

Fort Bend County Specification Download Acknowledgment

**Invitation for Bid
Term Contract for Purchase of Medical Supplies
BID 18-003**

VENDORS MUST IMMEDIATELY RETURN THIS FORM VIA EMAIL TO NORMA WEAVER AT:
norma.weaver@fortbendcountytx.gov

- Vendor Responsibilities:**
- Vendors are responsible to download and complete any addendums. (Addendums will be posted on the Fort Bend County Website no later than 48 hours prior to Bid Opening)
 - Vendors will submit responses in accordance with requirements stated on cover of document.
 - Vendors may not submit responses via email or fax.

Henry Schen Inc

Legal Name of Contracting Company

Andy Goudy

Contact Person

PO Box 3227, Reno, SC 29063

Complete Mailing Address

800 845 3550

Telephone Number

800 533 4793

Facsimile Number

Andy.Goudy@henry-schen.com

Email Address

AG

Signature

8/21/19

Date

**Fort Bend County, Texas
Invitation for Bid**



**Term Contract for Purchase of Medical Supplies
BID 18-003**

SUBMIT BIDS TO:

Fort Bend County
Purchasing Department
Travis Annex
301 Jackson, Suite 201
Richmond, TX 77469

****NOTE:**

All correspondence must include the term "Purchasing Department" in the address to assist in proper delivery.

SUBMIT NO LATER THAN:

Tuesday, August 22, 2017
2:00 PM (Central)

LABEL ENVELOPE:

BID 18-003
MEDICAL SUPPLIES

ALL BIDS MUST BE RECEIVED IN AND TIME/DATE STAMPED BY THE PURCHASING OFFICE OF FORT BEND COUNTY BEFORE THE SPECIFIED TIME/DATE STATED ABOVE.

BIDS RECEIVED AS REQUIRED WILL THEN BE OPENED AND PUBLICLY READ.

BIDS RECEIVED AFTER THE SPECIFIED TIME, WILL BE RETURNED UNOPENED.

Results will not be given by phone. Results will be provided to bidder in writing after the Commissioners Court awards.

Fort Bend County is always conscious and extremely appreciative of your effort in the preparation of this bid.

Requests for information must be in writing and directed to:

Cheryl Krejci, CPPB
Senior Buyer
cheryl.krejci@fortbendcountytexas.gov

Prepared: 7/27/17
Issued: 8/07/17

Vendor Information

Henry Schein Inc
Legal Name of Contracting Company

113 13 6595
Federal ID Number (Company or Corporation) or Social Security Number (Individual)

800 845 3550 Telephone Number 800 533 4793 Facsimile Number

PO Box 3227
Complete Mailing Address (for Correspondence)

Irmo, SC 29063
City, State and Zip Code

Dept CH 10241
Complete Remittance Address (if different from above)

PAINTNE, IL 60055-0241
City, State and Zip Code


Andy Goody General Manager
Authorized Representative and Title (printed)

Andy.Goody@henryschein.com
Authorized Representative's Email Address

AGP by Signature of Authorized Representative 8/21/17 Date

1.0 GENERAL REQUIREMENTS:

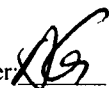
- 1.1 Read this entire document carefully. Follow all instructions. You are responsible for fulfilling all requirements and specifications. Be sure you understand them.
- 1.2 General Requirements apply to all advertised bids, however, these may be superseded, whole or in part, by the scope, special requirements, specifications, special specifications or other data contained herein.
- 1.3 Governing Law: Bidder is advised that these requirements shall be fully governed by the laws of the State of Texas and that Fort Bend County may request and rely on advice, decisions and opinions of the Attorney General of Texas and the County Attorney concerning any portion of these requirements.
- 1.4 Bid Document Completion: Fill out, initial each page, SIGN CONTRACT SHEET, and return ONE (1) complete bid document and ONE (1) electronic Excel file, on CD or Flash Drive, of the Pricing Form, completed by the bidder, to the Fort Bend County Purchasing Department. An authorized representative of the bidder MUST sign the contract sheet. The bid document, copy of completed pricing form, and electronic file, as provided on County's website, must be in the same sealed envelope marked with the appropriate bid number and title. The contract will be binding only when signed by the County Judge of Fort Bend County and a purchase order authorizing the item(s) desired has been issued. The use of correction fluid is NOT acceptable and may result in the disqualification of bid. If an error is made, vendor MUST draw a line through error and initial each change. All response, typed or written information, must be clear and legible.
- 1.5 Bid Returns: Bidders must return entire completed bid document to the Fort Bend County Purchasing Department at 301 Jackson, Suite 201, Richmond, Texas no later than 2:00 P.M. on the date specified. Late bids will not be accepted. Bids must be submitted in a sealed envelope, addressed as follows: Fort Bend County Purchasing Agent, Travis Annex, 301 Jackson, Suite 201, Richmond, Texas 77469.
- 1.6 Governing Document: In the event of any conflict between the terms and provisions of these requirements and the specifications, the specifications shall govern. In the event of any conflict of interpretation of any part of this overall document, Fort Bend County's interpretation shall govern.
- 1.7 Addenda: No interpretation of the meaning of the drawings, specifications or other bid documents will be made to any bidder orally. All requests for such interpretations must be made in writing addressed to Ms. Cheryl Krejci, Senior Buyer, 301 Jackson, Suite 201, Richmond, Texas 77469, e-mail: cheryl.krejci@fortbendcountytexas.gov. Any and all interpretations and any supplemental instructions will be in the form of written addenda to the contract documents which will be posted on Fort Bend County's website. Addenda will **ONLY** be issued by the Fort Bend County Purchasing Agent. It is the sole

Initials of Bidder: 

responsibility of each bidder to insure receipt of any and all addenda. All addenda issued will become part of the contract documents. Bidders must sign and include addendum in the returned bid package. Deadline for submission of questions and/or clarification is **Tuesday, August 15, 2017 at 9:00 a.m. (CST)**. Requests received after the deadline will not be responded to due to the time constraints of this bid process.

- 1.8 **Hold Harmless Agreement:** Contractor shall indemnify and hold Fort Bend County harmless from all claims for personal injury, death and/or property damage arising from any cause whatsoever, resulting directly or indirectly from contractor's performance. Contractor shall procure and maintain, with respect to the subject matter of this bid, appropriate insurance coverage including, as a minimum, public liability and property damage with adequate limits to cover contractor's liability as may arise directly or indirectly from work performed under terms of this bid. Certification of such coverage must be provided to the County upon request.
- 1.9 **Waiver of Subrogation:** Bidder and bidder's insurance carrier waive any and all rights whatsoever with regard to subrogation against Fort Bend County as an indirect party to any suit arising out of personal or property damages resulting from bidder's performance under this agreement.
- 1.10 **Severability:** If any section, subsection, paragraph, sentence, clause, phrase or word of these requirements or the specifications shall be held invalid, such holding shall not affect the remaining portions of these requirements and the specifications and it is hereby declared that such remaining portions would have been included in these requirements and the specifications as though the invalid portion had been omitted.
- 1.11 **Bonds:** If this bid requires submission of bid guarantee and performance bond, there will be a separate page explaining those requirements. Bids submitted without the required bid bond or cashier's checks are not acceptable. Bond/s or cashier's check must be complete with all required signatures.
- 1.12 **Taxes:** Fort Bend County is exempt from all federal excise, state and local taxes unless otherwise stated in this document. Fort Bend County claims exemption from all sales and/or use taxes under Chapter 20, Title 122a, Vernon's Texas Civil Statutes, as amended. Texas Limited Sales Tax Exemption Certificates will be furnished upon written request to the Fort Bend County Purchasing Department.
- 1.13 **Fiscal Funding:** A multi-year lease or lease/purchase arrangement (if requested by the specifications), or any contract continuing as a result of an extension option, must include fiscal funding out. If, for any reason, funds are not appropriated to continue the lease or contract, said lease or contract shall become null and void. After expiration of the lease, leased equipment shall be removed by the bidder from the using department without penalty of any kind or form to Fort Bend County. All charges and physical activity related to delivery, installation, removal and redelivery shall be the responsibility of the bidder.


Initials of Bidder



- 1.14 Pricing: Prices for all goods and/or services shall be firm for the duration of this contract and shall be stated in the bid spreadsheet. Prices shall be all inclusive. No price changes, additions, or subsequent qualifications will be honored during the course of the contract. All prices must be written in ink or typewritten. Pricing on all transportation, freight, and other charges are to be prepaid by the contractor and included in the bid prices. If there are any additional charges of any kind, other than those mentioned above, specified or unspecified, bidder MUST indicate the items required and attendant costs or forfeit the right to payment for such items.
- 1.15 Silence of Specifications: The apparent silence of specifications as to any detail, or the apparent omission from it of a detailed description concerning any point, shall be regarded as meaning that only the best commercial practice is to prevail and that only material and workmanship of the finest quality are to be used. All interpretations of specifications shall be made on the basis of this statement. The items furnished under this contract shall be new, unused of the latest product in production to commercial trade and shall be of the highest quality as to materials used and workmanship. Manufacturer furnishing these items shall be experienced in design and construction of such items and shall be an established supplier of the item bid.
- 1.16 Supplemental Materials: Bidders are responsible for including all pertinent product data in the returned bid package. Literature, brochures, data sheets, specification information, completed forms requested as part of the bid package and any other facts which may affect the evaluation and subsequent contract award should be included. Materials such as legal documents and contractual agreements, which the bidder wishes to include as a condition of the bid, must also be in the returned bid package. Failure to include all necessary and proper supplemental materials may be cause to reject the entire bid.
- 1.17 Material Safety Data Sheets: Under the "Hazardous Communication Act", commonly known as the "Texas Right To Know Act", a bidder must provide to County and using departments, with each delivery, material safety data sheets, which are, applicable to hazardous substances defined in the Act. Bidders are obligated to maintain a current, updated file in the Fort Bend County Purchasing Department. Failure of the bidder to maintain such a file will be cause to reject any bid applying thereto.
- 1.18 Name Brands: Specifications may reference name brands and model numbers. It is not the intent of Fort Bend County to restrict these bids in such cases, but to establish a desired quality level of merchandise or to meet a pre-established standard due to like existing items. Bidders may offer items of equal stature and the burden of proof of such stature rests with them. Fort Bend County shall act as sole judge in determining equality and acceptability of products offered.
- 1.19 Color Selection: Determination of colors of materials is a right reserved by the using department unless otherwise specified in the bid. Unspecified colors shall be quoted as standard colors, not colors, which require up charges or special handling.

Unspecified fabrics or vinyl should be construed as medium grade. If bidder fails to get color/material approvals prior to delivery of merchandise, the using department may refuse to accept the items and demand correct shipment without penalty, subject to other legal remedies.

- 1.20 Evaluation: Evaluation shall be used as a determinant as to which bid items or services are the most efficient and/or most economical for the County. It shall be based on all factors, which have a bearing on price and performance of the items in the user environment. All bids are subject to tabulation by the Fort Bend County Purchasing Department and recommendation to Fort Bend County Commissioners Court. Compliance with all bid requirements, delivery and needs of the using department are considerations in evaluating bids. Pricing is NOT the only criteria for making a recommendation. The Fort Bend County Purchasing Department reserves the right to contact any bidder, at any time, to clarify, verify or request information with regard to any bid.
- 1.21 Inspections: Fort Bend County reserves the right to inspect any item(s) or service location for compliance with specifications and requirements and needs of the using department. If a bidder cannot furnish a sample of a bid item, where applicable, for review, or fails to satisfactorily show an ability to perform, the County can reject the bid as inadequate.
- 1.22 Testing: Fort Bend County reserves the right to test equipment, supplies, material and goods bid for quality, compliance with specifications and ability to meet the needs of the user. Demonstration units must be available for review. Should the goods or services fail to meet requirements and/or be unavailable for evaluation, the bid is subject to rejection.
- 1.23 Disqualification of Bidder: Upon signing this bid document, a bidder offering to sell supplies, materials, services, or equipment to Fort Bend County certifies that the bidder has not violated the antitrust laws of this state codified in section 15.01, et seq., Business & Commerce Code, or the federal antitrust laws, and has not communicated directly or indirectly the bid made to any competitor or any other person engaged in such line of business. Any or all bids may be rejected if the County believes that collusion exists among the bidders. Bids in which the prices are obviously unbalanced may be rejected. If multiple bids are submitted by a bidder and after the bids are opened, one of the bids is withdrawn, the result will be that all of the bids submitted by that bidder will be withdrawn; however, nothing herein prohibits a vendor from submitting multiple bids for different products or services.
- 1.24 Awards: Fort Bend County reserves the right to award this contract on the basis of lowest and best bid in accordance with the laws of the State of Texas, to waive any formality or irregularity, to make awards to more than one bidder, to reject any or all bids. In the event the lowest dollar bidder meeting specifications is not awarded a contract, the bidder may appear before the Commissioners Court and present evidence concerning his responsibility. An award is final only upon formal

Initials of Bidder: 

execution by the Fort Bend County Commissioners Court or the Fort Bend County Purchasing Agent. Fort Bend County reserves the right to withdraw any award until execution by the proper authority.

- 1.25 Assignment: The successful vendor may not assign, sell or otherwise transfer this contract without written permission of Fort Bend County Commissioners Court.
- 1.26 Term Contracts: If the contract is intended to cover a specific time period, said time will be given in the specifications under scope.
- 1.27 Maintenance: Maintenance required for equipment bid should be available in Fort Bend County by a manufacturer authorized maintenance facility. Costs for this service shall be shown on the bid sheet as requested or on a separate sheet, as required. If Fort Bend County opts to include maintenance, it shall be so stated in the purchase order and said cost will be included. Service will commence only upon expiration of applicable warranties and should be priced accordingly.
- 1.28 Contract Obligation: Fort Bend County Commissioners Court must award the contract and the County Judge or other person authorized by the Fort Bend County Commissioners Court must sign the contract before it becomes binding on Fort Bend County or the bidders. Department heads are not authorized to sign agreements for Fort Bend County. Binding agreements shall remain in effect until all products and/or services covered by this purchase have been satisfactorily delivered and accepted.
- 1.29 Title Transfer: Title and Risk of Loss of goods shall not pass to Fort Bend County until Fort Bend County actually receives and takes possession of the goods at the point or points of delivery. Receiving times may vary with the using department. Generally, deliveries may be made between 8:30 a.m. and 4:00 p.m., Monday through Friday. Bidders are advised to consult the using department for instructions. The place of delivery shall be shown under the "Special Requirement" section of this bid document and/or on the Purchase Order as a "Ship To:" address.
- 1.30 Purchase Order and Delivery: The successful bidder shall not deliver products or provide services without a Fort Bend County Purchase Order, signed by an authorized agent of the Fort Bend County Purchasing Department. The fastest, most reasonable delivery time shall be indicated by the bidder in the proper place on the bid sheet. Any special information concerning delivery should also be included, on a separate sheet, if necessary. All items shall be shipped F.O.B. inside delivery unless otherwise stated in the specifications. This shall be understood to include bringing merchandise to the appropriate room or place designated by the using department. Every tender or delivery of goods must fully comply with all provisions of these requirements and the specifications including time, delivery and quality. Nonconformance shall constitute a breach, which must be rectified prior to expiration of the time for performance. Failure to rectify within the performance period will be considered cause to reject future deliveries and cancellation of the

Initials of Bidder



contract by Fort Bend County without prejudice to other remedies provided by law. Where delivery times are critical, Fort Bend County reserves the right to award accordingly.

- 1.31 Contract Extension: Extensions may be made only by written agreement between Fort Bend County and the bidder. Any price escalations are limited to those stated by the bidder in the original bid.
- 1.32 Termination: Fort Bend County reserves the right to terminate the contract for default if Seller breaches any of the terms therein, including warranties of bidder or if the bidder becomes insolvent or commits acts of bankruptcy. Such right of termination is in addition to and not in lieu of any other remedies, which Fort Bend County may have in law or equity. Default may be construed as, but not limited to, failure to deliver the proper goods and/or services within the proper amount of time, and/or to properly perform any and all services required to Fort Bend County's satisfaction and/or to meet all other obligations and requirements. Contracts may be terminated without cause upon thirty (30) days written notice to either party unless otherwise specified.
- 1.33 Recycled Materials: Fort Bend County encourages the use of products made of recycled materials and shall give preference in purchasing to products made of recycled materials if the products meet applicable specifications as to quantity and quality. Fort Bend County will be the sole judge in determining product preference application.
- 1.34 Interlocal Participation: Additional governmental entities may purchase from this bid. Vendor agrees to accept purchase orders from those participating entities and to invoice each entity separately.
- 1.35 Escalation Clause: Successful bidder may apply for a price increase to the Fort Bend County Commissioners Court. Price increase will be the amount increased to the vendor from his supplier. Written documentation of the increase from vendor's supplier must be provided to the Purchasing Agent. No application for a price increase may be submitted within the first four (4) months of this contract. Increases of more than 25% of the original bid price will not be considered.
- 1.36 Modifications: This instrument contains the entire Contract between the parties relating to the rights herein granted and obligations herein assumed. Any oral or written representations or modifications concerning this instrument shall be of no force and effect excepting a subsequent written modification signed by both parties hereto.

2.0 TERMS & CONDITIONS:

- 2.1 Seller to Package Goods: Seller will package goods in accordance with good commercial practice. Each delivery container shall be clearly and permanently

Initials of Bidder

AG


marked as follows (a) Seller's name and address; (b) Consignee's name, address and purchase order number and the bid number if applicable; (c) Container number and total number of containers (e.g. box 1 of 4 boxes); and (d) the number of the container bearing the packing slip. Seller shall bear cost of packaging unless otherwise provided. Goods shall be suitably packed to secure lowest transportation costs and to conform to requirements of common carriers and any applicable specifications. Fort Bend County's count or weight shall be final and conclusive on shipments not accompanied by packing list.

