

ATTACHMENT "A"  
**PRICING SCHEDULE BID SHEET**  
SDS FMS

Company Name: \_\_\_\_\_ Contact: \_\_\_\_\_  
Address: \_\_\_\_\_ Telephone: \_\_\_\_\_  
\_\_\_\_\_ Fax: \_\_\_\_\_  
FEI# \_\_\_\_\_ E-mail: \_\_\_\_\_

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Submit a firm fixed price for the services detailed in this RFP expressed as per Member/Employer amount (i.e. \$X per Member/Employer). The per Member/Employer amount will be used to calculate the monthly amount paid to the Contractor for the services detailed in this RFP (i.e. \$X per Member/Employer multiplied by the # of Member/Employers enrolled during a specific month = the amount paid to the Contractor).

Per Member/Employer Rate: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_