ATTACHMENT C COST PROPOSAL RFP# 17846

Prices must be provided for every survey type and survey year in Section A: Annual Survey Deliverables and Section B: Expanded Survey Deliverables (page 1 and 2). Bids that do not include pricing for every survey type and survey year in Sections A and B will be disqualified.

Bidders must propose all-inclusive unit pricing for each survey type and each survey year. Refer to Section 4.0 Scope of Work and Section 5.4 Payment.

1. SECTION A: Annual Survey Deliverables:

Enter the price per survey type for a completed interview in the Unit Price columns for each survey year.

Survey Type*	Estimated Units**	2019 Unit Price	2020 Unit Price	2022 Unit Price	2023 Unit Price
Annual Landline	3000				
Annual Cellphone	5300				
Annual Asthma Call Back – Landline	300				
Annual Asthma Call Back - Cellphone	600				

2. SECTION B: Expanded Survey Deliverables:

Enter the price per survey type for a completed interview in the Unit Price column.

Survey Type*	Estimated Units**	2021 Unit Price
Expanded Landline	12000	
Expanded Cellphone	15000	
Expanded Asthma Call Back – Landline	2000	
Expanded Asthma Call Back - Cellphone	1200	

^{*} When Annual BRFSS is conducted, Section A pricing **only** will be utilized. When the Expanded BRFSS is conducted, Section B pricing **only** will be utilized.

**Estimated units; actual number of units may be higher or lower and the contractor will be responsible for performing the actual number of units required. Actual units will be determined prior to the start of data collection for each survey year. There is no guarantee of actual quantities. NYSDOH payment will be based on actual completed surveys per Section 5.4 payments.

By signing this Cost Proposal Form, bidder agrees that the prices above are binding for 365 days from the proposal due date.

Bidder's Authorized Signature	Date
Print Name and Title	