- 2.2 Shipment Under Reservation Prohibited: Seller is not authorized to ship goods under reservation and no tender of a bill of lading will operate as a tender of goods.
- 2.3 Title and Risk of Loss: The title and risk of loss of the goods shall not pass to the County until a County employee actually receives and takes possession of the goods at the point or points of delivery.
- 2.4 Delivery Terms: F.O.B. Destination Freight Prepaid, Inside Delivery, unless delivery terms are specified otherwise on Purchase Order.
- 2.5 No Replacement of Defective Tender: Every tender or delivery of goods must fully comply with all provisions of the Purchase Order as to time of delivery, quality and the like. If a tender is made which does not fully conform, this shall constitute a breach and Seller shall not have the right to substitute a conforming tender.
- 2.6 Place of Delivery: The place of delivery shall be that set forth in the block of the purchase order entitled "Ship To". Any change thereto shall be effective by modification as provided for in Clause number 2.20 "Modifications", hereof. The terms of this agreement are "no arrival, no sale", at the discretion of Fort Bend County.
- 2.7 Invoices and Payments:
 - 2.7.1 Seller shall submit separate invoices, in duplicate. Invoices shall indicate the purchase order number and the bid number if applicable. Invoices shall be itemized and transportation charges, if any, shall be listed separately. A copy of the bill of lading, and the freight waybill when applicable should be attached to the invoice.
 - 2.7.2 Fort Bend County's obligation is payable only and solely from funds available for the purpose of this purchase. Lack of funds shall render the order null and void to the extent funds are not available and any delivered but unpaid goods will be returned to Seller by the county.
 - 2.7.3 Do not include Federal Excise, State, or City Sales Tax. Fort Bend County is a tax-exempt governmental entity.

Initials of Bidder:




- 2.8 **Gratuities:** Fort Bend County may, by written notice to the Seller, cancel any order without liability, if it is determined by the County that gratuities, in the form of entertainment, gifts, or otherwise were offered or given by the Seller, or any agent or representative of the Seller to any officer or employee of Fort Bend County with a view toward securing an order. In the event an order is canceled by the County pursuant to this provision, the County shall be entitled, in addition to any other rights and remedies, to recover or withhold the amount of the cost incurred by Seller in providing such gratuities.
- 2.9 **Special Tools and Test Equipment:** If the price stated on the face of an order includes the cost of any special tooling or special test equipment fabricated or required by Seller for the purpose of filing this order, such special tooling equipment and any process sheets related thereto shall become the property of the County and to the extent feasible shall be identified by the Seller as such.
- 2.10 **Warranty/Price:**
- 2.10.1 The price to be paid by the County shall be that contained in Seller's quote or bid which Seller warrants to be no higher than Seller's current prices on orders by others for products of the kind and specification covered by an order for similar quantities under similar or like conditions and methods of purchase. In the event Seller breaches this warranty the prices of the items shall be reduced to the Seller's current prices on orders by others. Fort Bend County may cancel this contract without liability.
- 2.10.2 The Seller warrants that no person or selling agency has been employed or retained to solicit or secure any County order based upon any agreement or understanding for commission, percentage, brokerage, or contingent fee excepting bona fide employees of bona fide established commercial or selling agencies maintained by the Seller for the purpose of securing business. A breach or violation of this warranty gives the County the right, in addition to any other right or rights, to cancel this contract without liability.
- 2.11 **Warranty Product:** Seller shall not limit or exclude any implied warranties and any attempt to do so shall render an order voidable at the option of the County. Seller warrants that the goods furnished will conform to the specifications, drawings, and description listed in the bid invitation and purchase order as applicable, and to the sample(s) furnished by Seller if any. In the event of a conflict between the specifications, drawings, and descriptions, the specifications shall govern.
- 2.12 **Safety Warranty:** Seller warrants that the product sold to Fort Bend County shall conform to the standards promulgated by the U.S. Department of Labor under the Occupational Safety and Health Act of 1970. In the event the product does not conform to OSHA standards, the County may return the product for correction or replacement at the Seller's expense. In the event Seller fails to make the appropriate

Initials of Bidder: 

correction within 10 days, correction made by the County will be at Seller's expense.

- 2.13 **No Warranty by Fort Bend County Against Infringements:** As part of a contract for sale Seller agrees to ascertain whether goods manufactured in accordance with the specifications will give rise to the rightful claim of any third person by way of infringement. Fort Bend County makes no warranty that the production of goods according to the specification will not give rise to such a claim and in no event shall Fort Bend County be liable to Seller for indemnification in the event the Seller is sued on the grounds of infringement or the like. If Seller is of the opinion that an infringement will result, he will notify Fort Bend County to this effect in writing within two days after the receiving Purchase Order. If the County does not receive notice and is subsequently held liable for the infringement, Seller will defend and save the County harmless. If Seller in good faith ascertains that production of the goods in accordance with the specifications will result in infringement, this contract shall be null and void except that the County will pay Seller the reasonable cost of his search as to infringements.
- 2.14 **Right of Inspection:** The County shall have the right to inspect the goods at delivery before accepting them.
- 2.15 **Cancellation:** Fort Bend County shall have the right to cancel for default all or any part of the undelivered portion of an order if Seller breaches any of the terms hereof including warranties of Seller, or if the Seller becomes insolvent or files for protection under the bankruptcy laws. Such rights of cancellation are in addition to and not in lieu of any other remedies, which Fort Bend County may have in law or equity.
- 2.16 **Termination:** The performance of work under a Purchase Order may be terminated in whole or in part by the County in accordance with this provision. Termination of work there under shall be effected by the delivery to the Seller of a "Notice of Termination" specifying the extent to which performance of work under the order is terminated and the date upon which such termination becomes effective. Such right of termination is in addition to and not in lieu of rights of Fort Bend County set forth in Clause 15 herein.
- 2.17 **Force Majeure:** Force Majeure means a delay encountered by a party in the performance of its obligations under this Agreement, which is caused by an event beyond the reasonable control of that party. Without limiting the generality of the foregoing, "Force Majeure" shall include but not be restricted to the following types of events: acts of God or public enemy; acts of governmental or regulatory authorities; fires, floods, epidemics or serious accidents; unusually severe weather conditions; strikes, lockouts, or other labor disputes; and defaults by subcontractors.

In the event of a Force Majeure, the affected party shall not be deemed to have violated its obligations under this Agreement, and the time for performance of any obligations of that party shall be extended by a period of time necessary to overcome

Initials of Bidder: 

the effects of the Force Majeure, provided that the foregoing shall not prevent this Agreement from terminating in accordance with the termination provisions. If any event constituting a Force Majeure occurs, the affected party shall notify the other parties in writing, within twenty-four (24) hours, and disclose the estimated length of delay, and cause of the delay.

- 2.18 Assignment-Delegation: No right or interest in an order shall be assigned or delegation of any obligation made by Seller without the written permission of Fort Bend County. Any attempted assignment or delegation by Seller shall be wholly void and totally ineffective for all purposes unless made in conformity with this paragraph.
- 2.19 Waiver: No claim or right arising out of a breach of any contract can be discharged in whole or in part by a waiver or renunciation of the claim or right unless the waived or renunciation is supported by consideration and is in writing signed by the aggrieved party.
- 2.20 Modification: A Purchase Order can be modified or rescinded only by a writing signed by both of the parties or their duly authorized agents.
- 2.21 Parol Evidence: This writing is intended by the parties as a final expression of their agreement and is intended also as a complete and exclusive statement of the terms of this agreement. No course of prior dealings between the parties and no usage of the trade shall be relevant to supplement or explain any terms rendered under this agreement and shall not be relevant to determine the meaning of this agreement even though the accepting or acquiescing party has knowledge of the performance and opportunity for objection. Whenever a term defined by the Uniform Commercial Code is used in this agreement, the definition contained in the Code is to control.
- 2.22 Applicable Law: This agreement shall be governed by the Uniform Commercial Code. Whenever the term "Uniform Commercial Code" is used it shall be construed as meaning the Uniform Commercial Code as adopted in the State of Texas and in effect on the date of the purchase order.
- 2.23 Advertising: Seller shall not advertise or publish, without the County's prior consent the fact that Fort Bend County has entered into any contract, except to the extent necessary to comply with proper requests for information from an authorized representative of the federal, state, or local government.
- 2.24 Right to Assurance: Whenever the County in good faith has reason to question the other party's intent to perform. The County may demand that the other party give written assurance of his intent to perform. In the event that a demand is made and no assurance is given within five (5) days, the County may treat this failure as an anticipatory repudiation of the contract.
- 2.25 Venue: Both parties agree that venue for any litigation arising from this contract

Initials of Bidder: AGB

shall lie in Richmond, Fort Bend County, Texas.

- 2.26 **Prohibition Against Personal Interest in Contracts:** No officer or employee of the County shall have a financial interest, direct or indirect, in any contract with the County, or shall be financially interested, directly or indirectly, in the sale to the County of any land, materials, supplies, or service, except on behalf of the County as an officer or employee. Any willful violation of this section shall constitute malfeasance in office, and any officer or employee guilty thereof shall be subject to disciplinary action under applicable laws, statutes and codes of the State of Texas. Any violation of this section, with the knowledge, expressed or implied of the person or corporation contracting with the County shall render the contract involved voidable by the County Commissioners Court.

3.0 SCOPE:

It is the intent of Fort Bend County to contract with one (1) or more vendors to provide medical supplies for Fort Bend County as specified herein.

4.0 TERM OF CONTRACT:

The term of this contract is **1 October 2017 through 30 September 2018**, renewable annually for four (4) years (through 30 September 2022) under the terms and conditions if mutually agreeable to both parties. Either party for any reason may terminate this contract by giving thirty (30) days written notice of the intent to terminate.

5.0 BID DOCUMENT COMPLETION:

Fill out, initial each page, SIGN CONTRACT SHEET, and return ONE (1) complete bid document and ONE (1) electronic Excel file, on CD or Flash Drive, of the Pricing Form, completed by the bidder, to the Fort Bend County Purchasing Department in a sealed envelope and marked with the appropriate bid number. An authorized representative of the bidder MUST sign the contract sheet, and do not include the date. The bid document, printed copy of completed pricing form, and electronic file, as provided on County's website, must be in the same sealed envelope marked with the appropriate bid number and title. The contract will be binding only when signed by the County Judge of Fort Bend County and a purchase order authorizing the item(s) desired has been issued. The use of correction fluid is **NOT** acceptable and may result in the disqualification of bid. If an error is made, vendor **MUST** draw a line through error and initial each change. All response, typed or written information, must be clear and legible.

6.0 MODIFICATIONS:

This instrument contains the entire Contract between the parties relating to the rights herein granted and obligations herein assumed. Any oral or written representations or modifications concerning this instrument shall be of no force and effect excepting a subsequent written modification signed by both parties hereto.

Initials of Bidder: AG.

7.0 TEXAS ETHICS COMMISSION FORM 1295:

- 7.1 Effective January 1, 2016 all contracts executed by Commissioners Court, regardless of the dollar amount, will require completion of Form 1295 "Certificate of Interested Parties", per the new Government Code Statute §2252.908. All vendors submitting a response to a formal Bid, RFP, SOQ or any contracts, contract amendments, renewals or change orders are required to complete the Form 1295 online through the State of Texas Ethics Commission website. Please visit: https://www.ethics.state.tx.us/whatsnew/elf_info_form1295.htm.
- 7.2 On-line instructions:
- 7.2.1 Name of governmental entity is to read: Fort Bend County.
- 7.2.2 Identification number used by the governmental entity is: B18-003.
- 7.2.3 Description is the title of the solicitation: Medical Supplies.
- 7.3 Apparent low bidder(s) will be required to provide the Form 1295 within three (3) calendar days from notification. In the event the vendor does not provide the document in the stated time period the vendor's response will be marked as disqualified and the next low bidder will be contacted.

8.0 AWARD:

This contract will be awarded to the lowest and best bid per section. Vendors must bid on each item in section for bid to be considered.

9.0 SPECIFICATIONS AND PRICING:

Specifications are available on the bid pricing form in an Excel file downloadable from Fort Bend County's website. All bid pricing must be completed in the Excel Pricing Form file provided on the County's website. Vendors are to download the Excel Pricing Form from Fort Bend County's website, complete the pricing in the Excel file, and include an electronic copy of the completed Excel Pricing Form file on CD or Flash Drive in the same sealed envelope with their copy of bid response. Totals of sections are required to be completed by the vendor and not left blank. The electronic copy must be capable to be saved by the Fort Bend County Purchasing Department to access the vendor's pricing and transfer of bid prices to the County's Excel tabulation file. A printed copy of the completed pricing form is to be included with the bid response. Pricing for items must meet the specifications as stated herein and include FOB Fort Bend County and inside delivery to any location within Fort Bend County.

- 9.1 Quantities listed are estimates only. Fort Bend County does not guarantee the quantities stated will be purchased.
- 9.2 No minimum orders, by quantity or dollar amount.

Initials of Bidder:



- 9.3 Substitutes are only allowed as stated on the bid pricing form.
 - 9.3.1 If vendor is bidding a substitute for an item marked "Yes" on the bid pricing form, the vendor is to include the substituted item's complete description in the blanks provided below the specified item.
- 9.4 Vendor must bid on all items in section for bid to be considered.
- 9.5 Vendor must provide unit prices as stated on bid pricing form. Alterations to unit sizes are not permitted and are grounds for vendor disqualification.
- 9.6 Vendors are required to provide with their bid response documentation/certification from the manufactures stating the vendor is an approved reseller and/or distributor.
- 9.7 Vendors are not to provide bid prices with more than two (2) decimal places.

10.0 DELIVERY:

- 10.1 Delivery within seven (7) working days is required unless otherwise specified at time of order.
- 10.2 Items ordered from this bid must be delivered to Fort Bend County EMS, 4332 Highway 36 South, Rosenberg, TX 77471, unless otherwise stated on purchase order.

11.0 REQUIRED FORMS:

All vendors submitting are required to complete the attached and return with submission:

- 11.1 Pricing Form in electronic Excel File on CD or Flash Drive
- 11.2 Vendor Form
- 11.3 W9 Form
- 11.4 Tax Form/Debt/Residence Certification
- 11.5 Contractor Acknowledgement of Stormwater Management Program

Initials of Bidder: AG

CONTRACT SHEET
B18-003

THE STATE OF TEXAS
COUNTY OF FORT BEND

This memorandum of agreement made and entered into on the 10th day of October, 2017,
by and between Fort Bend County in the State of Texas (hereinafter designated County), acting herein by
County Judge Robert Hebert, by virtue of an order of Fort Bend County Commissioners Court, and
Henry Schriener (hereinafter designated Contractor).
(company name)

WITNESSETH:

The Contractor and the County agree that the bid and specifications for **Purchase of Medical Supplies** which are hereto attached and made a part hereof, together with this instrument and the Bond (when required) shall constitute the full agreement and contract between parties and for furnishing the items set out and described; the County agrees to pay the prices stipulated in the accepted bid.

It is further agreed that this contract shall not become binding or effective until signed by the parties hereto and a purchase order authorizing the items desired has been issued.

Executed at Richmond, Texas this 10 day of October, 2017.

By: Robert Hebert **Fort Bend County, Texas**
County Judge Robert E. Hebert

By: W.P. Fry **Signature of Contractor**

By: Andy Easley General Manager **Printed Name and Title**



COUNTY PURCHASING AGENT
Fort Bend County, Texas

Gilbert D. Jalomo, Jr., CPPB
County Purchasing Agent

(281) 341-8640
Fax (281) 341-8645

Vendor Information

Federal ID # or S.S #	113136595	Dun and Bradstreet #	012430880
Type of Business	<input checked="" type="checkbox"/> Corporation/LLC <input type="checkbox"/> Sole Proprietor/Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Tax Exempt Organization		
Legal Company Name	HENRY Schem Inc		Year Business was Established <u>1932</u>
Remittance Address	DPT CH 10241		
City/State/Zip	PALATINE, IL 60055-0241		
Physical Address	PO BOX 3227		
City/State/Zip	IRMO, SC 29063		
County	Fort Bend County		Other: <u>Richmond</u>
Phone/Fax Number	Phone: <u>800 845 3550</u>	Fax: <u>800 533 4793</u>	
Contact Person	<u>ANDY GOODY</u>		
E-mail	<u>ANDY.GOODY@HENRYSCHEM.COM</u>		
Special Notes			
The Company listed above is a (check all that apply and attached certificate).	<input type="checkbox"/> DBE-Disadvantaged Business Enterprise Certification # _____ <input type="checkbox"/> SBE-Small Business Enterprise Certification # _____ <input type="checkbox"/> HUB-Texas Historically Underutilized Business Certification # _____ <input type="checkbox"/> WBE-Women's Business Enterprise Certification # _____ <input type="checkbox"/> MBE-Minority Business Enterprise Certification # _____		
Company's gross annual receipts:	<input type="checkbox"/> < \$500,000 <input type="checkbox"/> \$500,000-\$4,999,999 <input type="checkbox"/> \$5,000,000-\$16,999,999 <input type="checkbox"/> \$17,000,000-\$22,399,999 <input checked="" type="checkbox"/> >\$22,400,000		
NAICs codes (Please enter all that apply).			

