

NYSERDA Audit Services RFP 3243
ATTACHMENT C: Proposed fee structure

Name of Proposer _____

Note: Form must be completed, signed, and submitted with the Audit Services Proposal

NYSERDA Basic Financial Statements	Job Title	Estimated number of hours					
			Year 1	Year 2	Year 3	Year 4	Year 5
Title I							
Title II							
Title III							
Title IV							
Title V							
Title VI							

NY Green Bank, enterprise fund of NYSERDA	Job Title	Estimated number of hours					
			Year 1	Year 2	Year 3	Year 4	Year 5
Title I							
Title II							
Title III							
Title IV							
Title V							
Title VI							

OPEB Trust Basic Financial Statements	Job Title	Estimated number of hours					
			Year 1	Year 2	Year 3	Year 4	Year 5
Title I							
Title II							
Title III							
Title IV							
Title V							
Title VI							

Total aggregate cost of services (not to exceed)	-	-	-	-	-	-
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Signature	
Name	
Title	
Date	