



DOT/NonDOT ANNUAL Random Program Pricing Quote

Average Number of Employees	Price
1	\$97.75
2	\$120.50
3	\$143.25
4	\$166.00
5	\$188.75
6	\$211.50
7	\$234.25
8	\$257.00
9	\$279.75
10	\$302.50
11	\$325.25
12	\$348.00
13	\$370.75
14	\$393.50
15	\$416.25
16	\$439.00

Over 16 employees, call to discuss pricing.

Equation to determine price is
.25 x number of employees x \$65
+
.10 x number of employees x \$65
+
\$75 fee
=
Total ANNUAL fee due

I acknowledge that all **DOT/NonDOT drug and alcohol tests that are NOT RANDOM** are a separate **\$65.00** fee.

I acknowledge that all **DOT Physicals** are a separate **\$65.00** fee.

Signature: _____ Date: _____