PLEASE NOTE: W-9 needs to be attached in order to be entered into our system

Request for Taxpayer Identification Number and Certification

**Give Form to the
 requester. Do not
 send to the IRS.**

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
HENRY SCHEIN INC

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only **one** of the following seven boxes:
 Individual/sole proprietor or single-member LLC
 C Corporation S Corporation Partnership Trust/estate
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____
Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.
 Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
 Exempt payee code (if any) _____
 Exemption from FATCA reporting code (if any) _____
(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)
135 DURYEA ROAD

6 City, state, and ZIP code
MELVILLE, NY 11747-7382

7 List account number(s) here (optional)

Requester's name and address (optional)

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I Instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

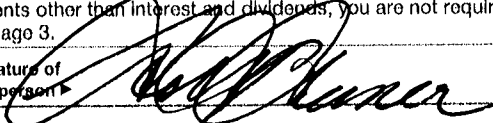
Social security number								
or								
Employer identification number								
1	1	-	3	1	3	6	5	9
5								

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification Instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here Signature of U.S. person:  Date: **8/18/17**

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

General Instructions (continued):

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Job No.: _____

TAX FORM/DEBT/RESIDENCE CERTIFICATION
(for Advertised Projects)

Taxpayer Identification Number (T.I.N.): 113136595

Company Name submitting Bid/Proposal: Henry Schenke

Mailing Address: PO Box 3227, Lamo, SC 29063

Are you registered to do business in the State of Texas? Yes No

If you are an individual, list the names and addresses of any partnership of which you are a general partner or any assumed name(s) under which you operate your business

Corporation

I. **Property:** List all taxable property in Fort Bend County owned by you or above partnerships as well as any d/b/a names. Include real and personal property as well as mineral interest accounts. (Use a second sheet of paper if necessary.)

<u>Fort Bend County Tax Acct. No.*</u>	<u>Property address or location**</u>
	<u>NONE</u>

* This is the property account identification number assigned by the Fort Bend County Appraisal District.
 ** For real property, specify the property address or legal description. For business personal property, specify the address where the property is located. For example, office equipment will normally be at your office, but inventory may be stored at a warehouse or other location.

II. **Fort Bend County Debt** - Do you owe any debts to Fort Bend County (taxes on properties listed in I above, tickets, fines, tolls, court judgments, etc.)?

Yes No If yes, attach a separate page explaining the debt.

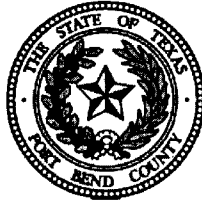
III. **Residence Certification** - Pursuant to Texas Government Code §2252.001 *et seq.*, as amended, Fort Bend County requests Residence Certification. §2252.001 *et seq.* of the Government Code provides some restrictions on the awarding of governmental contracts; pertinent provisions of §2252.001 are stated below:

- (3) "Nonresident bidder" refers to a person who is not a resident.
- (4) "Resident bidder" refers to a person whose principal place of business is in this state, including a contractor whose ultimate parent company or majority owner has its principal place of business in this state.

I certify that _____ is a Resident Bidder of Texas as defined in Government Code §2252.001.
[Company Name]

I certify that Henry Schenke is a Nonresident Bidder as defined in Government Code §2252.001 and our principal place of business is Lamo, SC.
[Company Name] [City and State]

Mandatory Form



Contractor Acknowledgement of Stormwater Management Program

I hereby acknowledge that I am aware of the stormwater management program and standard operating procedures developed by Fort Bend County in compliance with the TPDES General Permit No. TXR040000. I agree to comply with all applicable best management practices and standard operating procedures while conducting my services for Fort Bend County. I agree to conduct all services in a manner that does not introduce illicit discharges of pollutants to streets, stormwater inlets, drainage ditches or any portion of the drainage system. The following materials and/or pollutant sources must not be discharged to the drainage system as a result of any services provided:

1. Grass clippings, leaves, mulch, rocks, sand, dirt or other waste materials resulting from landscaping activities, (except those materials resulting from ditch mowing or maintenance activities)
2. Herbicides, pesticides and/or fertilizers, (except those intended for aquatic use)
3. Detergents, fuels, solvents, oils and/or lubricants, other equipment and/or vehicle fluids,
4. Other hazardous materials including paints, thinners, chemicals or related waste materials,
5. Uncontrolled dewatering discharges, equipment and/or vehicle wash waters,
6. Sanitary waste, trash, debris, or other waste products
7. Wastewater from wet saw machinery,
8. Other pollutants that degrade water quality or pose a threat to human health or the environment.

Furthermore, I agree to notify Fort Bend County immediately of any issue caused by or identified by:

Henry Chern
(Company/Contractor)

that is believed to be an immediate threat to human health or the environment.

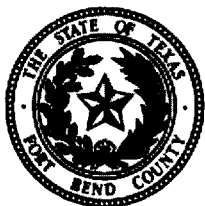
WPK
Contractor Signature

8/18/17
Date

Andy Boldy
Printed Name

GENERAL MANAGER
Title

COUNTY PURCHASING AGENT
Fort Bend County, Texas



Gilbert D. Jalomo, Jr., CPPB
County Purchasing Agent

(281) 341-8640
Fax (281) 341-8645

August 17, 2017

TO: All Prospective Bidders

RE: Addendum No. 2 to Pricing Form per Fort Bend County Bid 18-003 – Term Contract for Medical Supplies

Addendum 2:

Attached is Addendum 2 to Bid 18-003 Medical Supplies. Vendors are to use the Addendum 2 document and the Addendum 2 Excel Pricing Form file while preparing their bid response. Due date is now August 29, 2017 by 2:00pm and some locked cells have been unlocked in the pricing form.

Immediately upon your receipt of this addendum, please fill out the following information and email this page to the Fort Bend County Purchasing Department at norma.weaver@fortbendcountytexas.gov.

Henry Schen Inc
Company Name

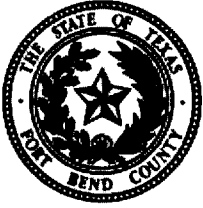
CUPA 8/22/17
Signature of person receiving addendum Date

If you have any questions, please contact this office.

Sincerely,

Cheryl Krejci
Cheryl Krejci, CPPB
Senior Buyer

COUNTY PURCHASING AGENT
Fort Bend County, Texas



Gilbert D. Jalomo, Jr., CPPB
County Purchasing Agent

(281) 341-8640
Fax (281) 341-8645

August 24, 2017

TO: All Prospective Bidders

RE: Addendum No. 3 to Pricing Form per Fort Bend County Bid 18-003 – Term Contract for Medical Supplies

Addendum 2:

Attached is Addendum 3 to Bid 18-003 Medical Supplies. Vendors are to use the Addendum 3 document and the Addendum 3 Excel Pricing Form file while preparing their bid response. Due date is now September 5, 2017 by 2:00pm and the pricing form has been amended.

Immediately upon your receipt of this addendum, please fill out the following information and email this page to the Fort Bend County Purchasing Department at norma.weaver@fortbendcountytexas.gov.

Henry Eshen
Company Name

ampy 8/24/17
Signature of person receiving addendum Date

If you have any questions, please contact this office.

Sincerely,
Cheryl Krejci
Cheryl Krejci, CPPB
Senior Buyer

Amended 8/23/17

**Fort Bend County Pricing Form
Bid 18-003
Term Contract for Medical Supplies**

Vendor Name:

Henry Schein Inc.

Section I: Airways	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
40mm Berman (dual channel) Oral Airway	ASIA-CONNECTION-TAIWIN	ME6504PK-5P	8570640.00	Yes	PK	5	5	1.26	\$ 6.30
60mm Berman (dual channel) Oral Airway	ASIA-CONNECTION-TAIWIN	ME6506BK-5P	8570660.00	Yes	PK	5	5	1.26	\$ 6.30
80mm Berman (dual channel) Oral Airway	ASIA-CONNECTION-TAIWIN	ME6508GN-5P	8570680.00	Yes	PK	5	8	1.26	\$ 10.08
90mm Berman (dual channel) Oral Airway	ASIA-CONNECTION-TAIWIN	ME6509YL-5P	8576255.00	Yes	PK	5	16	1.26	\$ 20.16
100mm Berman (dual channel) Oral Airway	ASIA-CONNECTION-TAIWIN	ME6510RD-5P	8579780.00	Yes	PK	5	20	1.26	\$ 25.20
110mm Berman (dual channel) Oral Airway	ASIA-CONNECTION-TAIWIN	ME6511ON-5P	4990533.00	Yes	PK	5	10	0.71	\$ 7.10
Thomas E.T. Tube Holder Adult size	LAREDAL	600-10000	2202270	No	EA	1	450	2.49	\$ 1,120.50
Thomas E.T. Tube Holder Pediatric size	LAREDAL	600-2000	4990708	No	EA	1	40	2.49	\$ 99.60
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 2.5 Uncuffed	MEDSTORM	38001	4994854.00	Yes	EA	1	30	1.49	\$ 44.70

Vendor Name:

Henry Schein Inc.

Section 1: Airways (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 3.0 Uncuffed	MEDSTORM	38002	4994856.00	Yes	EA	1	20	1.49	\$ 29.80
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 3.5 Uncuffed	MEDSTORM	38003	4996132.00	Yes	EA	1	25	1.49	\$ 37.25
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 4.0 Uncuffed	MEDSTORM	38004	4996132.00	Yes	EA	1	30	1.49	\$ 44.70
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 4.5 Uncuffed	MEDSTORM	38005	4998532.00	Yes	EA	1	20	1.49	\$ 29.80
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 5.0 Uncuffed	MEDSTORM	38006	4996565.00	Yes	EA	1	10	1.49	\$ 14.90
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 5.5 Cuffed	MEDSTORM	38012	4995733.00	Yes	EA	1	30	1.49	\$ 44.70
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 6.0 Cuffed	MEDSTORM	38013	4999751.00	Yes	EA	1	35	1.49	\$ 52.15

Vendor Name:

Henry Schein Inc.

Section I: Airways (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 6.5 Cuffed	MEDSTORM	38014	4994847.00	Yes	EA	1	40	1.49	\$ 59.60
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 7.0 Cuffed	MEDSTORM	38015	4994848.00	Yes	EA	1	250	1.49	\$ 372.50
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 7.5 Cuffed	MEDSTORM	38016	4994850.00	Yes	EA	1	230	1.49	\$ 342.70
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 8.0 Cuffed	MEDSTORM	38017	4994851.00	Yes	EA	1	50	1.49	\$ 74.50
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 8.5 Cuffed	MEDSTORM	38018	4999427.00	Yes	EA	1	20	1.49	\$ 29.80
Endotracheal Tube with Stylette with easy-to-read depth marks and low pressure inflatable cuffs, sterile, latex-free, 9.0 Cuffed	MEDSTORM	38020	4994853.00	Yes	EA	1	35	1.49	\$ 52.15
20F Nasopharyngeal airways	MEDSTORM	51154	4999308.00	Yes	EA	1	35	1.60	\$ 56.00
24F Nasopharyngeal airways	MEDSTORM	51156	4999310.00	Yes	EA	1	50	1.60	\$ 80.00

Vendor Name:

Henry Schein Inc.

Section 1: Airways (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
26F Nasopharyngeal airways	MEDSTORM	51157	4999312.00	Yes	EA	1	70	1.60	\$ 112.00
28F Nasopharyngeal airways	MEDSTORM	51158	4999313.00	Yes	EA	1	70	1.60	\$ 112.00
30F Nasopharyngeal Airways	MEDSTORM	51159	4999314.00	Yes	EA	1	50	1.60	\$ 80.00
36F Nasopharyngeal Airways	MEDSTORM	51162	4999317.00	Yes	EA	1	30	1.60	\$ 48.00
1200cc Replacement/Disposable Suction Canister, for S-Scott "Ten" suction unit	BEMIS	484410	1532694	No	EA	1	430	1.72	\$ 739.60
8F whistle tip Suction Catheter	ASIA-CONNECTION-TAIWIN	ME6808B	4995810.00	Yes	EA	1	60	0.17	\$ 10.20
10F whistle tip Suction Catheter	ASIA-CONNECTION-TAIWIN	ME6810B	4995084.00	Yes	EA	1	120	0.17	\$ 20.40
18F whistle tip Suction Catheter	ASIA-CONNECTION-TAIWIN	ME6818B	4995930.00	Yes	EA	1	150	0.17	\$ 25.50
Yankaur Suction Tip w/Control			4995371.00	Yes	EA	1	50	0.39	\$ 19.50
Yankaur with Control Vent and Tubing	MEDSOURCE	MS-YK20	4995372.00	Yes	EA	1	300	1.22	\$ 366.00
Yankaur "Big Yank" Suction Tip w/Control Vent, Sterile, 11/32"open tip, integral blister tube and canister connector pre-attached	CONMED	0034920U	1105352	No	EA	1	40	1.74	\$ 69.60
Suction Tubing Non Conductive Vinyl 72" X 1/4" ID			7883320.00	Yes	EA	1	50	1.50	\$ 75.00

Infant Medium Concentration Oxygen Mask	RUSCH	396218	4990671.00	Yes	EA	1	20	2.72	\$	54.40
-----------------------------------------	-------	--------	------------	-----	----	---	----	------	----	-------

Vendor Name:

Henry Schein Inc.

Section 1: Airways (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
O2 Mask Pediatric Partial Non-Rebreather w/safety vent	HUDSON	1058	1207139.00	Yes	EA	1	400	2.03	\$ 812.00
O2 Mask Adult Non-Rebreather w/o safety vent	HUDSON	1060	1204128	No	EA	1	2000	1.76	\$ 3,520.00
O2 Nasal Cannula Adult, 7ft	CURAPLEX	24003	9007035.00	Yes	EA	1	2000	0.18	\$ 360.00
Bougie-to-go ET Tube Introducer, Adult 15F x 60cm with Coude Tip	SUNMED	9-0212-82	7000566.00	Yes	EA	1	200	4.41	\$ 882.00
Bougie ET Tube Introducer, Pediatric 10F x 70cm with Coude Tip	SUNMED	9-0211-70	4997218.00	Yes	EA	1	40	5.15	\$ 206.00
O2 Nebulizer, small volume, hand held w/ pediatric mask, 7ft kink resistant tubing			1069916.00	Yes	EA	1	100	0.88	\$ 88.00
O2 Nebulizer w/ Tubing and Mouthpiece	CURAPLEX	301-200	4999867.00	Yes	EA	1	900	0.61	\$ 549.00
AMBU Spur II Bag Valve Mask Adult (with mask)	AMBU	520211000B	4993940	No	EA	1	500	9.11	\$ 4,555.00
AMBU Spur Bag Valve Mask Infant/Child (with Infant and Child masks)	AMBU	530215000	4996431	No	EA	1	50	12.08	\$ 604.00
Pocket BVM w/ olive green case, with O2 tubing	MicroBVM	MB003xn	4996698	No	EA	1	2	33.09	\$ 66.18
Oxygen Nur & Stem (Plastic)	SMITH MEDICAL	33-2600	1012406.00	Yes	EA	1	5	1.01	\$ 5.05

Vendor Name:

Henry Schein Inc.

Section 1: Airways (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Magill Forceps Adult sizes	ZULCO INTERNATIONAL	9-476	4991850.00	Yes	EA	1	5	3.22	\$ 16.10
Magill Forceps Child sizes	SURGICAL DESIGN INC	297	4991845.00	Yes	EA	1	5	3.22	\$ 16.10
Gastric Sump Tube, 48", 18F, Sterile	COVIDIEN	8888264986	1201782.00	Yes	EA	1	100	2.11	\$ 211.00
Gastric sump tubing, 48", 14F, Sterile			1202994.00	Yes	EA	1	10	2.11	\$ 21.10
Gastric sump tube, 36", 10F, Sterile			1792477.00	Yes	EA	1	10	2.11	\$ 21.10
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 2	SURGIMED	5-5332-02	8579052.00	Yes	EA	1	20	3.98	\$ 79.60
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 3	VALUMED	301-B3030	8572059.00	Yes	EA	1	90	3.98	\$ 358.20
Greenline/D Disposable Fiber Optic Laryngoscope Blades Macintosh 4	SUNMED	5-5332-04	8571785.00	Yes	EA	1	200	3.98	\$ 796.00
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 0	SUNMED	5-5333-00	8575362.00	Yes	EA	1	10	3.98	\$ 39.80
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 1	SUNMED	5-5333-01	8571425.00	Yes	EA	1	20	3.98	\$ 79.60
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 2	SUNMED	5-5333-02	8575266.00	Yes	EA	1	30	3.98	\$ 119.40

Vendor Name:

Henry Schein Inc.

Section 1: Airways (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 3	SUNMED	5-5333-03	8573605.00	Yes	EA	1	80	3.98	\$ 318.40
Greenline/D Disposable Fiber Optic Laryngoscope Blades Miller 4	SUNMED	5-5333-04	4993890.00	Yes	EA	1	80	3.98	\$ 318.40
Greenline/D Fiber Optic, 10/32" Halogen/Xenon Reflector Laryn Lamp for Medium Laryngoscope Handle	SUNMED	5-0240-52	1523890.00	Yes	EA	1	20	10.08	\$ 201.60
Endotracheal tube holder 50/cs, Sports Medics Icon Stabilizer	MOTION MEDICAL	2100	4997947	No	CS	50	5	126.51	\$ 632.55
PEEP valve disposable adjustable 22mm inner diameter			9855168.00	Yes	EA	1	100	2.76	\$ 276.00
Headrest, Bagel, 9", pink foam			1048798.00	Yes	EA	1	200	1.85	\$ 370.00
Total of Section 1:									\$ 19,914.87

19,914.87

Vendor Name:

Henry Schein Inc.

