

**CIT/DCSS
SERVICE LEVEL AGREEMENT COST SHEET
Appendix C**

Application Name: _____
 Billing Period: _____
 CIT Account Number: _____
 CIT/DCSS SLA Number: _____

Description	Server/Item Name	URL	Quantity	Unit Cost	Monthly Cost	Number of Months	One-Time Charge	Total Cost	AIS Rate Codes
					\$0.00			\$0.00	
TOTAL ESTIMATED FY08 COST								\$0.00	