

REQUEST FOR PROPOSALS
ATHLETIC MEDICAL BILLING -21

EVALUATION CRITERIA: RESPONDENT NAME:	Financial Proposal (Exhibit C)	Responses to Proposal Questionnaire (Exhibit F)	Experience (as referenced in Exhibit G)	Evaluation of Qualifications	Other Proposed Ancillary Services (as listed in Exhibit C)	Weighted Total
WEIGHT	40%	30%	10%	10%	10%	100%
Vivature	6.20000	7.40000	7.20000	7.20000	5.20000	6.66000

AWARDED