



Kathleen Toomey, MD, Commissioner • Brian Kemp, Governor

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# **REQUEST FOR PROPOSAL FOR FINANCIAL AUDIT SERVICES**

**OFFERED BY:**

**SOUTH HEALTH DISTRICT**

**FOR:**

BEN HILL COUNTY BOARD OF HEALTH  
BERRIEN COUNTY BOARD OF HEALTH  
BROOKS COUNTY BOARD OF HEALTH  
COOK COUNTY BOARD OF HEALTH  
ECHOLS COUNTY BOARD OF HEALTH  
IRWIN COUNTY BOARD OF HEALTH  
LANIER COUNTY BOARD OF HEALTH  
LOWNDES COUNTY BOARD OF HEALTH (SINGLE AUDIT)  
(INCLUDES ALL RELATED LOCAL, STATE AND FEDERAL PROGRAMS)  
TIFT COUNTY BOARD OF HEALTH  
TURNER COUNTY BOARD OF HEALTH

**RELEASE DATE: May 28, 2019**

**Proposal to be received by 5:00 p.m. on June 24, 2019**

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## OVERVIEW

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The South Health District is requesting proposals from licensed/qualified independent certified public accounting firms to conduct an audit/examination and to render an opinion on the annual financial statements of the following County Boards of Health for the year ending June 30, 2019.

BEN HILL COUNTY BOARD OF HEALTH  
BERRIEN COUNTY BOARD OF HEALTH  
BROOKS COUNTY BOARD OF HEALTH  
COOK COUNTY BOARD OF HEALTH  
ECHOLS COUNTY BOARD OF HEALTH  
IRWIN COUNTY BOARD OF HEALTH  
LANIER COUNTY BOARD OF HEALTH  
LOWNDES COUNTY BOARD OF HEALTH (SINGLE AUDIT)  
(INCLUDES ALL RELATED LOCAL, STATE AND FEDERAL PROGRAMS)  
TIFT COUNTY BOARD OF HEALTH  
TURNER COUNTY BOARD OF HEALTH

**The audit proposal must include all ten (10) Boards of Health as a single quoted price. Proposals for individual Boards of Health will not be accepted.**

Any explanations desired by a proposer regarding the meaning or interpretation of this RFP must be requested in writing via email to: [teresa.giles@dph.ga.gov](mailto:teresa.giles@dph.ga.gov) and [htillman@ttltp.com](mailto:htillman@ttltp.com) and received no later than 5:00 p.m. EST, June 17, 2019.

Proposals will be received at the South Health District Office until 5:00 p.m. EST, June 24, 2019.

Proposals received after this date and time will not be accepted. All proposals will be date/time stamped upon receipt into the District Office of South Health District.

Email and Fax proposals will NOT be accepted. All proposals must be received via US Postal Service, Courier (UPS, FedEx, etc.), or hand-delivered by the deadline above in order to be considered.

This RFP consists of two parts: a *technical* proposal and a *cost* proposal. Please be sure to read and follow specific instructions for each in the following section headed "Submission Information." Failure to do so could void your proposal.

Notification of Award will be issued no later than July 12, 2019.

## INTRODUCTION

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South Health District is responsible for the delivery of public health services in each of ten (10) counties in South Georgia. Our mission is to prevent disease and injury, promote health and well-being, and prepare for and respond to disasters in Ben Hill, Berrien, Brooks, Cook, Echols, Irwin, Lanier, Lowndes, Tift, and Turner counties. This mission is accomplished through the operation of local county health departments (under leadership by their respective County Boards of Health) and various local, state and federal programs operating throughout the district. South Health District collectively employs approximately 250 employees and has a District-wide budget of approximately \$21,000,000. Activities and services are funded through state grant-in-aid, county contributions, fees for services, grants, donations, and miscellaneous funds.

Individual profiles of the Boards of Health (BOH) and services provided can be found at <https://southhealthdistrict.com/>.

