Request for Proposals/Information (RFPs and RFIs)

PART III - List of Doucments, Exhibits, and Other Attachments

Attachment 9A - Breakdown of Proposed Estimated Cost (Plus Fee) and Labor Hours Form

RFP Number: _____

Organization:_____

Date _____

Breakdown of Proposed Estimated Cost (Plus Fee) and Labor Hours

COST ELEMENT		Year 1	Year 2	Year 3	Year 4	Year 5	Total
DIRECT LABOR:	Rate						
Labor Category (Title and Name - use additional pages as necessary)		Hours Amt	Hours Amt	Hours Amt	Hours Amt	Hours Amt	Hours Amt
_____	$_____						
_____	$_____						
_____	$_____						
_____	$_____						
_____	$_____						
Direct Labor Cost:		$_____	$_____	$_____	$_____	$_____	$_____
Material Cost:		$_____	$_____	$_____	$_____	$_____	$_____
Travel Cost:		$_____	$_____	$_____	$_____	$_____	$_____
Subcontracts (Specify):		$_____	$_____	$_____	$_____	$_____	$_____
Other (Specify):		$_____	$_____	$_____	$_____	$_____	$_____
Ancillary Studies (Specify):		$_____	$_____	$_____	$_____	$_____	$_____
Total Direct Cost:		$_____	$_____	$_____	$_____	$_____	$_____
Fringe Benefit Cost: (if applicable) __% of Direct Labor Cost		$_____	$_____	$_____	$_____	$_____	$_____
Indirect Cost: __% of Direct Labor Cost		$_____	$_____	$_____	$_____	$_____	$_____
Total Cost:		$_____	$_____	$_____	$_____	$_____	$_____
Fee (if applicable) __% of Total Est. Cost		$_____	$_____	$_____	$_____	$_____	$_____

GRAND TOTAL ESTIMATED COST (PLUS FIXED FEE)	$_____	$_____	$_____	$_____	$_____	$_____