Section 2: IV/Syringes/Blood	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Transparent Film Dressing, Tegaderm, 4" x 4 3/4", Frame Style, 50/bx	3M	1626W	7779152	No	BX	50	2	18.64	37.28
Clearsafe I.V. Catheter, 14g X 1 1/4 inch	MEDSOURCE	MS-84114	7002014	No	EA	1	100	1.23	5,129.00
Clearsafe I.V. Catheter, 16g X 1 1/4 inch	MEDSOURCE	MS-84116	7002048	No	EA	1	300	1.31	393.00
Clearsafe I.V. Catheter, 18g X 1 1/4 inch	MEDSOURCE	MS-84218	7002049	No	EA	1	4000	1.31	5,240.00
Clearsafe I.V. Catheter, 20g X 1 1/4 inch	MEDSOURCE	MS-84220	7001658	No	EA	1	10000	1.31	13,100.00
Clearsafe I.V. Catheter, 22g X 1 inch	MEDSOURCE	MS-84122	7002052	No	EA	1	3000	1.31	3,930.00
Clearsafe I.V. Catheter, 24g X 3/4 inch	MEDSOURCE	MS-84124	7002053	No	EA	1	400	1.31	524.00
18g x 1 1/2" Needle Only 100/bx			3372091.00	Yes	BX	100	20	3.07	61.40
23g x 1" Needle Only 100/bx			9004473.00	Yes	BX	100	20	0.93	18.60
1cc 25g x 5/8" Syringe & Needle 100/bx			3375566.00	Yes	BX	100	6	5.17	31.02
3cc Syringe, Luer lock			9004475.00	Yes	BX	100	20	2.43	48.60
5cc 22g x 1" Syringe & Needle 100/bx			3376140.00	Yes	BX	100	10	12.28	122.80
10cc Syringe Luer Lock 100/bx			9871397.00	Yes	BX	100	10	78.11	781.10
30cc Syringe Luer Lock 30/bx			9870358.00	Yes	BX	30	1	30.88	30.88

Handwritten notes:
 18.64
 1.23
 1.31
 3.07
 0.93
 5.17
 2.43
 12.28
 78.11
 30.88
 Total
 37.28
 5,129.00
 393.00
 5,240.00
 13,100.00
 3,930.00
 524.00
 61.40
 18.60
 31.02
 48.60
 122.80
 781.10
 30.88

Vendor Name:

Henry Schein Inc.

Section 2: IV/Syringes/Blood (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
60cc Syringe Luer Lock 30/bx			1005188.00	Yes	BX	30	5	10.14	50.70
60cc Catheter Tip Syringe, 2oz			8908885.00	Yes	BX	25	1	21.77	21.77
Glucometer Test Strips for Abbott OptimumEZ glucose meter, capillary, 100 strip/bx			4998203	No	BX	100	200	67.28	13,456.00
Control solution, tri-level, 1 row 1 mid 1 high per box for OptimumEZ or Precision XTRA			6576290	No	EA	1	25	7.66	191.50
Assure prism multi test trips for assure prism multi meter 50/bx	ARKRAY USA INC	530050	9990084	No	BX	50	50	18.5	925.00
Assure prism control solution 1and 2	ARKRAY USA INC	530006	9990085	No	EA	1	10	16.3	163.00
Maxi Drip Set, 82" 10GTTW/Bravo 24, Pre-slit Port, Removable 7" Extension, 50/bx			8409700.00	Yes	CS	50	100	126.84	12,684.00
Mini Drop Basic Administration Set with One Injection Site, (60 Drops/mL) Control Clamp, injection site 28" above distal end, two-piece male luer lock. Priming Volume: 12mL, Length: 66 in.			4990712.00	Yes	EA	1	500	1.32	660.00
9% Sodium Chloride Injection USP-1000ml			1534612.00	Yes	EA	1	20	7.62	152.40
9% Sodium Chloride Injection USP-500ml			1537162.00	Yes	EA	1	6000	6.56	39,360.00
9% Sodium Chloride Injection USP-250ml			1537468.00	Yes	EA	1	20	6.12	122.40
9% Sodium Chloride Injection USP-100ml			1537916.00	Yes	EA	1	500	3.95	1,975.00

Vendor Name:

Henry Schein Inc.

Section 2: IV/Syringes/Blood (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Sterile Water for Irrigation, 500mL			1530102.00	Yes	EA	1	200	6.50	\$ 1,300.00
Safeline Injection Site: split septum access with two-piece male luer lock. Priming Volume: 0.25mL			1191635.00	Yes	EA	1	10	1.33	\$ 13.30
Smallbore Extension Set with bonded Ultrasite Injection site, Length: 7 in, Priming Volume: 0.6mL (approx)			1192235.00	Yes	EA	1	12000	2.91	\$ 34,920.00
Needle, Tension Pneumothorax, 14ga X 3.25 inch needle and catheter, hard plastic case	H&H	HHTP N01	4997721	No	EA	1	50	7.4	\$ 370.00
IV armboard, reusable, plywood core, 3inX9in			2205595.00	Yes	EA	1	30	0.81	\$ 24.30
IV armboard, reusable, plywood core, 3 in X 12 in			2209065.00	Yes	EA	1	10	0.68	\$ 6.80
IV armboard, reusable, plywood core, 3 in X 18 in			2200636.00	Yes	EA	1	10	1.12	\$ 11.20
Angiocath Peripheral Venous Catheter 14g X 5.25 in			9870340.00	Yes	EA	1	10	14.65	\$ 146.50
Surecan Safety Huber w/ Ultrasite needlefree infusion system, 20ga X 3/4			5070026.00	Yes	EA	1	10	4.71	\$ 47.10
Total of Section 2:									\$ 135,048.65

131,218.05

Vendor Name:

Henry Schein Inc.

Section 3: Bandage/Splints/Tape	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
2" x 5yd Bandage, Self-Adherent, individually packaged			9004322.00	Yes	EA	1	75	0.30	\$ 22.50
4" x 5yd Bandage, Self-Adherent, individually packaged			9004324.00	Yes	EA	1	50	0.54	\$ 27.00
Combat Application Tourniquet (CAT), One-handed Tourniquet Utilizing Windlass System, Tactical Black			4997818.00	Yes	EA	1	70	20.52	\$ 1,436.40
Occlusive, non-adhering dressing, impregnated with white Petrolatum, 3" x 9" 50/bx			1940093.00	Yes	BX	50	2	27.51	\$ 55.02
4x4 Non Sterile, non-woven, 4ply, 200/pkg			1014336.00	Yes	PK	200	120	0.92	\$ 110.40
4x4 Sterile 12 ply - 2/pk			6474174.00	Yes	PK	2	2000	0.13	\$ 260.00
4x4 Sterile 12 ply - 10/tray			6474174.00	Yes	TRAY	10	100	0.61	\$ 61.00
4 1/2" x 4.1yd 6 ply Sterile Gauze Roll			8904524.00	Yes	EA	1	1500	1.24	\$ 1,860.00
36" x 51" Triangular Bandage			4675662.00	Yes	EA	1	200	0.24	\$ 48.00
8" x 10" Abdominal Pad, 20/tray			1204756.00	Yes	TRAY	20	200	3.84	\$ 768.00
1" x 3" Adhesive Strip Bandage			1126142.00	Yes	BX	100	100	0.86	\$ 86.00

Vendor Name:

Henry Schein Inc.

Section 3: Bandage/Splints/Tape (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Burn Sheet Sterile 60" x 96"			4993574.00	Yes	EA	1	50	1.65	\$ 82.50
Trauma Dressing Sterile 10" x 30"			1205576.00	Yes	EA	1	100	1.35	135.00
Rapid Heat Instant Heat Pack, Pull Apart Style, 6/bx	RAPID DEPLOYMENT	2056	4991775	No	BX	6	170	5.59	950.30
Rapid Cold Instant Cold Pack, Pull Apart Style, 24/cs	RAPID DEPLOYMENT	2004	4990572	No	CS	24	6	21.46	128.76
Femo KED forehead/Chin Strap Replacement set of 2			4992762	No	SET	1	10	179.31	1,793.10
3M Transpore Tape 1" x 10yd 12/bx			7777305	No	BX	12	10	12.88	128.80
1" x 10yd Paper Tape, hypo-allergenic			1019673.00	Yes	BX	12	7	4.01	28.07
2" x 10yd Waterproof Tape Kendall #3267 6/bx	Kendall	3267	8902816	No	BX	6	18	14.81	266.58
Flex-All splint, orange, bendable foam and aluminum splint, 4" x 36" rolled			4992562.00	Yes	EA	1	200	4.42	884.00
One piece foil bunting with hood, Latex Free 17.5" x 30" 18 micron/.70 gauge, Sterile			4990675.00	Yes	EA	1	5	4.14	20.70
Quikclot Combat Gauze LE Z-fold, 3 inch X 4 yard, NO HEAT	QUIKCLOT	350	7000709	No	EA	1	5	31.69	158.45
HyFin chest seal without vent	NORTH AMERICAN RESCUE	10-0015	4997718	No	EA	1	5	7.13	35.65

33.54/BX

Handwritten signature and scribbles over the bid price and extended cost columns.

Vendor Name:

Henry Schein Inc.

Section 3: Bandage/Splints/Tape (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Israeli emergency compression bandage 4"			1977129.00	Yes	EA	1	5	4.33	\$ 21.65
Israeli emergency compression bandage 6"			4998039.00	Yes	EA	1	5	4.92	\$ 24.60
Total of Section 3:									\$ 9,392.48

Handwritten: 1958.88

Vendor Name:

Henry Schein Inc.

Section 4: EKG	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Recording Paper for Physio Control Life Pak 12, 4" wide	LEONARD LANG	12394	8906868.00	Yes	PK	5	190	17.24	\$ 3,275.60
Electrodes, Medi-Trace Mini, ECG monitoring, pediatric, foam, teardrop shape, adhesive hydrogel	Medi-Trace		8348829.00	Yes	PK	100	200	9.94	\$ 1,988.00
Medicostest Blue Sensor Disposable Electrodes adult 25/pk	Ambu	R-00-S/25	1113107	No	PK	25	5000	8.08	\$ 40,400.00
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables (pediatrics)	CONMED	3112-1730	6436213	No	EA	1	100	32.43	\$ 3,243.00
Self adhesive pregelled low impedance electrodes with direct connect to Physio Control Quick combo cables (adult)	CONMED	3112-1731	6430099	No	EA	1	500	32.43	\$ 16,215.00
Smart Capnoline Plus non-intubated, oral nasal w/ O2 tubing, adult/intermediate	MicroStream	9822	3735386	No	EA	1	3200	11.02	\$ 35,264.00
Filter line H set infant/ neonate, incl airway adapter, filterline, microstream connection	MicroStream	6324	3733597	No	EA	1	20	16.43	\$ 328.60
Filter line set adult/pediatric airway adapter	MicroStream	XS04620	3737676	No	EA	1	650	8.83	\$ 5,739.50
Total of Section 4:									\$ 106,453.70

Vendor Name:

Henry Schein Inc.

Section 5: EKG Cables	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
LifePack12 Power Adapter Extension Cable	PHYSIO CONTROL	11110-000051	1085300	No	EA	1	5	121.6	\$ 608.00
LifePack12 12-Lead ECG trunk cable with 4-wire limb leads, 5'	PHYSIO CONTROL	11110-000018	4996886	No	EA	1	5	114.39	\$ 571.95
LifePack12 12-Lead ECG Patient Cable, 6-Wire Precordial Lead Attachment	PHYSIO CONTROL	11110-000022	4996886	No	EA	1	5	114.39	\$ 571.95
LifePack12 QUIK-COMBO Therapy Cable for use with LifePack12 defibrillator/monitor	PHYSIO CONTROL	11110-000040	1045832	No	EA	1	5	320.95	\$ 1,604.75
Masimo SET LNC-4 LNCs Patient Cable, 4-foot reusable connector cable	PHYSIO CONTROL	11171-000024	7001281	No	EA	1	10	115.26	\$ 1,152.60
Masimo SET LNCS DCIP Reusable Sensor, Multiuse sensor for patients 10-50kg	PHYSIO CONTROL	11171-000018	1107591	No	EA	1	10	372.23	\$ 3,722.30
Masimo SET LNCS DCI Adult Reusable Sensor, Multiuse sensor for patients >30kg	PHYSIO CONTROL	11171-000017	1080275	No	EA	1	10	268.84	\$ 2,688.40
NELLCOR SpO2 Sensor, DS100A, Adult reusable	PHYSIO CONTROL	11996-000060	6082658	No	EA	1	5	258.91	\$ 1,294.55
NELLCOR SpO2 Cable Extension, DEC-4, Reusable	PHYSIO CONTROL	11110-000042	1200004	No	EA	1	5	37.33	\$ 186.65
NELLCOR Oxisensor II Disposable Pediatric SpO2 Sensor	PHYSIO CONTROL	11996-000116	1207661	No	EA	1	5	12.32	\$ 61.60
NELLCOR Oxisensor II Disposable Infant SpO2 Sensor	PHYSIO CONTROL	11996-000115	8600004	No	EA	1	5	16.02	\$ 80.10
NIBP XLarge Adult Cuff for LifePack 15, reusable	PHYSIO CONTROL	11160-000019	7002010	No	EA	1	20	36.94	\$ 738.80
NIBP Large Adult Cuff for LifePack 15, reusable	PHYSIO CONTROL	11160-000017	7002008	No	EA	1	10	26.13	\$ 261.30
NIBP Adult Cuff for LifePack 15, reusable	PHYSIO CONTROL	11160-000015	7002006	No	EA	1	10	23.75	\$ 237.50
NIBP Pediatric Cuff for LifePack 15, reusable	PHYSIO CONTROL	11160-000013	7002003	No	EA	1	10	19	\$ 190.00
NIBP Infant Cuff for LifePack 15, reusable, 6x18cm	PHYSIO CONTROL	11160-000011	7002018	No	EA	1	5	15.84	\$ 79.20
Extension Cable for AC/DC Power Adapter	PHYSIO CONTROL	11140-000080	1187340	No	EA	1	20	250.64	\$ 5,012.80

Replacement Right Angle Power Cable for AC/DC Power Adapter	PHYSIO CONTROL	11140-000081	1187340	No	EA	1	5	250.64	\$	1,253.20
----------------------------------------------------------------	----------------	--------------	---------	----	----	---	---	--------	----	----------

Vendor Name:

Henry Schein Inc.

Section 5: EKG Cables (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Masimo SET RC Patient Cable Compatible Rainbow SpO2, SpCO, SpMET, adult sensor	PHYSIO CONTROL	11171-000049	4998788	No	EA	1	5	526.92	\$ 2,634.60
Masimo SET RC Patient Cable	PHYSIO CONTROL	11171-000037	1186479	No	EA	1	10	116.1	\$ 1,161.00
Lifepack 15 defibrillator/monitor to PC USB Port cable	PHYSIO CONTROL	11996-000288	4998108	No	EA	1	10	243.19	\$ 2,431.90
Lifepack 15 Quik-Combo Therapy Cable	PHYSIO CONTROL	11113-000004	4995490	No	EA	1	10	320.95	\$ 3,209.50
Lifepack 15 Masimo Set Red LNCS Patient Cable 4ft	PHYSIO CONTROL	11996-000323	4995531	No	EA	1	10	170.4	\$ 1,704.00
Lifepack 15 NIBP Tubing 9ft	PHYSIO CONTROL	21300-008174	1278881	No	EA	1	20	51.29	\$ 1,025.80
Lifepack 15 Adult SPO2 Sensor Disposable	PHYSIO CONTROL	2712-03911	1141911	No	EA	1	200	11.73	\$ 2,346.00
Lifepack 15 Pedi SPO2 Sensor Disposable	PHYSIO CONTROL	11171-000020	4996226	No	EA	1	600	13.36	\$ 8,016.00
Lifepack 15 Infant SPO2 Sensor Disposable	PHYSIO CONTROL	11171-000031	1080279	No	EA	1	500	17.54	\$ 8,770.00
Total of Section 5:									\$ 51,614.45

Vendor Name:

Henry Schein Inc.

Section 6: Microflex Freeform SE Latex Free Powder Free Nitrile Exam Gloves	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Extra Small	MICROFLEX	FFS-700-XS	5659724	No	BX	100	100	7.85	\$ 785.00
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Small	MICROFLEX	FFS-700-S	5651161	No	BX	100	200	7.85	\$ 1,570.00
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Medium	MICROFLEX	FFS-700-M	5657186	No	BX	100	600	7.85	\$ 4,710.00
Microflex Freeform SE Nitrile Exam Gloves, Powderfree Exam Gloves, 100/bx, 10bx/cs, 2.8 mil Cuff Thickness, 3.5 mil Palm Thickness, 5.1 mil Finger Thickness, Tensile Strength = 32 before aging (31 After aging), Elasticity = 500% Before Aging (400% after aging), Pinhole Defect Rate = 1.5, Large	MICROFLEX	FFS-700-L	5650983	No	BX	100	600	7.85	\$ 4,710.00

Vendor Name: Henry Schein Inc.

Section 7: Microflex Freeform EC Latex Free Powder Free Nitrile Exam Gloves	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Small	MICROFLEX	FFE-775-S	5656851	No	BX	50	10	7.91	\$ 79.10
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Medium	MICROFLEX	FFE-775-M	5658659	No	BX	50	10	7.91	\$ 79.10
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Large	MICROFLEX	FFE-775-L	5657996	No	BX	50	10	7.91	\$ 79.10
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Extra Large	MICROFLEX	FFE-775-XL	5656512	No	BX	50	10	7.91	\$ 79.10

Vendor Name: Henry Schein Inc.

Section 7: Microflex Freeform EC Latex Free Powder Free Nitrile Exam Gloves (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Microflex Freeform EC Nitrile Exam Gloves, Powderfree Exam Gloves, 50/bx, 10bx/cs, 3.5 mil Cuff Thickness, 4.7 mil Palm Thickness, 6.3 mil Finger Thickness, Tensile Strength = 31 before aging (27 After aging), Elasticity = 500% Before Aging (500% after aging), Pinhole Defect Rate = 1.5, Extra Extra Large	MICROFLEX	FFE-775-XXL	5656158	No	BX	50	10	7.91	\$ 79.1000
Total of Section 7: \$ 395.50									

Vendor Name: Henry Schein Inc.

