

OFFICIAL BID PRICE SHEET

710-25-039 Neurology Services

All costs must be included in the unit price. Costs not included in the unit price below are not billable under a contract established from this solicitation. Bidder must submit a printed copy of the completed official bid price sheet with bid submission.

Quantities are estimated for bidding purposes only. Quantities may increase or decrease.

Instructions:

ITEM	DESCRIPTION	ESTIMATED MONTHLY HOURS	UNIT PRICE	EXTENDED AMOUNT
1	Neurology Services - CHOC	24	\$300.00/ H	

AUTHORIZED SIGNATURE:

By my signature below, I certify that I am authorized by the respondent to submit this bid on his/her behalf.

Wilson Neurology PLLC

Date: 1/26/25

Signature:  President

Elaine J. Wilson MD