

Fiscal Agent RATE SHEET

Service: Fiscal Agent and Money Management Services #DSD021

Proposer must submit a rate for Billable Services as required in the RFP document

#	Service	\$		Comments (if any)
1.	Per Check Fee (including CP*)			
2.	Per Client Fee (FA** and CP processing) per month:			
2.a	Per Client Fee-No limit to number of checks per month			
2.b	Per Client Fee-Limited number of checks per month			
	Please provide Maximum number of checks covered in monthly Fee			
2.c	If 2.b is selected please provide per check fee (including CP) for over the limit checks			
3	Stop Payment Fee		If Extra charge provide amount	
4	Manual or Out of turn Check Fee		If Extra charge provide amount	
5	Advance required	Yes/No		
6	Pay Check paid after receipt of money from TPA ***	Yes/No		
7.	Pay Check paid before receipt of money from TPA	Yes/No		

*Claim submission and processing (payment, error correction etc) to TPA.

**Fiscal Agent services like payroll processing, tax deduction and tax deposit and tax form submission etc.

***TPA: Third Party Claim Administrator

Please select a method between #1, #2a or #2b per sheet. If you are providing Alternative options please use separate sheets for each option. Please answer all questions for Items #3 to #7 on each sheet.

Example for method 2a and 2b: 2a may be \$40 per client per month (no limit on checks)

2b may be \$30 per client per month for up to 4 checks and then 2c may be \$5 per check.

Authorized Signature

Company Name

Printed Name

Title

Date