ATTACHMENT B

THIS PRICING AND DELIVERY COMMITMENT PROPOSAL MUST BE COMPLETED, SIGNED, AND RETURNED WITH RESPONDENT'S PROPOSAL. FAILURE TO COMPLETE, SIGN AND RETURN THIS PRICING AND DELIVERY COMMITMENT PROPOSAL WILL RESULT IN REJECTION OF YOUR PROPOSAL.

PRICING AND DELIVERY COMMITMENT PROPOSAL

Proposal	l of:	
1		(Company Name)
To: 7	Γhe U	niversity of Texas MD Anderson Cancer Center
REFERI	ENCE	E: JOC Services in the Bastrop County, Texas Area
RFP No.:	:	1208976/KM
From: F	Respo	ndent's Name:
Mailing A	Addre	ss:
City, Star	te, Zip	o Code:
Phone No	umbei	:
1	Го:	The University of Texas MD Anderson Cancer Center J.J. Pickle Conference Center, Room SRC1.113 1808 Park Road 1C Smithville, TX 78957 Attn: Karrie McKeown
Ladies ar	nd Ge	ntlemen:
the unde	ersigne	ly examined all the specifications and requirements of this RFP and any attachments thereto, ed proposes to furnish the Job Order Contracting services as required pursuant to the d documents at the below quoted terms.
A. Coef	ficien	t Multiplier:
C	of the	g reviewed the terms of Owner's Standard Agreement relating to the definition, use, and application Coefficient Multiplier, Respondent hereby proposes the following Coefficient Multiplier for the term of the agreement as well as any and all subsequent extensions:
		Coefficient Multiplier

B. Unit Price for Medical Clearance

Having reviewed the terms of Owner's Standard Agreement relating to the definition, use, and requirements for Medical Clearance, Respondent hereby proposes the following unit price for the initial term of the agreement as well as any and all subsequent extensions:

		Unit Price for Medical Clearan	ce		_ (\$)	per worker	
C.	Maxi	imum Mobilization Commitme	nt (after receipt	of Owner's P.O.):		
		ondent hereby proposes to assenting () Days of receiving Over's Standard Agreement.					
D.	RFP	Addenda Checklist					
	R	Receipt is hereby acknowledged of	of the following a	ddenda to this RF	P. (initial, if a	pplicable)	
		No. 1 No. 2	No. 3	No. 4	_ No. 5		
Prop this	osal. Pricii	ent must complete, sign and return Respondent's company official on and Delivery Commitment Prowill subject the Proposal to disqu	(s) who are autho oposal. Failure to	rized to commit	to this Propos	al must execute	;
	R	Respondent's Name:					
	R	Respondent's State of Texas Tax (This 11 digit number is mana					
	If	f a Corporation:					
		Respondent's State of Inc	orporation:				
		Respondent's Charter No.	: <u> </u>				
	Id	dentify each person who owns at	least 25% of Res	pondent's busines	ss entity by na	ime:	
		(Name)					
		(Name)					
		(Name)					
		(Name)					

submitted and certified by:	
(Respondent's Name)	(Title)
(Street Address)	(Telephone Number)
(City, State, Zip Code)	(Fax Number)
(AUTHORIZED SIGNATURE)	(DATE)