South Health District operates from a centralized accounting system located at the District Office in Valdosta, Georgia. All disbursements, payroll, and receipt of funds (except for fee collections) are managed and processed at the District Office. Only fees are collected at the county health departments, and they are accounted for by the transmission of documentation to the District Office. Each health department and program has an assigned county and program number and each has a separate general ledger. The centralized accounting system distributes costs to each health department and program based on direct costs incurred. Indirect costs are also disbursed based on an approved indirect cost plan.

The Lowndes County Board of Health serves as the “Lead County” for South Health District. With the exception of the Lowndes County Board of Health, all other County Boards of Health provide a public health service program funded through fees, local government funds, donations, state funds, and other miscellaneous local funds. As the lead county, the Lowndes County Board of Health provides a public health service program in addition to managing approximately fifty (50) other health programs provided in the district. These special programs are funded through local, state, and federal grants and in some cases fees. The federal funds are a mix of funds passed through the Georgia Department of Public Health and direct federal funds. The federal fund expenditures will exceed \$750,000 each year and will require a Single Audit for the Lowndes County Board of Health.

H. Harrison Tillman, Jr., CPA is serving as the financial consultant to assist the auditors and to prepare the audited financial statements. He has been the auditor for nine (9) of the counties for many years and will provide information and access to workpapers from the June 30, 2018, audit. He has also been assisting the auditors with the Lowndes County Board of Health audit for many years including the preparation of the audited financial statements.

Richard Stalvey, CPA with Fowler, Holley, Rambo & Stalvey, P.C. has been the auditor for the Lowndes County Board of Health and will be providing access to workpapers upon request.

## SCOPE OF SERVICES

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Firms submitting proposals must be qualified to perform independent audits in the State of Georgia.

The auditor must express an opinion on the fair presentation of the financial statements in accordance with the governmental auditing standards.

The auditor shall determine whether all funds appropriated for use or otherwise intended to be made available for use were, in fact, transferred to and received by the South Health District, and disbursed by the South Health District for the operation of its programs in accordance with rules, regulations, and applicable policies.

In the required reports on internal controls, the auditor shall communicate any reportable conditions found during the audit. A reportable condition shall be defined as a significant deficiency in the design or operation of the internal control structure, which could adversely affect the organization's ability to record, process, summarize, and report financial data consistent with the assertions of management in the financial statements.

Reportable conditions that are also material weaknesses shall be identified as such in the report. Non-reportable conditions discovered by the auditor shall be reported in a separate letter to management, which shall be referred to in the reports on internal controls.

All services not specifically mentioned in this RFP that are necessary to provide the functional capabilities described by the auditor shall be included in the scope of services.

The original contract period is expected to be from July 1, 2019 - June 30, 2020, and shall automatically renew for an additional two (2) one (1) year terms, unless terminated earlier under provision of the contract.

## AUDIT STANDARDS

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The South Health District is requesting proposals from qualified certified public accounting firms to perform financial audits for ten (10) County Health Departments and all South Health District Programs (under the Lowndes County Board of Health) for the fiscal years ending June 30, 2019, to June 30, 2021. These audits are to be performed in accordance with generally accepted auditing standards as practiced in the United States of America and in accordance with:

- Governmental Auditing Standards issued by the Comptroller General of the United States.
- Office of Management and Budget Uniform Administration Requirements, Cost Principles, and Audit Requirements Title 2 U.S. Code of Federal Regulations (CFR) Part 200.
- The Single Audit Act Amendments of 1996, further amended in 2 CFR, Part 200, Sections 500-521.
- Official Code of Georgia, Annotated, Title 31, as applicable to County Boards of Health.
- All applicable provisions of policies and procedures of the Georgia Department of Public Health.
- The Governmental Accounting Standards Board.
- American Institute of Certified Public Accountants (AICPA) Standards.

