
EXHIBIT D. FEE SCHEDULE WORKSHEET

Proposer: _____

1. **Hourly Rates.** Proposers are requested to complete this Fee Schedule Worksheet to propose their hourly rates, as well as the hourly rates of your subcontractors, subconsultants, for providing the services described in the Scope of Services section of this RFQ. Proposers who do not complete this EXHIBIT D must provide pricing information in a format similar to that listed in this document.

CONTRACTOR HOURLY FEE SCHEDULE		
Position Title	Personnel Name	Hourly Rate
		\$
		\$
		\$
		\$
		\$
		\$
		\$

SUBCONTRACTOR HOURLY FEE SCHEDULE			
Name of Subcontractor	Position Title	Personnel Name	Hourly Rate
			\$
			\$
			\$
			\$
			\$
			\$

2. **Billing Increment.** Propose the following: (a) how Contracted hourly personnel expenses are to be billed, including proposed billing increments (e.g., quarter-of-an-hour, tenth-of-an-hour, etc); and (b) business rules applicable to tracking and billing personnel time.

Billing Increment:

Billing Rules (if any):

If your firm is selected for contract award from this RFQ, any subcontractors or subconsultants not identified in your proposal that you wish to engage under the Contract must be approved by Prosper Portland in a Work Order or Work Order Amendment. Such a Work Order or Work Order Amendment must detail the subcontractor or subconsultant personnel to be used including their title and applicable billing rates.

3. **Reimbursable Expenses.** If Proposer will seek reimbursement for necessary and appropriate expenses incurred in performance of work performed under a Prosper Portland Work Order, Proposer must quote the cost of such expenses in the space provided below. If a mark-up rate will apply to reimbursable expenses, indicate a mark-up rate.

Mark-up rate: ☐ At cost or ☐ cost plus _____ % (maximum 10%)

REIMBURSABLE EXPENSES			
Type of Expense	Cost / Unit	Type of Expense	Cost / Unit

4. **Electronic Payments.** Indicate whether or not your firm accepts payment for services with:

- Credit card (Yes ☐ | No ☐)
- Electronic funds transfer (Yes ☐ | No ☐)
- Another electronic method (if so, indicate this method _____)

**Proposers may attach additional sheets to this EXHIBIT D
if they wish to provide additional pricing information.**