITIES	MONTH	6,500	6,500	6,750	7,020	7,300	7,592		
PHARMACY MEDICATION BOX DELIVERY - OMAHA FACILITIES	MONTH	6,500	6,500	6,750	7,020	7,300	7,592		
PHARMACY MEDICATION BOX DELIVERY - YORK FACILITY	MONTH	7,800	7,800	8,112	8,436	8,773	9,124		
PHARMACY MEDICATION BOX DELIVERY - TECUMSEH FACILITY	MONTH	7,800	7,800	8,112	8,436	8,773	9,124		

Cost Proposal
RFP 116683 O3, Courier Services

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WORK PLAN - GROUP B (MEDICAL COURIER SERVICES)	UNIT OF MEASURE	Initial contract term		Renewal 1			Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	
ON DEMAND - LINCOLN LOCATIONS	PER TRIP	225	225	243	253	263	273	
ON DEMAND - OMAHA LOCATIONS	PER TRIP	85	85	92	97	100	104	
ON DEMAND - YORK FACILITY	PER TRIP	285	285	305	317	330	343	
ON DEMAND - TECUMSEH FACILITY	PER TRIP	285	285	305	317	330	343	

WORK PLAN - GROUP B (MEDICAL COURIER SERVICES)	UNIT OF MEASURE	Initial contract term		Renewal 1			Renewal 2	
		Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	
EMERGENCY PICK UP or AFTER HOURS LINCOLN LOCATIONS	PER TRIP	225	225	243	253	263	273	
EMERGENCY PICK UP or AFTER HOURS OMAHA LOCATIONS	PER TRIP	85	85	92	96	100	104	
EMERGENCY PICK UP or AFTER HOURS YORK LOCATION	PER TRIP	285	285	305	317	330	343	
EMERGENCY PICK UP or AFTER HOURS TECUMSEH LOCATION	PER TRIP	285	285	305	317	330	343	