

Contract Award #18PSX0170					
Exhibit B - Price Schedule:					
Contractor Name:					
Delivery:					
Payment terms:					
	Description				
	Hologic Panther System for the Department of Public Health				
	Contractor please list the information below:				
	State of CT filename:				
	Catalog number:				
	Dated:				
	Percentage % off:				
	Customer Service #:				