

QSP 2024-5805; Copy and Print Paper Supplier

Attachment B: Contractor's Fee Submission Form

The fees shall be a firm fixed price inclusive of all elements required to deliver the services, including but not limited to: employee costs and benefits, clerical support, supplies, materials, licensing, insurance, travel, fuel surcharges, franchise fees, etc. Please note that such cost is inclusive of all elements required to provide these services as specified herein and each fee proposed shall be fully "burdened" with profit and overhead costs.

Proposed Fees Rate: The contractor may provide fees for one, or any combination of the following:

COPY PAPER	Firm, Fixed Price/ream	Firm, Fixed Price/case	Brand
8.5 X 11 White	THEC/Team	T Tree/ease	
	\$	\$	
Copy Paper			
8.5 X 14 White	\$	\$	
Copy Paper	Φ	Φ	
11 X 17 White	\$	¢	
Copy Paper	5	\$	

OTHER PAPER	Firm, Fixed Price/ream	Firm, Fixed Price/case	Brand
3-hole drilled 8.5 X 11 copy paper	\$	\$	
8.5 X 11 colored paper	\$	\$	
8.5 x 11 60lb text stock	\$	\$	
8.5 x 11 80lb text stock	\$	\$	
8.5 x 11 100lb index stock	\$	\$	

MISCELLANEOUS	Unit of Measure (box, pack, etc.)	Firm, Fixed Price
9 x 12 laminates		\$
12 x 18 laminates		\$
9 x 12 blank envelopes		\$

Notes and Exclusions:



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DISCOUNT OFFERED FOR EARLY PAYMENT:	% if invoice paid within	
days of properly submitted invoice as stated in the QSP.		

PROPOSER'S STATEMENT

The undersigned proposer hereby states that by completing and submitting this Form and all other documents within this submittal, he/she is verifying that all information provided herein is, to the best of his/her knowledge, true and accurate, and that if the Authority discovers that any information entered herein to be false, such shall entitle the Authority to not consider or make award or to cancel any award with the undersigned party. Pursuant to all QSP Documents including attachments, this Fee Submission Form, and pursuant to all Documents submitted, the undersigned proposes to supply the Authority with the services and/or products described herein for the fee(s) submitted pertaining to this QSP.

Date:		
Company:		
Address:		
City, State, Zip		
Phone:	Email:	
By:		
(Signature of Offerer)		-
By:	Title:	
(Print Name)		
Fed Tax ID:		