

Attachment IV Cost Sheet

Phase 1A Assessment and Planning

Total Phase Cost \$ _____

Labor Category	Hourly Rate	Estimated # of hours
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

(add categories as necessary)

Phase 1B Staff Augmentation - Accounting Services

Total Phase Cost \$ _____

Labor Category	Hourly Rate	Estimated # of hours
_____	\$ _____	_____
_____	\$ _____	_____

Note: For Phase 1(B) Staff Augmentation, the proposer shall provide the cost for two staff members full time for each year of the contract (total of three years).

Phase 2 Implementation

Total Phase Cost \$ _____

Labor Category	Hourly Rate	Estimated # of hours
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

(add categories as necessary)

Phase 3 Implementation

Total Phase Cost \$ _____

Labor Category	Hourly Rate	Estimated # of hours
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

(add categories as necessary)

TOTAL PROJECT COST \$ _____