**REQUEST FOR PROPOSAL**
**LAB TESTING SERVICES-23**

| EVALUATION CRITERIA:<br>RESPONDENT NAME: | Financial Proposal, Exhibit C | Qualifications and Experience, Exhibit F | Respondent's past relationship with the University, Exhibit F | References, Exhibit F | Weighted Total | |
|---|---|---|---|---|---|---|
| **WEIGHT** | **35%** | **45%** | **10%** | **10%** | **100%** | |
| Clinical Pathology Laboratories | 8.33 | 7.67 | 9.67 | 7.67 | **8.10** | **Awarded** |
| Quest Diagnostics | 6.33 | 8.33 | 1.33 | 7.67 | **6.87** | |
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