**PRICING SCHEDULE.**

**NOT TO BE SUBMITTED WITHIN THE QUALITY QUESTION SUBMISSION.**

|  |  |
| --- | --- |
| Contract Name  | **SEF – Grant Fund Manager** |
| Name of Contractor: |  |
| Item Description / Deliverable | Cost of that Item / Deliverable£ | Estimate of time taken to complete that Item / Deliverable |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |
| 5 |  |  |  |
|  | **Total**  |  |

**Breakdown of the total cost**

|  |  |  |  |
| --- | --- | --- | --- |
| Personnel | \*Day Rate£ | Estimated no. days | Total Cost£ |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | **Total** |  |  |  |

Please give your hourly rate should we need to do further work with you as part of this tender:

|  |  |
| --- | --- |
| Hourly Rate | £  |