

**ATTACHMENT 6  
SUBMISSION FORM FOR PRICE PROPOSAL  
(FULL CONFERENCE SERVICES)**

A. Proposer’s name.

Firm (Legal Name):	
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B. Propose Meeting and Function Room Rates. Please note the maximum Meeting Room Rental as indicated on the RFP in Section 2.

Based Upon Percentage of Block	Inclusive Meeting Room Rental Rates
If the total sleeping rooms occupied equals 80-100% of the total sleeping rooms blocked.	Complimentary
If the total sleeping rooms occupied equals 70–79% of the total sleeping rooms blocked.	
If the total sleeping rooms occupied equals 60–69% of the total sleeping rooms blocked.	
If the total sleeping rooms occupied equals 59% or less of the total sleeping rooms blocked.	

C. Propose Termination Fee and corresponding Effective Deadline Date. Please note the maximum Termination Fee as indicated on the RFP in Section 2.

Item Number	Termination	Effective Deadline Date	Inclusive Termination Fees
A.	Effective on or before:		
B.	Effective on or before:		
C.	Effective on or before:		
D.	Effective on or after:		

D. Check either “yes” or “no” beside each of the items listed below. If applicable, propose the rate(s) for tax and/or surcharge below:

Item Number	Type	Yes	No	Percentage Rate	Dollar Amount
a.	Hotel/motel transient occupancy tax waiver (exemption certificate for state agencies)				
b.	Occupancy Tax rate:				
c.	Tourism, State Tax or Surcharge				
d.	Tourism, State Tax or Surcharge				

E. Propose Sleeping Rooms schedule, including sleeping room unit rate(s), tax and/or surcharge, if applicable, extended price(s), and total. Propose schedule based upon the Allowable Unit Price(s) Reimbursable by the State, as indicated on the RFP in Section 2:

**San Diego:**

Date	Proposed Date(s)	Type of Sleeping Room	Estimated Number of Sleeping Rooms	Sleeping Room Unit Rate
Date 1		Single/Double Occupancy	10	
Date 2		Single/Double Occupancy	125	
Date 3		Single/Double Occupancy	125	
Date 4		Single/ Double Occupancy	2	
			262	

**San Francisco:**

Date	Proposed Date(s)	Type of Sleeping Room	Estimated Number of Sleeping Rooms	Sleeping Room Unit Rate
Date 1		Single/Double Occupancy	0	
Date 2		Single/Double Occupancy	105	
Date 3		Single/Double Occupancy	105	
Date 4		Single/ Double Occupancy	0	
			210	

F. Propose Food and Beverage schedule, including food and beverage rate(s) inclusive of any service charges, gratuity, and/or sales tax. Propose schedule based upon the Allowable Maximum Unit Price(s) Reimbursable by the State, set forth in on the RFP in Section 2.

Type of Group Meal	Estimated Number of Meals	Inclusive Price per person
<b>Date 2</b>		
PM Break	150	
<b>Date 3</b>		
Breakfast Buffet	150	
AM Break	150	
Lunch	150	
PM Break	150	
<b>Date 4</b>		
Breakfast Buffet	150	
AM Break	150	

