

**Attachment E**

**FEE PROPOSAL**

The State assumes that it will receive bids for a variety of transmission modes (e.g., satellite, fiber, MPEG, uncompressed video, etc.). The list of potential costs set forth below is not intended to be exhaustive. Please make sure to include all potential costs that could be incurred by the state if it enters into a contract for your services. If the form below does not leave enough space to describe the costs and services, please include a separate form that clearly references the questions in Table 1 below, and/or addresses other potential costs not addressed below.

TABLE 1:

1.	Cost to arrange switches at the Pac Bell Hub (including the actual switching cost)	\$	per event
2.	Transmission cost from SBC/Pacific Bell hub in San Francisco, CA to Service Provider's facilities. (if applicable)	\$	per hour
3.	Transmission cost from Service Provider's facilities to Echostar Communications' uplink site in Cheyenne, WY.	\$	per hour

4. Please note the specifics of minimum billing increments (i.e. 1 minutes, 5 minutes, 15 minutes etc. Please attach any additional description required to provide this information.

5. Please note any variable costs for transmission services for various levels of signal quality or types of signal (i.e. for an mpeg signal note the costs per hour at 4 meg, 6meg, 8 meg, 10 meg, and 12 meg levels of signal quality using the format shown in Table 1. For a satellite signal note the costs per hour for C-band, KU band, C and KU Band, encoded, unencoded etc.), using the format shown in Table 1. Please provide an attachment if the space below is not sufficient.

6. Please specify any cost variations based on time of day and/or day of week.

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7. Please provide any additional narrative required to describe cancellation charges.

Time prior to broadcast when cancellation occurs	Narrative	Cancellation penalty
1 hour		\$
6 hours		
1 day		
3 days		
1 week		
2 weeks		

8. Transmission Credit: When an interruption occurs, the Service Provider will provide the State with a Transmission Credit. The Transmission Credit could take the form of cost reimbursements, future transmission time, or some other form of compensation. Please specify the potential nature and value of such transmission credit. Please note the value of a credit based on the amount of time of the interruption. Please attach any additional information about transmission credits if necessary.

Number of minutes	Type of credit	Value of credit
1/2		
1		
2-5		
6-10		
11-15		
16-30		
30-45		
45-60+		

9. Please specify any other potential costs so that the State can effectively and fairly compare all vendors' bids.

10. Alternate Means of Transmission: As noted in Attachment C, Section A-5, if the State requests that the Service Provider provide an alternate means of transmission due to loss of or lack of transmission capacity, State shall reimburse the Service Provider the actual cost that the provider of the alternate means of transmission bills the Service Provider for such transmission, not including any markup from the Service Provider, and the Service Provider shall use its commercially reasonable efforts to provide the requested alternate means of transmission. The Service Provider shall obtain the State's written approval of the cost for the alternate means of transmission from the Project Manager prior to placing the order with the provider of the alternate means of transmission. Upon request, the Service Provider shall provide the State with a copy of the applicable invoice/bill. Please

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note agreement with these arrangements in your Fee Proposal, and add any additional information that you think is required.

11. Reimbursement: The State shall not consider reimbursement for costs not defined as allowable in this proposal, including but not limited to any administrative, operating, travel, meals, and lodging expenses incurred

12. Taxes: The State is exempt from federal excise taxes and no payment will be made for any taxes levied on the Contractor's or any Subcontractor's employees' wages. The State will pay for any applicable State of California or local sales or use taxes on the services rendered or equipment or parts supplied pursuant to this Agreement.

END OF ATTACHMENT