

CONTRACTOR NAME:		
DELIVERY:		PROMPT PAYMENT TERMS:

ITEM #	DESCRIPTION OF COMMODITY AND/OR SERVICES	UNIT OF MEASURE	TOTAL PRICE
<b>GROTON DATA CENTER</b>			
1.	Semi-Annual Cleaning	Per Occurrence	\$ _____
2.	Annual Cleaning	Per Occurrence	\$ _____
3.	Emergency Services (as stated in Exhibit A, section 15 "Emergency Services")	Per hour per person	\$ _____
<b>HARTFORD DATA ROOM</b>			
4.	Semi-Annual Cleaning	Per Occurrence	\$ _____
5.	Annual Cleaning	Per Occurrence	\$ _____
6.	Emergency Services (as stated in Exhibit A, section 15 "Emergency Services")	Per hour per person	\$ _____