

**Cost Proposal**  
**Request for Proposal Number 5943 Z1**  
**Trauma System Medical Director and Designation Reviews**

The bidder will provide a flat yearly fee for services provided. Fees will be paid quarterly. Quarterly fees are inclusive of all travel expenses.

<b>Trauma System Medical Director</b>						
<b>Not to exceed \$8,000 per year</b>						
<b>Paid in quarterly installments</b>						
Initial Award			Optional Renewal 1		Optional Renewal 2	
Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
\$1	\$1	\$1	\$1	\$1	\$1	\$1

<b>Trauma System Designation Reviews</b>						
<b>Not to exceed \$10,075 per year @ \$775 per designation review.</b>						
<b>Paid in quarterly installments</b>						
Initial Award			Optional Renewal 1		Optional Renewal 2	
Year 1	Year 2	Year 3	Year 4	Year 5	Year 6	Year 7
\$1	\$1	\$1	\$1	\$1	\$1	\$1

BIDDER NAME: LISA LYNN SCHLITZKUS