## ASSISTANCE PROVIDED TO THE AUDITOR

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The staff of South Health District, along with our financial consultant, H. Harrison Tillman, Jr., CPA, will prepare or provide the following statements and schedules for the auditor as follows:

- Adjusted trial balance for all counties and programs including reclassification entries for the GASB 34 financial statements in PDF and Excel format for uploading to the auditor's trial balance program.
- Detailed schedules of revenues and expenditures, accounts payable and receivable, and encumbrances.
- Detail of balance sheet and subsidiary account activity.
- Check registers.
- Bank reconciliations for all accounts.
- Depreciation schedules including additions and deletions.
- Account information, as requested in PDF or Excel format.
- Payroll records and reconciliations to the books.
- Schedules of compensated absences.
- Standard representation letters which will be signed by the District Health Director, the District Administrator, and the Financial Consultant.
- Schedule of federal and state assistance.
- Schedules of actual to budget comparison.
- Other items as requested and material to completion of the proposed work.
- Pension and Other Post-Employment Benefits actuarial reports.
- After the draft copies of the ten (10) audited financial statements have been reviewed and approved by the auditor, the Financial Consultant will prepare bound copies that include the auditor-provided opinion letter. Auditors will receive an electronic and bound copy for each Board of Health.
- The Financial Consultant will be responsible for submitting the final audited statements to the Georgia Department of Public Health and answering any questions they may have during their review.

Furnished workspace and accommodations will be made available to audit staff for the duration of the contract.

## WORK COMPLETION REQUIREMENTS

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The South Health District anticipates that the auditor may begin work at any time on or after August 1, 2019.

All required reports will be due to the South Health District by October 31, 2019.

The auditor shall promptly notify the District Health Director, the District Administrator, and the appropriate Board of Health of any suspicion of fraud, defalcation, or misapplication of funds. Such notice shall be in addition to any notice to grantors required by the single audit legislation.

One copy, plus one electronic copy in PDF format, are required for the management letters.

## SUBMISSION INFORMATION

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Each proposer shall furnish the information required by the proposal. Proposer shall print or type his name, title, and email and sign the proposal on both the Proposal Cover Page and the Cost Proposal Forms. Erasures or other changes must be initialed by the person signing the proposal.

The purpose of the *technical* proposal is to demonstrate the qualifications, competence, experience, and capacity of the firms seeking to undertake the independent audit of each Board of Health in conformity with the requirements of this RFP.

The purpose of the *cost* proposal is to guide the South Health District in selecting the firm best demonstrating the above qualities, but also providing services that are reasonable in cost and best meet the needs of South Health District.

To be considered, one (1) original of both the technical and cost proposals (years 1-3) must be received by 5:00 p.m. EST on June 24, 2019.

**Proposals received after this date and time will not be accepted.**

Please sign the proposal; unsigned proposals will not be accepted.

The audit proposal should be addressed and mailed or hand-delivered in a sealed envelope to:

**Hand-Delivered or**

**Courier (UPS, FedEx, etc.):**

Audit Proposal  
Attn: Teresa Giles  
South Health District  
325 West Savannah Ave.  
Valdosta, Georgia 31601

**Mailed via USPS**

Audit Proposal  
Attn: Teresa Giles  
South Health District  
P.O. Box 5147  
Valdosta, Georgia 31603

The mailed or hand-delivered sealed envelope should include two (2) separately sealed envelopes for the technical and cost proposals. Include the cost proposal for year 1, year 2, and year 3 in the same sealed envelope. The technical and cost proposals must be in separate sealed envelopes with the following information written/present on both sides of the envelope:

**Response to RFP for Financial Auditing Services – Technical Proposal**

**Response to RFP for Financial Auditing Services – Cost Proposal**

**The South Health District requires the separation of the technical proposal and cost proposal. There should be no dollar units or costs included in the technical proposal document.**

## FORMAT OF PROPOSAL

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Submitted proposals should follow the format below, and all requested information must be supplied. Failure in this regard may result in the proposal being eliminated from evaluation and consideration. **Please note the specific instructions for both sections: the Technical Proposal and the Cost Proposal.**

