

**Attachment 1: Price Proposal Form**

In response to Chicago Metropolitan Agency for Planning (CMAP) Request for Proposal (RFP) 030 for consulting services to plan and implement an agency Intranet using Microsoft Office SharePoint Server 2007 Enterprise dated April 10, 2009, the undersigned, as an individual(s) with the authority to bind the Proposer, understands and agrees to the specifications, terms, conditions and provisions of the RFP and prices proposed below unless otherwise modified by mutual agreement of the parties. It is also agreed that the proposal submitted in response to the RFP is valid for ninety (90) calendar days from the proposal due date.

Please enter pricing into the follow matrix. For ease of entry, feel free to copy and paste the table into an Excel spreadsheet; insert lines as necessary. If price structure is variable by which of the firm's employees are assigned, please specify the employee billing level, the cost per hour for this level, and the total number hours to be billed at this level. Additional scenarios for appropriate implementations can be included.

SERVICE	COST PER HOUR		TOTAL HOURS	TOTAL COST
DESIGN	Billing Level:	Cost:		
	Billing Level:	Cost:		
	Billing Level:	Cost:		
BUILD	Billing Level:	Cost:		
	Billing Level:	Cost:		
	Billing Level:	Cost:		
IMPLEMENT	Billing Level:	Cost:		
	Billing Level:	Cost:		
	Billing Level:	Cost:		
			<b>Maxiumum Reimbursable Expenses:</b>	
			<b>TOTAL COST:</b>	

Acknowledgement of Receipt of Addenda if any:  
(If none received, write "NONE.")

Addendum Number Date Received

\_\_\_\_\_  
\_\_\_\_\_

If awarded a contract, the undersigned hereby agrees to sign the contract and to furnish the necessary certificates if any.

Proposer's Authorized Signatory (Print): \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone Number: \_\_\_\_\_

Date: \_\_\_\_\_