## **EVALUATION SHEET**

## **RFP# 1466V**

## INSURANCE: VOLUNTARY (EMPLOYEE PURCHASED) -- VISION

**EVALUATOR'S SIGNATURE: EVALUATOR'S SIGNATURE: EVALUATOR'S SIGNATURE: EVALUATOR'S SIGNATURE: EVALUATOR'S SIGNATURE EVALUATOR'S SIGNATURE:** 

The Evaluation Committee's recommendation is: Davis Vision

Atternate Plan

**Awarded by Commissioners' Court** on 07/05/22