### **Technical Proposal**

- **Proposal Cover Page:** Include the name, address, telephone number and license number of the firm; must be signed by the person or persons authorized to represent the firm.
- **Table of Contents:** Identify material contained in the proposal by section and page number.
- **Section I – Summary:** State overall approach to the audit, including the objective(s) and scope of work to be performed.
- **Section II – Firm Contact Information:** Provide the following information of the firm:
  - Address and telephone number of the firm.
  - Name and email address of firm’s representative designated as the contact.
  - Name and email address of the project manager, if different from the individual designated as the contact.
- **Section III – Program Schedule:** Provide projected milestones or benchmarks for completing the audit within the total time allowed.
- **Section IV – Firm Organization:** Provide a statement of the firm’s background and experience in providing audit services to governmental organizations. Describe the technical capabilities of the firm. Provide references of other similar completed governmental audits (maximum of three (3)) performed in the last five (5) years. Include the name and telephone number of the principal client contact. The firm shall provide information on the circumstances and status of any disciplinary action taken or pending against the firm during the past three (3) years with state regulatory bodies or professional organizations.

Include a copy of the firm’s most recent Peer Review report, any separate written communication explaining deficiencies or significant deficiencies noted in the Peer Review, and any responses from the firm to any deficiencies reported, either in the Peer Review report or in a separate written communication.

- Section V – Project Organization: Describe the proposed management structure, program monitoring procedures, and organization of the engagement team.

Provide a statement detailing the approach to the audit as required within this RFP. Proposers will be required to provide the following information on their audit approach:

- Proposed stages and timeframe of the engagement.
  - Level of staff and number of hours to be assigned to each proposed stage of the engagement. **Note: No dollars should be included in the technical proposal.**
  - Type and extent of analytical procedures to be used in the engagement.
  - Approach to be taken to gain and document an understanding of the South Health District's internal control structure.
  - Approach to be taken in determining laws and regulations that will be subject to audit test work.
  - Approach to be taken in drawing audit samples for purposes of tests of compliance.
  - Identify and describe any anticipated potential audit problems; the firm's approach to resolving these problems; and any special assistance that will be requested from the Board.
- Section VI – Assigned Personnel: Supervisory members of the audit team, including the field auditor in charge, should be Certified Public Accountants and have a minimum of two (2) years of audit experience. Provide the following on the staff to be assigned to the audit:
    - List all key personnel assigned by level and name. An affirmative statement should be included indicating that the firm and all assigned key professional staff are qualified to practice in Georgia. Also include the Georgia license number for CPAs.
    - Provide a description of their background along with a summary of their experience in auditing governmental agencies, especially Public Health, auditing in general, and any specialized expertise they may have.
    - Provide a statement of the education and training programs provided to, or required of, the staff identified for participation in the engagement, particularly with reference to governmental accounting and auditing, and governmental practices and procedures.
  - Section VII – Retention of Working Papers: All working papers are the property of the South Health District and must be retained at the auditor's expense for a minimum of seven (7) years, unless the firm is notified in writing by the South Health District of the need to extend the retention period. The auditor will be required to make working papers available, upon request by the South Health District. Include a statement acknowledging that if your firm is awarded a contract, you will retain the audit work papers for a minimum of seven years.

- Section VIII – Conflict of Interest: The firm should provide an affirmative statement that it is independent of the South Health District and the ten (10) County Boards of Health as defined by generally accepted accounting standards and the U.S. Comptroller General’s Governmental Auditing Standards. Address possible conflicts of interest with other clients affected by actions performed by the firm on behalf of the South Health District.
- Section IX – Additional Data: Provide other essential data that may assist in the evaluation of the proposal.

### **Cost Proposal**

The **sealed** cost proposal should contain all pricing information relative to performing the audit engagement as described in this RFP. The total all-inclusive maximum price must contain all direct and indirect costs, including all out-of-pocket expenses. Do not include fees or any information pertaining to the cost proposal outside of the sealed cost proposal envelope.

**Cost proposals will not be opened until all technical proposals have been evaluated.**

The South Health District is soliciting a fixed, not to exceed cost proposal amount. The Cost Proposal must be submitted in a separate sealed envelope. (See Submission Information Section)

The Cost Proposal must use the forms attached and include a list of hourly rates and the total number of hours estimated for each level of professional staff to be used to perform the audits.

