

**Attachment B
Proposal Price Form**

Drugs to be Tested	Method: _____		Method: _____		Method: _____		Method: _____	
	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test
13-Panel: Alcohol/ Amphetamine/ Methamphetamine/ Benzodiazepine/ Barbituates/ Cocaine/MDMA/ Methodone/ Methaqualone/ Opiates/PCP/ Propoxyphene/ THC								
10-Panel: Amphetamine/ Methamphetamine/ Barbiturate/ Benzodiazepine/ Cocaine/Phencycli dine/Methodone/ Opiates/THC/Propo xyphene								
8-Panel: Amphetamine/ Methamphetamine/ Benzodiazepine/ Cocaine/MDMA/ Methodone/ Opiates/THC								
6-Panel: Amphetamine/ Methamphetamine/ Benzodiazepine/ Cocaine/ Opiates/THC								
Other _____ _____ _____ _____ _____								

Oral / Fluid Testing

Drugs to be Tested	Method: _____		Method: _____		Method: _____		Method: _____	
	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test
13-Panel:								
10-Panel:								
8-Panel:								
6-Panel:								
Other _____ _____ _____ _____ _____								

Additional or Exceptional Testing

Drugs to be Tested	Method: _____		Method: _____		Method: _____		Method: _____	
	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test
13-Panel								
10-Panel								
8-Panel								
6-Panel								
Other _____ _____ _____ _____ _____								

Drug Court Testing

Drugs to be Tested	Method: _____		Method: _____		Method: _____		Method: _____	
	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test	Cost per test	Confirmation Cost per test
13-Panel:								
10-Panel:								
8-Panel:								
6-Panel:								
Other _____ _____ _____ _____ _____								