Section 8: AMBU PERFIT Cervical Collars	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Perfit ACE Adjustable Cervical Collar, 16 setting (Neckless to Tall)	AMBU	002 810 001	9851122	No	EA	1	1500	4.92	\$ 7,380.0000
Perfit Mini ACE Adjustable Cervical Collar, 12 settings (Infant to Neckless)	AMBU	000 281 107	9856604	No	EA	1	150	4.92	\$ 738.0000
Total of Section 8:									\$ 8,118.00

Section 9: Head Immobilizers	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Laerdal Sta-Blok Head Immobilizer. Single use disposable device, radiolucent, Adjustable standard Velcro padded strap, latex free	LAERDAL	700-00001	2037034	No	EA	EA	900	3.7	\$ 3,330.0000
Total of Section 9:									\$ 3,330.00

Vendor Name:

Henry Schein Inc.

Section 10: Miscellaneous Supplies	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Disposable OB Kit, Soft Packaging			3262005.00	Yes	EA	1	25	5.81	\$ 145.25
Alcohol Prep Pads, Medium Size TRIAD 200/bx			1126131.00	Yes	BX	200	300	1.01	\$ 303.00
Emesis Bags, single use, Clear, Graduate, 1000cc, latex free, rigid collar, automatic seal			6266991.00	Yes	EA	1	2000	1.13	\$ 2,260.00
Sterile Lubricating Jelly, 5g, 72/bx			1166726.00	Yes	BX	72	10	4.63	\$ 46.30
Oxygen Cylinder Handwheel, Metal			4990442.00	Yes	EA	1	10	8.45	\$ 84.50
Large Oxygen Cylinder Wrench (aluminum)			6779945.00	Yes	EA	1	10	1.77	\$ 17.70
Encono Paramedic Shears Dk Blue 7 1/2"			4995723.00	Yes	EA	1	100	0.72	\$ 72.00
Disposable Penlight			8310840.00	Yes	EA	1	100	0.88	\$ 88.00
Single use push button activated, spring loaded, retractable Lancet, 100/bx			4963983.00	Yes	BX	100	120	10.66	\$ 1,279.20
Chloraprep 3mL Applicator, 2% Chlorhexidine Gluconate and 70% Isopropyl Alcohol			6020036.00	Yes	BX	25	6	16.34	\$ 80.04
Safety control seals, Pull Tite (numbered), 100/pkg			8860084.00	Yes	PK	100	1	16.34	\$ 16.34

[Handwritten signature and scribbles over the bottom right portion of the table, including the price 16.34 and extended cost 16.34.]

Vendor Name:

Henry Schein Inc.

Section 10: Miscellaneous Supplies (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item starting Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Razor, Medline Fixed Head, 100/bx			1113336.00	Yes	BX	100	4	15.97	\$ 63.88
Disposable Polyester Patient Blanket, 50x84", Blue or Grey			4996470.00	Yes	EA	1	50	3.87	\$ 193.50
Oxygen "D" Cylinder Gasket, Brass w/Rubber Center			4990776.00	Yes	EA	1	10	0.89	\$ 8.90
Disposable Probe Cover for SureTemp Plus Thermometer, 25/bx	WELCHALLYN	5031	5660460	No	BX	25	200	0.82	\$ 164.00
Heavy Duty Ring Cutter			6357057.00	Yes	EA	1	5	25.33	\$ 126.65
Scalpel, Disposable, Sterile 11			1126189.00	Yes	EA	1	5	0.21	\$ 1.05
Blade Assembly, single-use, pivoting, purple, for 3M 9661 surgical clippers			7771073.00	Yes	EA	1	50	3.78	\$ 189.00
Ammonia Inhalent			6920432.00	Yes	BX	10	10	1.73	\$ 17.30
Post Valve Seal Protector, pull type for Aluminum C or D Oxygen Cylinder			1060229.00	Yes	EA	1	50	0.18	\$ 9.00
Isopropyl Alcohol 70 % 4 oz Bottle			1257081.00	Yes	EA	1	40	0.52	\$ 20.80
Isopropyl Alcohol 70% 16 oz Bottle			1024716.00	Yes	EA	1	12	1.16	\$ 13.92
Endure 300 Cida-Rinse Dispenser, 540ml			No Bid	No	EA	1	10	0	\$ -
Mylar Emergency Blanket, 52 X 84 inches			4998402.00	Yes	EA	1	50	0.56	\$ 28.00
Total of Section 10:									\$ 5,228.33

Vendor Name:

Henry Schein Inc.

Section 11: Infection Control	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Bemis bio hazard box wall safe type	BEMIS	150-020	8093581	No	EA	1	250	3.97	\$ 992.50
Bemis bio hazard box wall safe bracket	BEMIS	415	6429776	No	EA	1	12	1.23	\$ 14.76
Bemis bio hazard box wall safe bracket key	BEMIS	410	4236604	No	EA	1	12	3.45	\$ 41.40
Safety Glasses, Nemesis V30, black frame, clear lens, neck cord included	KIMBERLY-CLARK	25676-00	1350149	No	EA	1	250	2.75	\$ 687.50
Fluid shield mask with clear visor, anti-fog, 2" wrap around, ear loops 25/bx			1047321.00	Yes	BX	25	2	6.44	\$ 12.88
Inovel medical N95 respirator, all sizes, must meet CDC guidelines for tuberculosis exposure control in addition to NIOSH and CDC standards for N95 protection against airborne pathogens 24/pk			6835379	No	PK	25	2	20.79	\$ 41.58
Particulate Respirator and Surgical Mask 1860/1860S	3M		7775551	No	EA	1	20	0.8	\$ 16.00
Particulate Respirator, 8210	3M		3359968	No	EA	1	20	1.2	\$ 24.00
1870 n95 mask	3M		7100019	No	EA	1	20	1.02	\$ 20.40
Sharps Dart, sharps container with one time lockable seal, 6.5"			7001260.00	Yes	BX	24	60	30.89	\$ 1,973.40
Gel Hand Sanitizer w/ pump 540 mL	ECOLAB	47593-487-31	8690079	No	EA	1	50	5.37	\$ 268.50
Total of Section 11:									\$ 4,092.92

Brand?

Vendor Name:

Henry Schein Inc.

Section 12: Capitals	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Lifepack 12 basic carry case, to include Shoulder strip, right pouch, left pouch, and front cover	PHYSIO CONTROL	11260-00030	1100558	No	EA	1	5	273.8	\$ 1,369.00
Lifepack 12 back pouch for carry case	PHYSIO CONTROL	11260-000029	4994550	No	EA	1	5	66.11	\$ 330.55
Lifepack 12 top pouch for carry case	PHYSIO CONTROL	11220-000028	4999402	No	EA	1	5	220.59	\$ 1,102.95
Lifepack 12 replacement should strap	PHYSIO CONTROL	11260-000037	4999120	No	EA	1	5	30.61	\$ 153.05
Aneroid Sphygmomanometer, infant, Nylon cuff, minimum 10 year calibration Warranty, with zippered carry case			1126090.00	Yes	EA	1	10	4.34	\$ 43.40
Aneroid Sphygmomanometer, pedi, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case			1126087.00	Yes	EA	1	10	5.00	\$ 50.00
Aneroid Sphygmomanometer, adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case			1126088.00	Yes	EA	1	30	5.47	\$ 164.10
Aneroid Sphygmomanometer, large adult, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case			1126092.00	Yes	EA	1	15	6.64	\$ 99.60
Aneroid Sphygmomanometer, thigh, Nylon cuff, latex, minimum 10 year Calibration warranty, with zippered carry case			1126091.00	Yes	EA	1	10	9.49	\$ 94.90
Adult full arm splint Fracture-Pak			4999265.00	Yes	EA	1	20	15.15	\$ 303.00
Adult full leg splint Fracture-Pak			4999266.00	Yes	EA	1	40	22.17	\$ 886.80
Ankle/Elbow splint Fracture-Pak			No Bid	Yes	EA	1	30	0.00	\$ -

Total of Section II: \$ 4,597.35

Vendor Name:

Henry Schein Inc.

Section 12: Capitals (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Pedi full arm splint Fracture-Pak			No Bid	Yes	EA	1	25	0.00	\$ -
Pedi full leg splint Fracture-Pak			No Bid	Yes	EA	1	20	0.00	\$ -
Greenline/D Laryngoscope handle, fiber optic, chrome plated, 2AA batteries, penlite handle			8573609	No	EA	1	10	40.37	\$ 403.70
Greenline/D Laryngoscope handle, fiber optic, chrome plated, C batteries			8573639	No	EA	1	10	42.16	\$ 421.60
Oxygen flow meter with Ohmeda QC Adapter 1-15LPM			4997446.00	Yes	EA	1	10	11.35	\$ 113.50
ADScope 603 Stethoscope, Navy Blue, Stainless Steel, 21", w/additional eartips and diaphragm	AMERICAN DIAGNOSTIC CORP	603N	4992009	No	EA	1	30	25.52	\$ 765.60
Stat packG3 backup, Red, BBP resistant, 25 in H X 18 in W X 8.5 in D with Fort Bend County EMS embroidery	StatPak	G35006RE	7001776	No	EA	1	5	184.7	\$ 923.50
Ohmeda Male and Ohmeda Female quick connect w/6" hose			7001920.00	Yes	EA	1	5	26.84	\$ 134.20
Thermometer, electronic, SureTemp Plus Model 690	WelchAllyn	690	2033856	No	EA	1	10	231.61	\$ 2,316.10
Probe and well kit, rectal 4', for SureTempPlus 690 thermometer	WelchAllyn	02892-000	7418045	No	EA	1	10	65.76	\$ 657.60
Probe and well kit, oral, 4', for SureTempPlus 690 thermometer	WelchAllyn	02893-000	8030003	No	EA	1	5	14.41	\$ 72.05
Restraint strap seat belt buckle loop end, Black, 2 piece, 5'			3701050.00	Yes	EA	1	10	7.08	\$ 70.80
Restraint straps chest system, black, nylon, Metal push button, loop ends			2201285.00	Yes	EA	1	10	22.59	\$ 225.90

Vendor Name:

Henry Schein Inc.

Section 12: Capitals (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Locking Twice-as-Tough CUFF WRIST Restraint with lock on connecting strap, adjustable, machine washable	POSEY	2750	4986734	No	EA	1	150	20.83	\$ 3,124.50
Locking Twice-as-Tough Ankle Restraint with lock on cuff and connecting strap, adjustable, machine washable	POSEY	2755	4988484	No	EA	1	120	21.04	\$ 2,524.80
Oxygen cylinder with toggle, aluminum, D size			6778965.00	Yes	EA	1	5	49.44	\$ 247.20
Oxygen regulator/pressure reducer, brass, CGA 540 2800-R-2			4990448.00	Yes	EA	1	5	132.15	\$ 660.75
Oxygen regulator, 1 DISS IBARB 0-25 LPM			6773721.00	Yes	EA	1	5	57.58	\$ 287.90
Megamover plus transport unit, 40x80 Nonwoven ply gret w/backboard pockets, 1500 lb capacity	GRAHAM PROFESSIONAL	53376	4992923	No	EA	1	10	17.11	\$ 171.10
Break-apart stretcher, ferno EXL scoop, red, no restraints, no pins	FEMO	65 EXL	1042905	No	EA	1	5	802.92	\$ 4,014.60
LP15 Standard Carry Case with Right & Left Pouches	PHYSIO CONTROL	11577-000002	4995532	No	EA	1	5	264.7	\$ 1,323.50
LP15 Rear Pouch for carry case	PHYSIO CONTROL	11260-000039	4998146	No	EA	1	5	62.7	\$ 313.50
LP15 Shoulder Strap	PHYSIO CONTROL	11577-000001	4996043	No	EA	1	5	27.95	\$ 139.75
LUCAS 2 Disposable Suction Cup, 3/pk	PHYSIO CONTROL	11576-000046	No Bid	No	PK	3	5	0	\$ -
LUCAS Patient Strap	PHYSIO CONTROL	11576-000050	No Bid	No	SET	2	5	0	\$ -
LUCAS Stabilization Strap	PHYSIO CONTROL	21996-000064	No Bid	No	EA	1	5	0	\$ -
LUCAS Standard Back Plate	PHYSIO CONTROL	21996-000044	No Bid	No	EA	1	5	\$ -	\$ -
Replacement Ankle Hitch for QD3 & QD4 Traction			4990516.00	Yes	EA	1	5	8.40	\$ 42.00
Replacement Ischial Strap for Adult/Child QD3/QD4 Traction Splint			7001972.00	Yes	EA	1	5	15.84	\$ 79.20

Vendor Name:

Henry Schein Inc.

Section 12: Capitals (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Oxygen cylinder with toggle, aluminum, C size			1097410.00	Yes	EA	1	5	48.50	\$ 242.50
S-Scott "ten" replacement battery, SN 3000 and below	SSCOR INC	80636	4998206	No	EA	1	5	44.11	\$ 220.55
Traction splint w/aluminum ratchet, Adult QD-4			8554486.00	Yes	EA	1	5	174.15	\$ 870.75
Traction splint w/aluminum ratchet, child QD-3			8551303.00	Yes	EA	1	5	174.15	\$ 870.75
Kendrick KODE I vest, green			4998323.00	Yes	EA	1	5	79.55	\$ 397.75
S-Scott "ten" port suction unit w/charging shelf and power cord	SSCOR INC		7003010	No	EA	1	5	945.47	\$ 4,727.35
S-Scott "ten" replacement battery, SN >3001 and above	SSCOR INC	80635	4998195	No	EA	1	5	41.43	\$ 207.15
L.A. Rescue cervical collar bag, 24"L x 11"H x 5"W			4994693.00	Yes	EA	1	5	16.55	\$ 82.75
Trauma/Air management bag III, 26" x 18.5" x 12.5", blue, Ferno #5111	FERNO	5111	6721719	No	EA	1	5	228.45	\$ 1,142.25
Surgical Clipper Starter Kit, includes clipper body 9661 and charger 9662, no blade assembly	3M	9661	3108132	No	EA	1	5	47.39	\$ 236.95
Hawkepack ET Kit pullout, green with yellow stripe	HAWKEPAKS		02-04F5	No	EA	1	5	0	\$ -
Ferno professional intubation mini bag, royal blue	FERNO	5115	6728047	No	EA	1	5	52.14	\$ 260.70
5.11 Rush 72 Back Pack, Black	5.11	rush72	No Bid	No	EA	1	5	0	\$ -
Assure Prism Multi-meter Glucometer	ARKRAY USA INC	530001	9990263	No	EA	1	30	27.3	\$ 819.00
Total of Section 12: \$									29,111.80

Vendor Name:

Henry Schein Inc.

DISQ

Section 13: Medication
 Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA.

Section 13: Medication	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Adenosine 6mg/2mL (3mg/mL) 2mL Single dose			2480408.00	Yes	EA	1	12	6.84	\$ 82.08
Adenosine 12mg/4mL (3mg/mL) 4mL Single dose			1218777.00	Yes	EA	1	100	52.03	\$ 5,203.00
Acetaminophen 15mL Infant Drops (80mg per 0.8mL)			1278467.00	Yes	EA	1	100	1.42	\$ 142.00
Pain Reliever Non-Aspirin 325mg 2/pk 125pk/6x			1272829.00	Yes	PK	2	400	1.18	\$ 472.00
Amiodarone, 150mg, 3mL Vial			1118748.00	Yes	EA	1	400	3.25	\$ 1,300.00
Aspirin 81mg Tablets 36/bottle			1022336.00	Yes	BT	36	90	0.66	\$ 59.40
Atropine Sulfate 18g x 1 1/2", 0.1mg/mL, 10mL Prefilled Syringe with protected needle			2484141.00	Yes	EA	1	400	18.39	\$ 7,356.00
Atrovent Solution 0.5mg, 2.5mL			1253830.00	Yes	BX	30	8	5.23	\$ 41.84
Ipratropium Bromide/ Albuterol, 0.5mg/3mg, 30/bx			1253909.00	Yes	BX	30	15	10.96	\$ 164.40
Cardizem 25mg, 5mL Vial			1181983.00	Yes	EA	1	100	11.00	\$ 1,100.00
Calcium Chloride, 1Gm, 10mL			2480241.00	Yes	EA	1	100	17.07	\$ 1,707.00

Vendor Name:

Henry Schein Inc.

Section 13: Medication (cont'd)
 Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA.

Section 13: Medication (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Diphenhydramine 50mg/mL, 1mL Vial			2480687.00	Yes	EA	1	180	5.50	\$ 990.00
Dextrose USP 50%, 18g protected needle, 25grams (0.5g/mL)			2583728.00	Yes	EA	1	400	15.61	\$ 6,244.00
Dextrose 25% 10mL Ansyr Syringe			1140577.00	Yes	EA	1	10	14.57	\$ 145.70
Dopamine HCL in 5% Dextrose, 500mL IV Bag-800mg			9541035.00	Yes	EA	1	100	35.64	\$ 3,564.00
Epinephrine 1:1000, 1mg/mL, 1mL Single dose			1046844.00	Yes	EA	1	150	8.66	\$ 1,299.00
Epinephrine 1:10,000, 18g, 1/2" (0.1mg/mL) 10mL Prefill Syringe with protected needle			2488175.00	Yes	EA	1	900	9.46	\$ 8,514.00
Racemic Epi 2.25% 0.5mL Unit Dose			1162121.00	Yes	EA	1	70	3.00	\$ 210.00
Amidate (Etomidate Injection), 20mg (2mg/mL), 10mL Single Dose Ampule			2580098.00	Yes	EA	1	200	11.52	\$ 2,304.00
Glucagon 1mg Lilly Kit Red Box 2050A			2283026.00	Yes	EA	1	100	553.59	\$ 55,359.00
Glucose 37.5g Unit dose tube			2483963.00	Yes	EA	1	250	10.46	\$ 2,615.00

Vendor Name:

Henry Schein Inc.

