# SCHEDULE C - Pricing Sheet

The Contractor shall deliver the following goods or services or both under this Contract.

**Table 1: Budget by Deliverable.**

Enter the budget against each milestone specified in Schedule E: Description of Goods and Services

|  |  |  |  |
| --- | --- | --- | --- |
| **Deliverable** | **Work Effort (# days or hours)** | **Hourly/per diem Rate** | **Total Cost** |
|  | | | |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
|  | | | |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |
| 4. |  |  |  |
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|  |  |  |  |
| **Subtotal** |  |  |  |
| **HST** |  |  |  |
| **Additional Expenses (inclusive of HST)** |  |  |  |
| **Total Budget** |  |  |  |

**Additional Expenses**

Please provide a list of all additional expenses including but not limited to: administrative costs, out of pocket expenses, transportation, food etc.

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| **Total Proposed Price (Agreement Ceiling Price for fees)** | **$** |

This Proponents Submission is made entirely in accordance with **RP211-2015-01** by your signature hereunder, it is deemed that you have read and agreed to all terms and conditions in the same manner as had such terms and conditions appeared above your signature, and that you have the authority to bind the Proponents.

|  |
| --- |
| Signature of Proponent representative: |
|  |
| Name and Title of Proponent representative: |
|  |
|  |
| Date: |
| I have authority to bind the Proponent. |