



**New Hampshire Department of Health and Human Services
Burial & Cremation Services**

Line	Bidder's Cost Bid*	
1	Service Costs – Burial (All Inclusive): Labor Cost: \$_____per occurrence X 3	\$ _____
2	Service Costs – Cremation (All Inclusive): Labor Cost: \$_____per occurrence X 3	\$ _____
3	Cost Bid (All Figures Added): \$ _____	

APPENDIX B – Bid Submittal and Cost Bid Sheet

* “All Inclusive” includes all travel and mileage. Normal business hours are from 7:00 am to 3:00 PM, Monday through Friday, excluding holidays for State Employees (<https://apps.das.nh.gov/EmployeePortal/comp-savings/state-holidays/>).

Authorized Signor’s Name Printed: _____

Authorized Signor’s Signature: _____