



November 22, 2022

**A D D E N D U M #1**  
**To**  
**RFP Number 23-005**

**PLEASE NOTE:**

**Alternate printing methods will be evaluated based on samples submitted. ALTERNATE PRINTING SAMPLES MUST BE SUBMITTED WITH RFP.**

**Alternate Printing Method**

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**Billing Forms and Envelopes Specifications**

Price Per Utility Bill \$ \_\_\_\_\_ X 156,000 = \$ \_\_\_\_\_  
**Total Cost (Utility Bill)**

**Past Due Notice**

Price Per Past Due Notice \$ \_\_\_\_\_ X 16,800 = \$ \_\_\_\_\_  
**Total Cost (Past Due Notice)**

**Drinking Water Quality Report**

Printing Price/per thousand \_\_\_\_\_ X15 = \$ \_\_\_\_\_  
Inserting Cost per piece \_\_\_\_\_ X 15,000 = \$ \_\_\_\_\_

**Alternate Printing Method (if applicable)**

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**Billing Forms and Envelopes Specifications**

Price Per Utility Bill \$ \_\_\_\_\_ X 156,000 = \$ \_\_\_\_\_  
**Total Cost (Utility Bill)**

**Past Due Notice**

Price Per Past Due Notice \$ \_\_\_\_\_ X 16,800 = \$ \_\_\_\_\_  
Total Cost (Past Due Notice)

**Drinking Water Quality Report**

Printing Price/per thousand \_\_\_\_\_ X15 = \$ \_\_\_\_\_  
Inserting Cost per piece \_\_\_\_\_ X 15,000 = \$ \_\_\_\_\_

**CONTRACTOR INFORMATION:**

_____	_____
Company name	Company representative signature
_____	_____
Address	Company representative printed name
_____	_____
City, State & Zip	Title
_____	_____
Area code & telephone number	Date

**\*\*\* THIS PAGE MUST BE COMPLETED AND SUBMITTED WITH YOUR RFP  
OR THE RFP MAY BE REJECTED \*\*\***