Section 13: Medication (cont'd)		Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA.										
Heparin Sodium 5000u, 1ml Carpuject				No Bid	Yes	EA	1	80	0.00	\$ -
Monoject Prefill IV Flush syringe, filler with 10mL 100U/mL (1,000 USP Units)				1195566.00	Yes	EA	1	50	0.80	\$ 40.00
Heparin Flush, 12ml										
Ibuprofen Oral Suspension 100mg, 5 mL				1105812.00	Yes	EA	1	300	2.97	\$ 891.00
Lasix 40mg, 10mg/mL in 4mL Prefill Needleless Syringe				1047055.00	Yes	EA	1	250	15.63	\$ 3,907.50
Labetalol Hydrochloride Injection, USP 100 mg/20 mL, 5mg per mL				1277664.00	Yes	EA	1	150	6.00	\$ 900.00
Lidocaine 2% with male Luer lock pre-filled syringe, 100mg/5mL				2488012.00	Yes	EA	1	250	5.63	\$ 1,407.50
Lidocaine 2g in 500mL DSW				1536016.00	Yes	EA	1	75	10.52	\$ 789.00
Magnesium Sulfate 50%, 1g/2mL Vial				2480668.00	Yes	EA	1	200	3.16	\$ 632.00
Metoprolol 5mg, 5mL Vial				2488794.00	Yes	EA	1	50	4.66	\$ 233.00
Naloxone 2mg/2mL - 2mL Pre-filled Syringe				1182155.00	Yes	EA	1	150	66.04	\$ 9,906.00
Nitroglycerin Ointment, 2%, 30g Tube				1910001.00	Yes	EA	1	50	34.19	\$ 1,709.50

Vendor Name:

Henry Schein Inc.

Section 13: Medication (cont'd)
 Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA.

Section 13: Medication (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
Nitrolingual Spray, 4.1g, 400mcg per Spray, 90 sprays per can			1275669.00	Yes	EA	1	40	260.19	\$ 10,407.60
Nitrostat, 0.4mg Sublingual Tabs, 25 per bottle			2580313.00	Yes	BT	25	10	25.50	\$ 255.00
Oxytocin Picoicin 10units 1mL			8906805.00	Yes	EA	1	60	3.36	\$ 201.60
Promethazine 25 mg, 1mL vial			3753662.00	Yes	EA	1	300	2.56	\$ 768.00
Clopidogrel Bisulfate 75mg tablets			1268148.00	Yes	BX	25	20	2.06	\$ 41.20
Albuterol Sulfate, USP Inhalation Solution, 0.083%, 2.5mg/3mL (0.83mg/mL), 25/bx			1161818.00	Yes	BX	25	35	4.23	\$ 148.05
Rocuronium 10mg/mL, 10mL Vial			No Bid	Yes	EA	1	120	0.00	\$ -
Sodium BiCarbonate 8.4% 10mL pedi Lifeshield			1046895.00	Yes	EA	1	20	16.61	\$ 332.20
Sodium Bicarb 8.4%, 50mEq, 50mL Prefilled luer lock syringe			1046895.00	Yes	EA	1	450	16.61	\$ 7,474.50
0.9% Sodium Chloride, 5mL in 12mL luer lock syringe			9871864.00	Yes	EA	1	8000	1.04	\$ 8,320.00

Vendor Name:

Henry Schein Inc.

Section 13: Medication (cont'd)	Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units Purchased	Bid Price per Unit	Extended Cost
0.9% Sodium Chloride, 10ml in 12ml Luer lock syringe			7000698.00	Yes	EA	1	8000	0.33	\$ 2,640.00
Solumedrol 125mg, 2ml Acto-vial			2480254.00	Yes	EA	1	300	18.85	\$ 5,655.00
Succinylcholine 200mg, 10ml vial			1046965.00	Yes	EA	1	150	44.43	\$ 6,664.50
Tetracaine Hydrochloride Ophthalmic Solution, 1/2%, 1ml Single Dose Units			1029069.00	Yes	EA	1	50	12.82	\$ 641.00
Ketorolac 60mg 2ml vial			1049909.00	Yes	EA	1	275	4.36	\$ 1,199.00
Thiamine 100mg/ml in 2ml Single dose vial			1188484.00	Yes	EA	1	200	17.08	\$ 3,416.00
Carpulect Injector			1594899.00	Yes	EA	1	20	0.03	\$ 0.60
Ondansetron 4mg dissolve tabs 30ud/bx			1211882.00	Yes	EA	30	30	3.81	\$ 114.30
Ondansetron 4mg 2ml VIAL 25/BX			1259100.00	Yes	EA	25	8	19.44	\$ 155.52
Mucosal Automation Device, Nasal/Oral, Latex free, 3mL Syringe			4204674.00	Yes	EA	1	20	4.60	\$ 92.00
Mucosal Atomization Device Without Syringe			4209994.00	Yes	EA	1	200	3.95	\$ 790.00
Terbutaline, 1mg, 1ml Vial			2480423.00	Yes	EA	1	50	36.00	\$ 1,800.00
Captopril 12.5mg tabs 100/bt			1045524.00	Yes	BT	100	50	80.35	\$ 4,017.50

Total of Section 13:	\$	174,421.49
----------------------	----	------------

Vendor Name:

Henry Schein Inc.

Section 14: Controlled Substance Medication
 Vendors must provide a Transaction Report with all prescription drug shipments. The Transaction Report must contain all information required by the Drug Supply Chain Security Act as outlined by the FDA.

Manufacturer Name	Manufacturer Number	Vendor's Item Number	Substitutes are only allowed for each item stating Yes below.	Unit Item is Delivered/ Invoiced by (Case, Box, Pkg, Carton, Ea, etc.)	Quantity in Unit (Case, Box, Pkg, Carton, Ea, etc.)	Estimated Annual Number of Units to Purchase	Bid Price per Unit	Extended Cost
Morphine Sulfate Injection, USP 1mg/mL, 10mL single dose		1269936.00	Yes	EA	1	20	7.17	\$ 143.40
Morphine Sulfate Injection, USP 10mg/mL, 1mL single dose		1187246.00	Yes	EA	1	200	3.48	\$ 696.00
Midazolam 2mg, 2mL single dose		1282073.00	Yes	EA	1	75	3.32	\$ 249.00
Midazolam 10mg, 2mL single dose		1258467.00	Yes	EA	1	250	4.40	\$ 1,100.00
C3 Ketamine 5mg/ml 10ml 10/bx / controlled		1273383.00	Yes	BX	10	150	59.14	\$ 8,871.00
Fentanyl Citrate Injection USP, 250mcg (0.05mg per mL) in 5mL		1046541.00	Yes	EA	1	900	2.80	\$ 2,520.00
Diazepam Injection 10mg (5mg/mL) 2mL Single Dose		1278192.00	Yes	EA	1	200	47.63	\$ 9,526.00
Total of Section 14:								\$ 23,105.40

PKG

AK

Krejci, Cheryl

From: Goldy, Andy <Andy.Goldy@henryschein.com>
Sent: Wednesday, September 27, 2017 10:46 AM
To: Krejci, Cheryl
Cc: Bruner, Scott
Subject: RE: Required documentation per Bid 18-003 Medical Supplies for Fort Bend County
Attachments: 2785_001.pdf; vendor documentation.pdf

Hello Cheryl,

Thank you for the notification! I have included a summarized response and the requested documentation relevant for Bid 18-003, section 9.6. I did not see section 9.8 on the bid. Please let me know if we are missing that section.

We appreciate the opportunity to work with Fort Bend County.

Best Regards,

Andy Goldy
General Manager, EMS
Henry Schein Medical
513-678-8649 c



#allinHSM #gladtobehere

From: Krejci, Cheryl [mailto:Cheryl.Krejci@fortbendcountytexas.gov]
Sent: Tuesday, September 26, 2017 5:21 PM
To: Goldy, Andy
Subject: Required documentation per Bid 18-003 Medical Supplies for Fort Bend County
Importance: High

Mr. Goldy,

Please provide the documents as required in Bid 18-003 on page 15, Sections 9.6 and 9.8. This information must be provided by responding to this email with all documents attached by 12pm/noon (CST), tomorrow, September 27th. Vendors will be disqualified from Bid 18-003 if all documents are not received by the stated time and date.

Thank you for your cooperation.

Cheryl Krejci
Senior Buyer
Fort Bend County Purchasing
301 Jackson Street, Suite 201
Richmond, TX 77469
832-471-2544

Please consider the environment before printing this email.

E-mail messages may contain viruses, worms, or other malicious code. By reading the message and opening any attachments, the recipient accepts full responsibility for taking protective action against such code. Henry Schein is not liable for any loss or damage arising from this message.

The information in this email is confidential and may be legally privileged. It is intended solely for the addressee(s). Access to this e-mail by anyone else is unauthorized.



September 27, 2017

Fort Bend County
Purchasing Department
Cheryl Krejci
301 Jackson, Suite 201
Richmond, TX 77469

RE: Required documentation per Bid 18-003 Medical Supplies for Fort Bend County

Dear Ms. Krejci:

Thank you for giving Henry Schein the opportunity to clarify our response to Bid #18-003. Below, Henry Schein has provided a response to your email dated September 26, 2017, requesting documents as required in Bid 18-003 on page 15, Sections 9.6 and 9.8:

Bid 18-003, Page 15, Section 9.6

"Vendors are required to provide with their bid response documentation/certification from the manufactures stating the vendor is an approved reseller and/or distributor."

Henry Schein has enclosed a number of manufacturer letters/documentation that should satisfy this request. Henry Schein provides customers with a comprehensive selection of more than 120,000 national and Henry Schein corporate brand products in stock, as well as more than 180,000 additional products available as special-order items, Henry Schein will use commercially reasonable efforts to obtain additional documentation/certification from any remaining manufacturers needed to satisfy Fort Bend County's request.

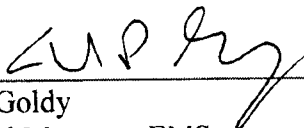
Bid 18-003, Page 15, Section 9.8

Section 9.8 was not outlined in the bid. Could you please provide section 9.8 to ensure we provide you with what is needed for clarification?

We welcome the opportunity to answer any questions you may have regarding our response to clarification, our company, or the products and services offered.

Sincerely,

Henry Schein, Inc.

By: 
Andy Goldy
General Manager, EMS





Henry Schein is an authorized distributor of Pac-Kit products.

Aron Schor

Sales Manager
Pac-Kit

1 Becton Drive
Franklin Lakes, New Jersey 07417
tel: 201.847.6800
www.bd.com



Helping all people
live healthy lives

This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for our products.

If there are any questions please contact the undersigned at your convenience.

Sincerely,

A handwritten signature in black ink, appearing to read "Stan Britton", written over a horizontal line.

Stan Britton
Sr. Director, Distribution Management



This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for our products.

If there are any questions please contact the undersigned at your convenience.

Sincerely,



Chris Cardinale
Vice President of Sales, Eastern Region



This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for our products.

If there are any questions please contact the undersigned at your convenience,

Sincerely,

A handwritten signature in black ink, appearing to read "Ellenmary Martin", written in a cursive style.

Ellenmary Martin
VP of Sales & Marketing



Henry Schein Inc is an authorized distributor of our product line. Any questions concerning this or our products may be directed to Henry Schein or our company.

Thank you

Kate Pearson

A handwritten signature in black ink, appearing to read "Kate", is written over the printed name.

Account representative

Postal Address:

3M Corporate Headquarters
3M Center
St. Paul, MN 55144-1000

Phone:

1-888-3M HELPS
(1-888-364-3577)



This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for our products.

If there are any questions please contact the undersigned at your convenience,

Sincerely,

Mark Stecker

Director, Sales and Marketing

Triad Group

700 W. North Shore Drive
Hartland, WI 53029
Toll-free: (800) 288.1288
Phone: (262) 538.2900
Fax: (262) 538.2972
E-mail: info@triad-group.net



6364 WEST GROSS POINT ROAD
NILES, IL 60714-3916 U.S.A.
Toll Free: (800) 621-4041 Fax: (847) 647-9034

This letter is to confirm that Henry Schein Matrx Medical is an authorized distributor for our products. Tetra Account # 13410.

If there are any questions please contact the undersigned at your convenience.

Sincerely,

Sandy Ketterman
Director of Sales & Marketing
Tetra Medical Supply

Johnson & Johnson

McNeil Consumer Prod

This letter is to confirm that Henry Schein Matrx Medical is an authorized distributor for Johnson and Johnson Inc. This includes but is not limited to the following product lines: Johnson & Johnson Consumer Products, ETHICON, Lifescan, Johnson & Johnson Pharmaceuticals Co., McNeil Consumer Products and Neutrogena Corporation.

If there are any questions please contact the undersigned at your convenience,

Sincerely,

AW

Andrew Williams
National Account Manager
Johnson & Johnson, Inc. Inc.

Camp Hill Road, Fort Washington, Pa 19034
Phone: 800-541-6430 Fax: 800-833-3009



GRAHAM MEDICAL
AARON INDUSTRIES
GRAHAM FIELD
GRATCO

This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for Graham Field, Everest & Jennings and Aaron products. + GRATCO PRODUCTS

If there are any questions please contact the undersigned at your convenience,

Sincerely,

PAM

PAM TYBURSKI

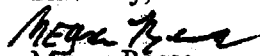


GAM

This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for Duro-Med Industries. This includes the GAM and Mabis Healthcare product lines.

If there are any questions please contact the undersigned at your convenience,

Sincerely,


Megan Reese
Account Manager



W. Lane Card
Vice President of Sales

Fax #: 803-749-6049

Henry Stein Matrx Medical
Glen Watt's
140 Crouch Commercial Court
Irmo, South Carolina 29063

To Whom It May Concern:

Please be advised that Henry Schein-Matrx Medical is an authorized distributor for all Water-Jel Technologies products.

Should you have need of additional information regarding our relationship with Henry Schein-Matrx Medical please contact me direct at 800-551-6499.

Sincerely,

WATER-JEL TECHNOLOGIES

A handwritten signature in black ink that reads "W. Lane Card". The signature is written in a cursive style with a large, looped initial "W".

W. Lane Card
Vice President of Sales

BEMIS MANUFACTURING COMPANY

300 Mill Street, PO Box 900
Sheboygan Falls, Wisconsin 53085-0900

Voice: 920-467-4621 | 800-558-7851
Fax: 920-467-8573
millcorp@BemisMfg.com



FAX

To Whom It May Concern:

This is to certify that Henry Schein is an authorized dealer for Bemis Healthcare products.

Sincerely,

Melissa Carolfi
Melissa Carolfi
Bemis Customer Service

↑
BEMIS



medovations

25 MAY 2008

HENRY SCHEIN/JACKSONVILLE
SOUTHEAST DISTRIBUTION CENTER
8691 JESSE B SMITH COURT
JACKSONVILLE, FL 32219

LETTER OF AUTHORIZATION

This is to confirm that

MEDOVATIONS, INC. – U.S.A.
102 E. KEEFE AVE.
MILWAUKEE, WI 53212 USA
TEL: 414-265-7620 – FAX: 414-265-7628
E-MAIL: MEDO@MEDOVATIONS.COM

Accepts that HENRY SCHEIN is an authorized distributor for MEDOVATIONS
INC. products.

HENRY SCHEIN/JACKSONVILLE
135 DURYEA ROAD
MELVILLE, NY 11747
USA

Regards,
MEDOVATIONS, INC.


Jason Larcheid
Business Services Coordinator

medovations, inc.
102 east keefe avenue
milwaukee, wi 53212 usa
800.558.6408
414.265.7620
fax 414.265.7628
medo@medovations.com
www.medovations.com

Allcare, Inc.

Henry Schein, Inc.
135 Duryea Road
Melville, NY 11747

MANUFACTURING
HARVESTFIELD BRAND

Attn: Mr. Glenn Watts

To Whom It May Concern:

This letter is to authorize the Henry Schein, Inc. as a distributor of Allcare, Inc.

If you have any further question, please let us know. Thank s a lot!

Best regards,


Angela Zhang

The Morgan® Lens

 **MorTan® Inc.**

An ISO 9001/13485 Registered Company

P.O. Box 8719, Missoula, Montana 59807 USA

MORTAN

To: Miami

FROM: MorTan, Inc

RE: Henry Schein Authorized Dealer for MorTan, Inc

This letter is to confirm that Henry Schein is an authorized dealer of our products.

800/ 423-8659 406/728-2522 FAX 406/ 728-9332
e-mail: mortan@morganlens.com www.morganlens.com



Division of Azimuth Corporation

12393 Belcher Road, Suite 450
Largo, Florida 33773-3097 USA
Fax: 800 671 7988
Phone: 800 433 2797
www.sunmedusa.com
info@sunmedusa.com

Henry Schein
Attn: Glenn Watts
Fax: 803-749-6049

Dear Glenn,

This letter is to acknowledge that Henry Schein has been approved to sell SunMed products.

If you have any further questions, please contact customer service at 800-433-2797.

Thank you,
SunMed Customer Service *RC CS*



From: Hygenic Corporation / Performance Health Products
1245 Home Ave.
Akron, Oh 44310

Re: Henry Schein

← HYGENIC

The above mentioned company is an approved distributor of the Hygenic Corporation / Performance Health Products including Thera-Band and Biofreeze. If you have any questions or concerns regarding Henry Schein's ability to distribute products please forward them to the following contact. Thanks in advance for your cooperation.

