Attachment 2 – Fiscal Proposal
IFB 25019 – Naloxone

Bidder Organization Name: _____

The Bid Price will be per unit (1 unit = 1 carton containing 2 doses of 4 mg intranasal naloxone spray) and will include shipping, tracking and service support. Shipping will be Freight on Board (FOB) destination, including all customs duties and charges. Sales tax cannot be charged to NYS OASAS.

All units must have a minimum remaining shelf-life of 30 months at time of delivery.

The bid price must also cover the cost of furnishing all the said products and services specified in this IFB, including but not limited to materials, equipment, profit and labor to the satisfaction of NYS OASAS and the performance of all work set forth in said specifications.

Bidders must provide ***ONLY ONE BID***. Bidders must not include any notes/notations/additional attachments or footnotes.

All-inclusive Price Per Unit	$

The price bid under this IFB shall be the maximum price payable by NYS OASAS during the term of the Contract. If, during the Contract term, the Contractor offers or provides a lower price for the same product to another governmental entity, the Contractor shall automatically extend such lower price to NYS OASAS, effective on the date the lower price becomes available.

The Contractor certifies that the price offered is no higher than those charged to any other federal, state, or local governmental entity for the same or substantially similar product and quantities.

Quantities provided in the IFB are estimates and are not a guarantee of quantity of services.

Failure to complete and submit this Fiscal Proposal Form will result in disqualification.

By signing this Fiscal Proposal Form, bidder agrees that the price above is binding for 365 days from the proposal due dates.

AUTHORIZED SIGNATURE

Authorized Signatory Name: _____

Title: _____

Signature: _____

Date: ____/____/_____

Phone: _____ Email: _____