

ATTACHMENT I

COST SPREADSHEET

This spreadsheet indicates an hourly cost per service. Please indicate your hourly cost per service for the following service breakdown:

Individual Counseling session	\$	Per hour
Group Counseling session	\$	Per hour
Parent group	\$	Per hour
Family session	\$	Per hour

This is not a cost reimbursement. If the cost per hour per service is not submitted as requested, the vendor will be automatically disqualified.