

**APPENDIX I**  
**Cost Form SRSTC**

Contract will be awarded on the basis of the combined technical and cost score as detailed in the RFP documents.  
 The initial contract will be for a three-year (3) year period with two possible one year extensions.

The prescription fill cost quote must be inclusive of all services and activities to be provided in meeting the RFP and contractual requirements.  
 The estimated number of prescription fills per month is 1900. Cost proposals should use the estimated numbers in calculating cost.  
 No other costs will be paid for this contract other than the prescription fill rate.

**VENDOR AGENCY Name:**

	<b>Contract Year 2010</b>	<b>Contract Year 2011</b>	<b>Contract Year 2012</b>
<b>Price per Prescription Fill (Inclusive of all costs)</b>	Per Prescription fill: \$ _____  x 1900 (1 mo.) = \$ _____  x 12 mos = \$ _____ <b>Total Contract Cost</b>	Per Prescription fill: \$ _____  x 1900 (1 mo.) = \$ _____  x 12 mos = \$ _____ <b>Total Contract Cost</b>	Per Prescription fill: \$ _____  x 1900 (1 mo.) = \$ _____  x 12 mos = \$ _____ <b>Total Contract Cost</b>