

710-21-0018 Comprehensive Substance Abuse Treatment Services

**BEST AND FINAL OFFER (BAFO)**  
**for CATCHMENT AREA FIVE (5)**

|  |                 |
|--|-----------------|
| <b>Catchment Area:</b>   | <b>Five (5)</b> |
| <b>Proposed Annual Price for All Services in Catchment Area 5:</b> | <b>\$</b>       |

**The State is specifically requesting terms from your original proposal be extended.**

Please be sure to select the 'Confirm' box on this form to extend the terms set out in your original technical proposal submission to include service provision in Catchment Area Five (5).

**Confirm**

**NOTE:** By signature of this form and submission of a cost in response to this request, the respondent acknowledges that this submission is all-inclusive, true, and accurate. Also, by signature below, vendor agrees to and shall fully comply with all terms and compliances agreed to in responses submitted.

|                         |  |               |  |
|-------------------------|--|---------------|--|
| <b>Vendor Name:</b>     |  | <b>Date:</b>  |  |
| <b>Print/Type Name:</b> |  | <b>Title:</b> |  |

**Authorized Signature:**