

ATTACHMENT 19



**Department of
Civil Service**

**Price Quotation Form - IFB entitled:
“Employee Benefit Card”**

Offeror Name: _____

Empire Plan	Year 1	Year 2	Year 3	Year 4	Year 5
Per EBC fee					
Card Carrier and Envelope (per Packet)					

Excelsior Plan & SEHP	Year 1	Year 2	Year 3	Year 4	Year 5
Per EBC fee					
Card Carrier and Envelope (per Packet)					

Instructions:

Quote in the space provided the per EBC fee and the per Packet of Card Carrier and Envelope fee that will be payable in accordance with the terms of the IFB. An Offeror must quote separate fees for the Empire Plan benefit cards and the Excelsior and SEHP benefit cards.

Each Card Carrier and Envelope Packet includes one (1) Card Carrier and one (1) Envelope.

Quoted fees must include all costs to produce the EBC, Card Carrier and Envelope, including materials, administration, startup costs, and management reporting costs.

Do not include USPS charges in the fees as these will be reimbursed on a pass-through basis. The Offeror may not bill and will not be reimbursed for any postage charges associated with normal day-to-day functions undertaken by the Offeror to complete Project Services. Such postage charges are considered overhead expenses and, as such, included as a component of the Offeror's per EBC, card carrier and envelope fees.



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The Department will not accept fees with any variables or contingencies. An Offeror must fill in quotes in the space provided. The Department will not accept modifications to this attachment.