Erica Pitra
Marketing Coordinator
1245 Home Ave
Akron, Oh 44310
330.633.8460 x 317
epitra@hygenic.com

Thank you,

Erica Pitra



Medical Action
INDUSTRIES INC.

800 Prime Place, Hauppauge, NY 11788
Phone 631.231.4600
Fax 631.231.3075
E-mail: mdci@medical-action.com
www.medical-action.com

To Whom It May Concern:

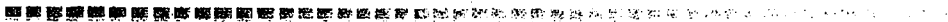
Henry Schein Inc. is an authorized distributor of Medical Action Industries Inc. (Medical Action) products which includes Medical Action's recent acquisition of Medegen/VollRath Medical Products.

If you have any questions please feel free to contact me directly.

VOLL RATH

Sincerely,

Tony Gadzinski
Director of Corporate Accounts
Distribution
1-800-645-7042x326
tonyg@medical-action.com



GEISS, DESTIN & DUNN, INC.

395 HIGHWAY 76 SOUTH
SUITE A
PEACHTREE CITY, GA 30288
770-488-0311 PHONE
770-488-0212 FAX
tgeiss@hmdnetbels.com

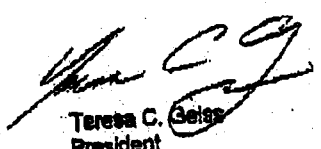
*CUMBERLAND
SWAN BRAND
GELI CARE*

To Whom It May Concern:

Please be advised that Henry Schein Co. is authorized to re-sell the Swan label products in the state of Florida.

Please be advised that Geiss, Destin & Dunn, Inc. is the brand management company for the Swan label program for the VIJON Company in Smyrna, TN.

Sincerely,



Teresa C. Geiss
President
Geiss, Destin & Dunn, Inc.

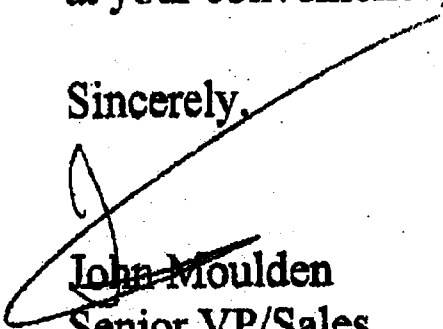


Telephone: (845) 385-8200 • Website: www.dynarex.com
Toll Free: (888) DYNAREX • Website: www.thcnet.com
Fax: (845) 385-8201

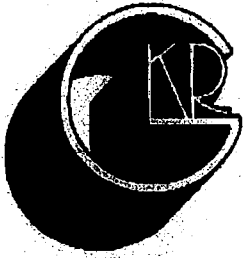
This letter is to confirm that Henry Schein
is an authorized distributor for our products.

If there are any questions please contact the undersigned
at your convenience,

Sincerely,


John Moulden
Senior VP/Sales
Dynarex Corporation

Executive Headquarters: Ten Glenshaw Street, Orangeburg, NY 10962



GKR

This is to certify that Henry Schein Inc. is authorized to sell
and distribute GKR Industries, Inc. products.

Regards,

A handwritten signature in cursive script that reads "Richard Fleury". The signature is written in black ink and is positioned above the typed name.

Richard Fleury
President
GKR Industries, Inc.



COVIDIEN

www.covidien.com

- Kendall
- Kendall Sherwood
- Sage
Puriton Bennett

Glen,

Customer service asked me to confirm that Henry Schien is an authorized distributor of Covidien products. This includes the Kendall, Sherwood and Sage product lines. Please use this as conformation of your Covidien distribution status.

Thanks

Charlie Jordan

Vice President, Distributor Sales
Covidien
15 Hampshire Street
Mansfield, MA 02048
USA

Telephone (Office): 508-261-8202
Telephone (Mobile): 508-982-8913
Fax: 508-261-8562

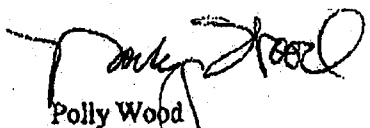
www.covidien.com



To Whom It May Concern:

Please be advised that Henry Schein is indeed an Authorized Distributor of our METTAG products.
We have been doing business with them for several years.

Thank you,



Polly Wood
Accounts Administrator



Leaders in the development of quality EMS products

20270 Charlanne Drive
Redding, California
USA, 96002-9223

Telephone: 530.222.2373
Fax: 530.222.0679
Toll-Free: 1.800.642.6468
E-mail: MINTORD@aol.com

To whom it may concern,

This is a letter of notice that Henry Schein is an Authorized Distributor of all Sager products manufactured by MINTO R & D, Inc. They have been a distributor in good standing since before 1999. This information can also be found on our web site, www.sagersplints.com, under 'Distributors'.

If you have any further questions or comments, please feel free to contact me at 800.642.6468 between the hours of 8 AM and 4 PM, Monday to Friday, PST. Or send an email to sagersales@aol.com.

Thank-you for choosing Sager!

Sincerely,

Melanie K. Lyman

National Sales and Marketing Associate

MINTO R & D, Inc

www.sagersplint.com



easy on your patient

www.sagersplints.com



Medical Products Division
PO Box 12600
Durham, NC 27709
4024 Stirrup Creek, Suite 720
Durham, NC 27703 USA
Phone: 919-544-8000
Fax: 919-433-4989
www.teleflexmedical.com

*RUSCH
HUDSON
CMA*

Mr. Glenn Watts
Matrx Medical/Henry Schein
P.O. Box 3227
140 Crouch Commercial Ct.
Irmo, SC 29063

Dear Mr. Watts,

This notification confirms Matrx Medical/Henry Schein as an authorized distributor of Rusch and Hudson brand products manufactured by Teleflex Medical.

RUSCH (with arrow pointing to the text above)

Sincerely,

HUDSON (with arrow pointing to the text above)

Richard Hooser
Manager, Strategic Accounts



PO Box 1289 – 16 Simulaids Drive – Saugerties NY 12477
800-431-4310 · 845-679-2475 · Fax 845-679-8996

To Whom It May Concern:

This letter is to inform you that Henry Schein, 140 Crouch Commercial Court, Irmo, SC 29063 is an authorized Distributor of Simulaids' products.

There is no territory associated with any domestic distributorship. Therefore, Henry Schein may sell products in any US state.

Sincerely,

A handwritten signature in black ink that reads "Warren A. Johnson". The signature is written in a cursive style.

Warren A. Johnson
Sales
Ext 116
wjohnson@simulaids.com



Celebrating over
60 years of service

WORLDWIDE SERVICE TO EDUCATION • HEALTH • AGRICULTURE • INDUSTRY

901 JANESVILLE AVENUE FORT ATKINSON, WISCONSIN 53538-0901
PHONE 920-563-2446 FAX 920-563-8296
www.eNASCO.com E-MAIL info@eNASCO.com

To Whom It May Concern:

Whereas NASCO, located in Fort Atkinson, Wisconsin, USA is the manufacturer of Life/form® medical training aids, do hereby authorize:
HENRY SCHEIN INC, 135 DURYE RD, MELVILLE NY 11747, USA as an official distributor for Nasco. All Life/form® medical training simulators and manikins have a 3-year warranty.

Sincerely,

Dan Christianson
Director of Health Care Sales
Nasco

Provide documentation showing that you are a Verified Accredited Wholesale Distributor.

All Henry Schein distribution centers are accredited. Following are accreditation numbers as provided by the National Association Boards of Pharmacy.

National Association of Boards of Pharmacy

Name	Address	Accreditation Date	VAWD ID Number
Henry Schein, Inc	41 Weaver Rd, Denver, PA 17517	9/12/2009	6086-276
Henry Schein, Inc	5315 W 74th St #138, Indianapolis, IN 46268	7/27/2009	6026-273
Henry Schein, Inc	8691 Jesse Smith Ct, Jacksonville, FL 32219	7/27/2009	6028-273
Henry Schein, Inc	1001 Nolen Dr #400, Grapevine, TX 76051	12/5/2009	6310-282
Henry Schein, Inc	255 Vista Blvd #101, Sparks, NV 89434	12/12/2009	6777-290
Henry Schein, Inc	180 Vista Blvd, Sparks, NV 89434	4/22/2011	22759-563

These can be verified at the following website:

<http://www.nabp.net/programs/accreditation/vawd/vawd-accredited-facilities/>

Precept[®]

To Whom It May Concern:

Henry Schein is a distributor of Precept Medical Products.

Thank you,

Precept Medical Products

Precept Medical Products, Inc. P.O. Box 2400 370 Airport Road Arden, NC 28704-2400
Phone: 828-681-0209 Fax: 828-687-3605



To whom it may concern:

This letter confirms that Henry Schein Co. and all its subsidiaries are authorized distributors of Amsino International. Henry Schein is a dealer in good standing and is authorized to purchase any and all Amsino International Products.

If you require anything else, please feel free to contact me directly.

Sincerely yours.

Lee Waitz
Senior Vice-President Sales
Amsino International
855 Towne Center Drive
Pomona, CA. 91767
909-626-5888
909-626-3888 (Fax)
lee_waitz@amsino.com
www.amsino.com

This transmission is intended only for the use of the addressee and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If you are not the intended recipient, any distribution, copying, publication or use of this communication for any purpose is strictly prohibited. If you have received this communication in error, please notify us immediately and delete this message.


NEOTECH

Products, Inc.

This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for Noetech Products, Inc.

If there are any questions please contact the undersigned at your convenience,

Sincerely,



Kathy Millsap
Customer Service Manager
Neotech Products, Inc.

Ambu⁺

Ambu Inc.
6740 Baymeadow Drive
Glen Burnie, Maryland
Phone: 800-262-8462
Fax: 800-262-8673
Website: www.ambu.com

This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for our products.

If there are any questions please contact the undersigned at your convenience.

Sincerely,



Carol Milli
Office Mgr.



Cardinal Health

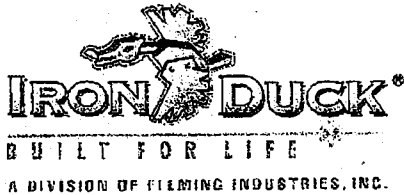
CARDINAL
ALLIANCE
ALARIS
CAREFUSION

This letter is to confirm that Henry Schein Matrx Medical is an authorized distributor for Cardinal Health products that include Alaris®, Allegiance® and Airlife™ products.

If there are any questions please contact the undersigned at your convenience,

Sincerely,

Lynn Morris



FLEMING INDUSTRIES

LETTER OF AUTHORIZATION

Iron Duck is a manufacturer of Emergency Medical Services Devices and is located at 20 Veterans Drive, Chicopee, Massachusetts 01022 U.S.A.

Henry Schein/Matrx Medical is a well established Sales and Marketing company located at 140 Crouch Commercial Court, Irmo, SC 29063.

We, the representatives of Iron Duck grant authority to Henry Schein/Matrx Medical to market and sell our products in the United States. We recognize Henry Schein/Matrx Medical as an official distributor for our products in the United States. We grant authority to Henry Schein/Matrx Medical to offer our products for sale in the United States, to represent us in bid offers and to be responsible for delivering and servicing these products. We will accept purchase orders from Henry Schein/Matrx Medical and fill those orders according to the terms of normal good business relationships. Henry Schein/Matrx Medical accepts the authority to act responsibly as a distributor of the Iron Duck Company in the United States and thereby is officially authorized as an Iron Duck distributor in the United States.

Respectfully,

Lori Stosz
Director of Sales & Marketing
Iron Duck

20 Veterans Drive
Chicopee, MA 01022

phone: (413) 593-3300
fax: (413) 593-5800

ldinfo@ironduck.com



FERNO

70 Weil Way ! Wilmington, OH 45177-9371 ! (937) 382-1451 ! FAX (937) 382-1191

Int'l FAX (937) 382-6569

Visit us at our web site: www.ferno.com

This letter is to confirm that Henry Schein Matrx Medical is an authorized distributor in good standing for Ferno-Washington Inc.

If there are any questions please contact the undersigned at your convenience.

Sincerely,

Jim West
Manager, National Accounts
Ferno-Washington, Inc.

EMERGENCY ● MORTUARY ● ILLE ● INTERNATIONAL
DIVISIONS OF FERNO-WASHINGTON, INC.



Terumo Group Website >>

SEARCH [input field]

- PRODUCTS
- FIND BY APPLICATION
- FIND BY PRODUCT CODE
- FIND A TERUMO DISTRIBUTOR
- FIND YOUR LOCAL TERUMO REP

Click to Visit the Vet Area



News/Events

A Terumo initiative aimed at protecting the global environment. MORE >

Terumo Joins the United Nations Global Compact MORE >

Terumo Corporation, A Global Leader in Medical Device Technology, Celebrates 90th Anniversary MORE >

Terumo Medical Corporation Announces FDA 510K Clearance Of The K-Pack SureShield™ Hypodermic Needle With Integrated Passive Sharps Protection MORE >

Look for Terumo Medical Products at the following events... MORE >

Home > Customer Support > List of Authorized Terumo Distributors

List of Authorized Terumo Distributors Medical Distributors

- Cardinal Health 1-800-964-5227
- CuraScript 1-888-773-7376 / 1-888-773-7386 (fax)
- Delaware Valley Surgical Supply 1-800-686-DVSS (3877) / 1-610-485-4433 (fax)
- Fisher Healthcare 1-800-640-0640
- Hony Schein Medical 1-800-772-4346 / 1-800-329-9109 (fax)
- McGuff Company Medical Products 1-800-854-7220 / 1-714-540-5614 (fax)
- McKeason Medical-Surgical 1-800-446-3008
- MEDLINE 1-800-833-5463
- MMS 1-800-473-2332 / 1-314-291-0208 (fax)
- Moore Medical 1-800-234-1464 / 1-800-944-6867 (fax)
- Oncology Supply Company 1-800-633-7555
- Online Procurement Source for Federal Government employees
- Owens and Minor 1-856-423-9900
- Physician's Sales and Services, Inc. to locate your nearest service center
- Professional Hospital Supply 1-707-429-2884 / 1-707-429-0180 (fax)
- Quick Medical 1-888-345-4858 / 1-425-222-6030 (fax)
- Seacoast Medical 1-800-732-2115 / 1-677-681-6544 (fax)
- Southern Anesthesia 1-800-824-5925
- VWR Scientific Products 1-800-932-5000

Veterinary Distributors

- Merritt Veterinary Supply 1-800-972-4744
- Midwest Veterinary Supply 1-852-894-4350
- MIW! Vet Supply 1-800-824-3703
- Penn Veterinary Supply
- Butler Schein Animal Health 1-800-258-2146
- Victor Medical 1-949-855-0337
- Webster Veterinary Supply 1-800-225-7911

TERUMO MEDICAL CORPORATION

Corporate Office
2101 Cottontail Lane
Somerset, NJ 08873
tel. : 1-732-302-4900
fax. : 1-732-302-3083
Toll Free: 1-800-283-7888
support@terumomedical.com

List of Authorized Terumo Distributors

Downloadable Catalogs

WelchAllyn

Tyco's

Welch Allyn sells its products through Authorized Distributors. To locate the distributors in the United States near you, please choose one of the two search methods below.

Customers please note that all of our national distribution partners are listed in our locator results by their closest branch office location. If you do not see their branch location in your results, try expanding your search to a 50 or 100 mile radius to locate the branch office nearest you. If you are searching for a local sales representative for one of these national partners, you can also contact them directly at:

Cardinal Health: 1-888 444 5440

Henry Schein, Inc.: 1-800-P-SCHEIN (1-800-772-4346)

McKesson Medical: Visit Website

Owens & Minor: 1-800-488-8850

smiths medical

bringing technology to life

Smiths Medical North America
Head Office,
500 Cordwainer Drive, 3rd Floor,
Norwell, MA 02061 USA
T: +1 781 792 2500
F: +1-781 792 2563
www.smiths-medical.com

Dear Sandra,

We have received your request for confirmation that Henry Schein is an authorized distributor of Smiths Medical products. While we can state that Henry Schein is an authorized distributor.

Smiths Medical appreciates your business and if you have any questions, please feel free to contact me.

Best regards,

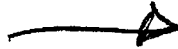


Cindy Loughheed
Director of Distribution, Alternate Care
303-949-5213

Distributor Links



To make it more convenient for you to purchase Safetec® products, we offer select items through trusted distribution partners. Visit one of the the web sites below to place an order today. Distributors are listed below in alphabetical order. Please click on a logo to place and order today!



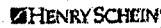
Health Mega Mall



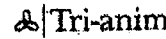
Therapak



Thermo Fisher Scientific



Henry Schein



Tri-anim



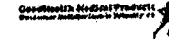
Hopkins Medical



Unity School Bus Supply



IDC Medical



Good Health Medical Products



Kit-Care Corporation



WNL Safety Products



Zee Medical



1565 South Shields Drive, Waukegan, IL 60085
(847) 688-9968 Fax: (847) 688-9768

St. Louis Office: 314-698-2733

February 8, 2013

Attn: Scott Bruner, Customer Service Manager
Henry Schein EMS

Re: Authorized Distributorship

Dear Scott,

This is to certify that Henry Schein of Melville, NY is an authorized distributor of ADI Medical, Waukegan, IL. They have been authorized to distribute our complete product line on our behalf. This authorization will remain valid until otherwise notified.

Thank you,

A handwritten signature in cursive script that reads "Mark Becker".

Mark Becker
National Account Manager

Perrigo®

Henry Schein Inc and the divisions of
are authorized distributors of our product line, which includes the Perrigo and Paddock Lab Items.

Thank you for your inquiry.

