

# PRICE FORM

## City of Fairbanks

EMERGENCY GRANT ADMINISTRATION SERVICES

FOR CARES ACT FUNDS

RFP #20-05

**Failure to complete this form shall result in your Offer being deemed non-responsive and rejected without any further explanation.**

**Description**

**Percentage**

\_\_\_\_\_ Funds Distributed \_\_\_\_\_

\_\_\_\_\_ %