

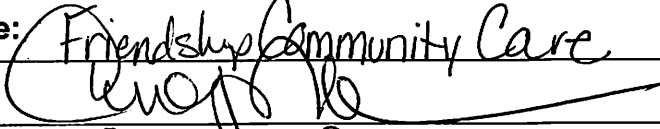
**OFFICIAL BID PRICE SHEET**

<b>OCCUPATIONAL THERAPY SERVICES</b>			
<b><u>ITEM/DESCRIPTION</u></b>	<b><u>APPROXIMATE ANNUAL HOURS</u></b>	<b><u>PRICE PER HOUR</u></b>	<b><u>EXTENDED PRICE (Hourly Rate x's annual hours)</u></b>
Occupational Therapist	4160	\$ 60.00	\$ 249,600
Certified Occupational Therapy Asst.	2080	\$ 45.00	\$ 93,600

\*\*Price must be all inclusive for services. There will be no reimbursement for travel time, mileage, meals, lodging or other expenses. Only the quoted hourly rate will be paid.

**AUTHORIZATION SIGNATURE**

By my signature below, I certify that the aforementioned statements are true and correct and that I accept the Terms and Conditions as presented in this bid, and that I am authorized by the respondent to submit this bid on his/her behalf.

<b>Vendor Name:</b> Friendship Community Care	<b>Date:</b> May 6, 2019
<b>Signature:</b> 	<b>Title:</b> CEO
<b>Printed Name:</b> Cindy Mahan	