## GENERAL TERMS, CONDITIONS, AND INSTRUCTIONS

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### Payment

Assuming satisfactory performance, payments will be made upon a negotiated schedule agreed upon at the time of the contract execution. The final payment will be made at the conclusion of all work completed with all related reports, including audit adjustments, received by the deadline date of October 31, 2019. All invoices should include description of work performed by personnel class, hours, and hourly rate.

### Supplemental Information

If the proposer cannot meet or takes exception to, any RFP requirement(s), such exception(s), together with the proposer's suggestion concerning each requirement, must be clearly stated in the proposal.

Proposers may provide supplemental information for a requirement being answered. This information should be provided in Section IX – Additional Data to the proposal.

### Criteria for Selection and Evaluation

A selection committee comprised of South Health District staff will rate the technical proposal of all qualified proposers and will rank the proposals based on pre-established criteria. A short list of the highest ranked proposals may be developed if warranted. During the evaluation, validation, and selection process, the South Health District may desire the presence of a proposer's representative for answering specific questions, orally and/or in writing. The South Health District will not be liable for a firm's cost incurred for preparation or presentation in this regard.

Upon completion of the evaluation and ranking process, the committee will open cost proposals of the short list firms deemed best qualified for the work. Award of a contract will be based on the combination of proposal quality and cost, judged by the South Health District to be in its best interest. The South Health District intends to accept the offer that is most advantageous to itself, from the standpoint of price, functional sufficiency, technical sufficiency, and other factors that it deems necessary. It reserves the right to reject any and all proposals received and to negotiate separately with any source whatsoever in any manner deemed to be in the best interest of the South Health District.

The South Health District also reserves the right to conduct a pre-award survey or to require other evidence of technical, production, managerial, financial, or other abilities prior to the award of the contract.

The primary objective of the selection process is to obtain the services of a qualified firm to perform financial audit services for the Boards of Health. This will be accomplished by studying the proposals, conducting reference checks, and/or interviews if necessary.

## General Information

Proposers are expected to examine the specifications and all of the instructions. Failure to do so will be at the proposer's risk.

Each proposer shall furnish the information required by the proposer. Proposer shall print or type his name and sign the proposal on the cover page and cost proposal forms. Erasures or other changes must be initialed by the person signing the proposal.

The South Health District requires the separation of the technical proposal and the cost proposal. There should be no dollar units or total costs included in the technical proposal document.

There is no expressed or implied obligation for the South Health District to reimburse firms for any expenses incurred in preparing a proposal in response to this request. Such expenses are to be borne by the proposer.

The South Health District reserves the right to retain all proposals submitted and to use any ideas in a proposal regardless of whether that proposal is selected. Email or Fax proposals will not be accepted. Proposals cannot be withdrawn or corrected after opening. (Exceptions: reductions and changes by successful vendor, which would be to the advantage of the South Health District).

The South Health District is exempt from federal excise tax, income tax, and Georgia sales tax.

Submit one (1) original technical and cost proposal as specified in Submission Information section. Sign proposals. Unsigned proposals will not be considered.

## Explanation to Proposers

Any explanations desired by a proposer regarding the meaning or interpretation of the RFP, must be requested in writing via email to [teresa.giles@dph.ga.gov](mailto:teresa.giles@dph.ga.gov) and [htillman@ttltp.com](mailto:htillman@ttltp.com) and received by the South Health District no later than 5:00 p.m. EST, June 17, 2019.

## Modification and Clarification of this RFP

Any modification to the terms, conditions, or specifications contained in this RFP must be in writing. With the exception of specifically designated persons in the District Office, selected for this purpose, employees of the South Health District or any employee or member of a local Board of Health are not authorized to modify, interpret, or clarify such terms, conditions, or specifications. Proposers should not rely on the presentments of employees or agents other than those with express authority to make such presentments.

### Evidence of Reliability

Since the reliability of the proposer to successfully complete performance under the terms and conditions of the proposal is a primary consideration, proposer should submit any evidence which will assist the South Health District in making a distinction among proposers.

