

## OFFICIAL BID PRICE SHEET

Check nursing discipline for which you are bidding.

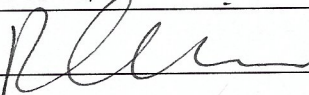
- ☐ LPN/LPTN only  
☐ CNA only  
☒ LPN/LPTN and CNA

Respondent proposes to do the work described in the "Scope of Work" of this IFB at the following proposed rate during the anticipated contract period:

Nursing Discipline	Estimated Monthly Hours	Hourly Rate	Total (Est. Annual Hours X's Hourly rate)
Licensed Practical Nurse (LPN) or (LPTN)	3,601	\$ 35.00	\$ 126,035.00
Certified Nurse Assistant (CNA)	3,967	\$ 21.50	\$ 85,290.50
GRAND TOTAL			\$211,325.50

### AUTHORIZATION SIGNATURE

By my signature below, I certify that the aforementioned statements are true and correct and that I accept the Terms and Conditions as presented in this bid, and that I am authorized by the respondent to submit this bid on his/her behalf.

<b>Vendor Name:</b> MedLinc, Inc.	<b>Date:</b> 04/30/2020
<b>Signature:</b> 	<b>Title:</b> Director of Operations
<b>Printed Name:</b> Rebecca Lincoln	