

EXHIBIT E

COST PROPOSAL

Purchasing Department 619 Division St. MS-7 Port Orchard, WA 98366 Phone: (360) 337-4788

OFFEROR: Please complete the Cost Proposal form. The County will not be liable for any costs the Bidder does not identify on this form.

1. Contract will submit to the County commission checks for deposit in the Kitsap County Sheriff's Office Jail Inmate Welfare Fund the following percentage of Net Sales. Net Sales "Net Sales" means all gross sales income derived from the sale of commissionable commissary services and products to Jail inmates, and includes internet sales, and all advertising revenues specific to the internet web page, and lobby kiosks. Not included in commissionable sales are items such as U.S. postage stamps, stamped envelopes, indigent kits, admission kits, OTC medications, and sales tax.**

% Commission

- 2. Welfare Pack price \$ _____/per pack
- 3. Lead time for start-up _____ days.
- 4. All other costs to the County, if applicable:

Offeror's Signature (Authorized Representative):

Print Name and Title of Signer:

Dated this _____day of _____20____