### Late Proposals and Modifications or Withdrawals

Proposals and modifications or withdrawals received at the office designated in the Request for Proposal after the exact time set for opening of proposals will not be considered.

### Certification of Independent Price Determination

By submission of the proposal, the proposer certifies that in connection with this proposal:

- The prices in the proposal have been arrived at independently, without consultation, communication, or agreement, for the purpose of restricting competition, as to any matter relating to such prices with any other proposer or with any competitor.
- Unless otherwise required by law, the prices which have been quoted in the proposal have not been knowingly disclosed by the proposer and will not knowingly be disclosed by the proposer prior to the opening, directly or indirectly, to any other vendor or to any competitor; and
- No attempt has been made or will be made by the proposer to induce any other person or firm to submit or not to submit a proposal for the purpose of restricting competition.

### Award of Contract

The contract, if awarded, will be to the responsible proposer whose proposal will be most advantageous to the South Health District, price and other factors considered. The determination will be solely at the discretion of the South Health District. Based upon the assumption of satisfactory performance by the firm awarded the initial contract, it is the intent of the South Health District to enter into a three (3) year contract with possible renewals not to exceed more than five years in duration.

The South Health District reserves the right to reject or accept any or all proposals and to waive informalities, minor irregularities and technicalities in proposals received, whichever is deemed to be in the best interest of the South Health District.

### Insurance and Surety

The successful firm will be required to furnish a Certificate of Professional Liability Insurance.

### Failure to Propose

In the event no proposal is to be submitted, do not return the response to the RFP unless otherwise specified.

**PROPOSAL COVER PAGE**

In compliance with this request for proposal and to all of the conditions imposed herein, the undersigned offers and agrees to furnish the services in accordance with the attached signed proposal.

Name and Address of Firm:

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

Firm License Number: \_\_\_\_\_

By: \_\_\_\_\_

Please Print Name Here

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Signature

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

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

**COST PROPOSAL FORM  
(Year 1)**

SCHEDULE OF PROFESSIONAL FEES  
FOR THE AUDIT OF THE SOUTH HEALTH DISTRICT  
FINANCIAL STATEMENTS  
(Complete one (1) schedule for each year covered by the proposal)

FIRM NAME: \_\_\_\_\_

		HOURLY	
STAFF	HOURS	RATE	TOTAL
PARTNERS			
MANAGERS			
SUPERVISORY STAFF			
CLERICAL			
OTHER (SPECIFY)			
<b>TOTAL FOR SERVICES DESCRIBED IN RFP</b>			

By: \_\_\_\_\_  
Please Print Name Here

\_\_\_\_\_  
Signature

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

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

**COST PROPOSAL FORM  
(Year 2)**

SCHEDULE OF PROFESSIONAL FEES  
FOR THE AUDIT OF THE SOUTH HEALTH DISTRICT  
FINANCIAL STATEMENTS  
(Complete one (1) schedule for each year covered by the proposal)

FIRM NAME: \_\_\_\_\_

		HOURLY	
STAFF	HOURS	RATE	TOTAL
PARTNERS			
MANAGERS			
SUPERVISORY STAFF			
CLERICAL			
OTHER (SPECIFY)			
<b>TOTAL FOR SERVICES DESCRIBED IN RFP</b>			

By: \_\_\_\_\_

Please Print Name Here

\_\_\_\_\_  
Signature

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

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

**COST PROPOSAL FORM  
(Year 3)**

SCHEDULE OF PROFESSIONAL FEES  
FOR THE AUDIT OF THE SOUTH HEALTH DISTRICT  
FINANCIAL STATEMENTS  
(Complete one (1) schedule for each year covered by the proposal)

FIRM NAME: \_\_\_\_\_

	HOURS	HOURLY RATE	TOTAL
STAFF			
PARTNERS			
MANAGERS			
SUPERVISORY STAFF			
CLERICAL			
OTHER (SPECIFY)			
<b>TOTAL FOR SERVICES DESCRIBED IN RFP</b>			

By: \_\_\_\_\_  
Please Print Name Here

\_\_\_\_\_  
Signature

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

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