## **NVLAP Assessor Quote Form**

(Microsoft Excel Worksheet)

Date of Quote:		
Company Name:		
Assessor Name:		
Laboratory Name:		
NVLAP Lab Code:		
	Quantity (hours or miles)	Amount (\$)
1. On-Site Assessment (hours)		
Preparation/document review	0.00	
Travel	0.00	
On-site visit	0.00	
Post-assessment review of nonconformity		
responses	0.00	
Subtotal (# hrs. X \$86.50/hr.)	0.00	\$0.00
2. Travel Expenses		
Destination:		
Airfare		\$0.00
Car Rental		\$0.00
Taxi/Limo		\$0.00
Parking/Tolls		\$0.00
Mileage (# miles X \$0.54/mi.) *	0.00	\$0.00
Subtotal		\$0.00
3. Per Diem Expenses *		
Lodging		\$0.00
Meals and Incidentals		\$0.00
Subtotal		\$0.00
4. Miscellaneous Expenses		
Phone, Internet, Postage		\$0.00
Other:		\$0.00
Subtotal		\$0.00
TOTAL AMOUNT OF QUOTE **		\$0.00

APPROVAL (for NVLAP use only)	
Name of Program Manager:	-
Program Manager Phone Number:	 -
Date Approved:	

\* Visit <http://www.gsa.gov> for current lodging, per diem, and POV mileage reimbursement rates. \*\* Acceptance of this quote is not an authorization to perform work.