Steve Baker

Customer Service

Baxter Healthcare Corporation
 Global Regulatory Affairs
 32650 N. Wilson Road
 Round Lake, IL 60073



Baxter Healthcare Corporation Authorized Distributors of Record

Distributor Name	City	State	Product(s)
ABO Pharmaceuticals	San Diego	California	Particular, specified products
Accredo Health Group	Nashville	Tennessee	Particular, specified products
AmeriSource Bergen	Chesterbrook	Pennsylvania	Particular, specified products
ASD Specialty	Addison	Texas	Particular, specified products
BDI Pharma, Inc.	Columbia	South Carolina	Particular, specified products
BioCare/United Blood Services/ Blood Systems, Inc.	Scottsdale	Arizona	Particular, specified products
Cardinal Health	Dublin	Ohio	Particular, specified products
Cardinal Health SPD	La Vergne	Tennessee	Particular, specified products
Caremark, LLC	Northbrook	Illinois	Particular, specified products
FFF Enterprises	Temecula	California	Particular, specified products
H.D. Smith	Wood Dale	Illinois	Particular, specified products
McKesson	San Francisco	California	Particular, specified products
McKesson Plasma and Biologics LLC	San Francisco	California	Particular, specified products
McKesson Specialty Care	LaVergne	Tennessee	Particular, specified products
Morris & Dickson	Shreveport	Louisiana	Particular, specified products
National Hospital Specialties (NHS)	Hackensack	New Jersey	Particular, specified products
Novis Pharmaceutical, LLC	Miami	Florida	Particular, specified products
Prodigy Health Supplier	Austin	Texas	Particular, specified products
US Oncology Specialty	Fort Worth	Texas	Particular, specified products
Ace Surgical	Brockton	Massachusetts	Particular, specified products
Alliance Medical	Russellville	Missouri	Particular, specified products
Arkansas Surgical Supply	Siloam Springs	Arkansas	Particular, specified products
Avid Medical	Toano	Virginia	Particular, specified products
B. Braun Medical Inc.	Bethlehem	Pennsylvania	Particular, specified products
Baycare Integrated Service	Tampa	Florida	Particular, specified products
BDI Pharma, Inc.	Columbia	South Carolina	Particular, specified products
Beachside Surgical Supplies, Inc.	Huntington Beach	California	Particular, specified products
Bell Medical Services, Inc.	Marlboro	New Jersey	Particular, specified products
Blue Medical	Jacksonville	Florida	Particular, specified products
Borschow Headquarters	San Juan	Puerto Rico	Particular, specified products
Bound Tree	Henniker	New Hampshire	Particular, specified products
Buffalo Hospital Supply	Buffalo	New York	Particular, specified products
Burrows	Wheeling	Illinois	Particular, specified products
Butler Schein Animal Health Supply	Dublin	Ohio	Particular, specified products
Caligor Northeast	Pelham Manor	New York	Particular, specified products
CAPS	Englewood	New Jersey	Particular, specified products

Baxter Healthcare Corporation
 Global Regulatory Affairs
 32650 N. Wilson Road
 Round Lake, IL 60073



Baxter Healthcare Corporation Authorized Distributors of Record

Distributor Name	City	State	Product(s)
Cardinal Health Med Prod -CS	Albuquerque	New Mexico	Particular, specified products
Cardinal Health Med Prod -OEM	Albuquerque	New Mexico	Particular, specified products
Cardinal Health Med Prod -VLCC	Albuquerque	New Mexico	Particular, specified products
Clafin	East Providence	Rhode Island	Particular, specified products
Clint Pharmaceuticals, Inc.	Old Hickory	Tennessee	Particular, specified products
Columbus Serum Co	Columbus	Ohio	Particular, specified products
Cornell Surgical Co	Bergenfield	New Jersey	Particular, specified products
Dekroyft Medical	Peoria	Illinois	Particular, specified products
Delaware Valley Surgical	Boothwyn	Delaware	Particular, specified products
Delcrest Medical Products	Ivyland	Pennsylvania	Particular, specified products
Drogueria Betances INC	Caguas	Puerto Rico	Particular, specified products
Drug Valet Headquarters	Tempe	Arizona	Particular, specified products
Druzak Medical INC	Aliquippa	Pennsylvania	Particular, specified products
First Biomedical Inc.	Olathe	Kansas	Particular, specified products
Geriatric Medical Surgical	Everett	Massachusetts	Particular, specified products
Gerimedix	Brooklyn	New York	Particular, specified products
Glenn Valley	Marlborough	Massachusetts	Particular, specified products
Grogan's Healthcare	Lexington	Kentucky	Particular, specified products
HD Smith Wholesale Drug	Springfield	Illinois	Particular, specified products
Hanna's Pharmaceutical	Wilmington	Delaware	Particular, specified products
Harvard Drug Headquarters	Livonia	Michigan	Particular, specified products
HD Smith Headquarters	Springfield	Illinois	Particular, specified products
Henry Schein Inc	Roanoke	Virginia	Particular, specified products
Integrated Health	Owings Mills	Maryland	Particular, specified products
Integrated Med Systems	Alsip	Illinois	Particular, specified products
J & B Medical	Wixom	Michigan	Particular, specified products
McKesson Drug	Dallas	Texas	Particular, specified products
McKesson Medical Surgical	Richmond	Virginia	Particular, specified products
MDS Associates	Cheektowga	New York	Particular, specified products
Med E Quipt	St. Louis	Missouri	Particular, specified products
Med Health	North Las Vegas	Nevada	Particular, specified products
Medical Marketing	Cockeysville	Maryland	Particular, specified products
Medical Products	Ripley	Mississippi	Particular, specified products
Medisupply, INC	Baldwin	New York	Particular, specified products
Medline Industries, Inc.	Mundelein	Illinois	Particular, specified products
Metro Med Supply Inc.	Nashville	Tennessee	Particular, specified products
Midwest Medical Supply	Earth City	Missouri	Particular, specified products
Midwest Veterinary Supply Inc	Burnsville	Minnesota	Particular, specified products

Updated 31-January-2013



Baxter Healthcare Corporation Authorized Distributors of Record

Distributor Name	City	State	Product(s)
Mohawk	Utica	New York	Particular, specified products
Moore Medical	New Britain	Connecticut	Particular, specified products
Morris Dickson	Shreveport	Louisiana	Particular, specified products
MWI Veterinary Supply Co.	Meridian	Idaho	Particular, specified products
MYMEDSOURCE	Anaheim	California	Particular, specified products
Neil Medical	Kinston	North Carolina	Particular, specified products
Normed	Seattle	Washington	Particular, specified products
North East Medical Products	Old Saybrook	Connecticut	Particular, specified products
Omega Pharm	Des Moines	Iowa	Particular, specified products
Omni Medical	Walled Lake	Michigan	Particular, specified products
Oncology Supply Headquarters	Dothan	Alabama	Particular, specified products
Oncology Therapeutics Network Headquarters	South San Francisco	California	Particular, specified products
Owens & Minor	Richmond	Virginia	Particular, specified products
Park Surgical	Brooklyn	New York	Particular, specified products
Patterson Veterinary Supply	Devens	Massachusetts	Particular, specified products
PCI	Secaucus	New Jersey	Particular, specified products
Penn Veterinary Supply Inc	Lancaster	Pennsylvania	Particular, specified products
Pharm Omega/First Medical	Des Moines	Iowa	Particular, specified products
Pharmaceutics	Tulsa	Oklahoma	Particular, specified products
Pharmco Health	Fort Lauderdale	Florida	Particular, specified products
Pharmed Corp	Westlake	Ohio	Particular, specified products
Prescription Containers	Secaucus	New Jersey	Particular, specified products
Priority Healthcare Headquarters	Lake Mary	Florida	Particular, specified products
Progressive Medical	Vista	California	Particular, specified products
PSI	Tulsa	Oklahoma	Particular, specified products
PSS Headquarters	Jacksonville	Florida	Particular, specified products
Redline	Dallas	Texas	Particular, specified products
Riverside Home Medical	Riverside	California	Particular, specified products
SBH Medical	Worthington	Ohio	Particular, specified products
Seacoast Headquarters	Omaha	Nebraska	Particular, specified products
Seneca Corp	Tiffin	Ohio	Particular, specified products
Seneca Knoxville	Knoxville	Tennessee	Particular, specified products
Seneca Ohio	Tiffin	Ohio	Particular, specified products
SHA Pharmaceuticals Inc	Pelham	Alabama	Particular, specified products
Smith Drug Headquarters	Spartanburg	South Carolina	Particular, specified products
Smith Surgical Supply	Peoria	Illinois	Particular, specified products
Southeastern Emergency	Youngsville	North Carolina	Particular, specified products
TRI ANIM	Sylmar	California	Particular, specified products

Baxter Healthcare Corporation
 Global Regulatory Affairs
 32650 N. Wilson Road
 Round Lake, IL 60073



Baxter Healthcare Corporation Authorized Distributors of Record

Distributor Name	City	State	Product(s)
TRI -V	Sterling Hts.	Michigan	Particular, specified products
United Surgical Supply	Van Nuys	California	Particular, specified products
Universal MedSurg Supplies	Deer Park	New York	Particular, specified products
US Oncology Specialty Headquarters	Houston	Texas	Particular, specified products
Value Drug	Altoona	Pennsylvania	Particular, specified products
VE Ralph & Son	Kearny	New Jersey	Particular, specified products
Ves International	Dallas	Texas	Particular, specified products
VWR International	Radnor	Pennsylvania	Particular, specified products
Windstone Medical Inc.	Billings	Montana	Particular, specified products
Wolf Med	Sunrise	Florida	Particular, specified products
Zeza	Chester	New York	Particular, specified products
Cardinal Health	Dublin	Ohio	Particular, specified products
Owens & Minor	Mechanicsville	Virginia	Particular, specified products



Everywhere It Matters.

This letter will confirm that Henry Schein is an authorized distributor of our product lines, these include Eco-Lab, Huntington, MDI, Microtek Medical, Go-Jo.

If you have any questions please contact us at the address below.

Cordially

Joe Smith

612 Lehnberg Road
Columbus, MS 39704

Toll Free: (800) 936-9248
Phone: (662) 327-1863
Fax: (800) 642-0255
Fax: (662) 327-5921
Customer Service: (800) 824-3027

MERIDIAN
MEDICAL TECHNOLOGIES

A subsidiary of King Pharmaceuticals[®], Inc.

Scott

Thank you for the phone call, to confirm our phone conversation:

Henry Schein Inc is an authorized distributor of our product line. If you need anything else please let me know.

Bryan Salapong

Customer Service rep

Meridian Medical Technologies



1717 West Collins Avenue, Orange, CA 92867
Phone: 800.841.1428 or 714.516.7788
Fax: 800.638.7390 or 714.516.7581
metrex.com

To whom it may concern:

Henry Schein Inc is an authorized distributor of our entire product line.

Ed Ritz

National Accounts Sales Mgr.

Metrex



9115 Hague Road
Indianapolis, Indiana 46250
-317-521-2000

To whom this may concern:

Henry Schein Inc is an authorized distributor of our product lines.
Thank you and please advise if any further information is required.

Roche Customer Service

**PHYSIO
CONTROL**

**Thank you for your inquiry, yes Henry Schein Inc is an authorized distributor of our entire product line.
Any questions or concerns please contact us at the information below or contact**

Cordially

**Katie Young
Customer Service**



Medtronic

**Medtronic Emergency Response Systems
11811 Willows Road Northeast
Redmond, WA 98052-2003 USA
Telephone: 425.867.4000
Toll Free (USA only): 800.442.1142
Fax: 425.867.4121
Internet: www.medtronic-ers.com
www.medtronic.com**

**Medtronic Europe S.A.
Medtronic Emergency Response Systems
Rte. du Moliau 31
Case postale 84
1131 Tolochenaz
Switzerland
Telephone: 41.21.802.7000
Fax: 41.21.802.7900**



To whom it may concern:

Henry Schein is an authorized distributor of Akorn Pharmaceuticals.

Jeff Smith

Customer Service

Sterile Ophthalmic and Injectable Pharmaceuticals
©Akorn, Incorporated | Lake Forest, Illinois, USA



February 8, 2013

Scott Bruner
Henry Schein

To whom it may concern:

Please know that Henry Schein is an authorized distributor of Allied Healthcare Products, Inc.

If there are any questions regarding this please contact me directly at 314-268-1603.

Sincerely,

Jeff Krenk
Allied Healthcare Products, Inc.

UNION SPRINGS™
PHARMACEUTICALS

9990 Old Union Road Union, KY 41091

PHONE 859-384-4029

FAX 859-384-4083

Scott,

Yes to confirm our phone conversation today, Henry Schein is an authorized distributor of our product line.

Take care and if you need anything else, please let me know

George Wells

Mgr.Customer Service



MedSource

INTERNATIONAL, LLC

Medical Supplies for the Health and Emergency Professional

Toll Free: 800-876-8264
Phone: 952-472-0131
Fax: 952-472-0136
Website: www.gomedsource.com

5346 Shoreline Drive Mound, MN 55364

February 8, 2013

To Whom It May Concern:

Henry Schein is an Authorized Distributor of MedSource International product.

Jason Ring
National Sales Manager



quality medical products

Henry Schein, Inc.
135 Duryea Road
Melville, NY 11747

Dear Valued Customer:

Thank you for your continued support of Biomedix and the SELEC-3® I.V.
administration sets.

On behalf of everyone at Biomedix, we have truly valued your business throughout the
years and look forward to servicing you in the future.

Sincerely,

A handwritten signature in cursive script, appearing to read "Richard C. Sweet".

Richard C. Sweet
President



ORF CONSULTING

3917 Viewcrest Drive
Salt Lake City, Utah 84124

T 801-793-6006
F 801-665-1553

Work URL

February 8, 2013

To whom it may concern:

This Letter is to inform any interested party that Henry Schein, Inc. is an authorized distributor of Orf Consulting goods and products. For additional information, please feel free to contact our office directly

Sincerely yours,

Greg Adondakis

Medique *The Brands That Work™*
Products

Thank you for your inquiry, yes Henry Schein Inc is an authorized distributor of our entire product line.

Any questions or concerns please contact us at the information below or contact

Henry Schein, Inc.: 1-800-772-4346

Cordially

Steve Smith
Customer Service

4159 Shoreline Drive.

St. Louis, MO 63045

Telephone: 800.634.7680

FAX: 800.442.5540



To Whom It May Concern:

This letter is to inform any interested party that Henry Schein, Inc. is an authorized distributor of Motion Medical Distributing's goods and products. For additional information, please feel free to contact our office directly.

Thank you.

Mikiah A. Haslam
Sales Director

NONIN

**Scott Bruner
Manager, Customer Service
Henry Schein/ Matrix
P.O. BOX 3227
Irmo, SC 29063**

To Whom It May Concern,

Please be advised that Henry Schein is an Authorized Distributor of Nonin Medical, Inc. products in the state of Florida.

If you have any questions please feel free to contact me.

Sincerely,

**Steve Carey
Regional Sales Manager
Nonin Medical, Inc.**



Jesse A. Garringer
Vice President
Henry Schein, EMS

Dear Jesse,

On July 1, 2012, Hospira will be increasing acquisition pricing to Henry Schein EMS on various contracted products. To assist with communicating to your customers the percent increase Henry Schein EMS is receiving on those products, I have created a product listing that shows the percent increases by product. The listing is sorted alphabetically for the most significant NDC Products.

Sincerely,

Jim Custod
Hospira Worldwide, Inc.
National Account Executive
Trade Relations

Hospira List-Tuc# (Product Code) NDC Products	Product Description	Percent Increase
08062-01	AMIDATE (ETOMIDATE) USP 20MG 10ML AMP	20.81%
08061-01	AMIDATE (ETOMIDATE) USP 40MG 20ML AMP	0.16%
08060-29	AMIDATE (ETOMIDATE)USP 40 MG 20 ML LS ABJ SYR W/LL	25.31%
05921-01	AMINOPHYLLINE INJ USP 250MG 10ML IN 20ML FTV	173.33%
05922-01	AMINOPHYLLINE INJ USP 500MG 20ML IN 50ML FTV	117.11%
04911-34	ATROPINE SULF (0.1MG/ML 10 ML) ABJ LS	143.39%
09630-05	ATROPINE SULF INJ, USP(0.05MG/ML 5ML)(PED)ANSYR SYR	99.68%
04910-34	ATROPINE SULFATE (0.1MG/ML 5 ML) ABJ LS	110.37%



AMERICAN DIAGNOSTIC CORPORATION

AMERICAN DIAGNOSTIC

To Whom It May Concern:

Please be advised Henry Schein/Matrx Medical is an authorized distributor for American Diagnostic Corporation.

Any inquiries regarding distributorship may be directed to Matrx or directly to American Diagnostic Corporation.

Sincerely,

Barbara Prescia

Barbara Prescia
National Account Manager
American Diagnostic Corporation

55 Commerce Drive
Hauppauge, NY 11788
Customer Service: 1-800-ADC-2670
Voice: 1-631-273-9600
Fax: 1-631-273-9859
email: info@adctoday.com
<http://www.adctoday.com>
NEW YORK • LONDON • TAIPEI • TOKYO



ARROW INDUSTRIES
GRATCO

This letter is to confirm that Henry Schein Matrix Medical is an authorized distributor for Graham Field, Everest & Jennings and Aaron products. † GRATCO PRODUCTS

If there are any questions please contact the undersigned at your convenience,

Sincerely,

PAM

PAM TYBURSKI



This letter is to confirm that Henry Schein Matrx Medical is an authorized distributor for our products.

If there are any questions please contact the undersigned at your convenience,

Sincerely,

A handwritten signature in black ink that reads "Donald R. Guss". The signature is written in a cursive style and includes a long horizontal flourish extending to the right.


Authorized Distributors - Authorized Distributors - American Regent - Microsoft Internet Explorer provided b...

http://www.americanregent.com/default.aspx?PageID=8102

File Edit View Favorites Tools Help

Authorized Distributors - Authorized Distributors - Am...

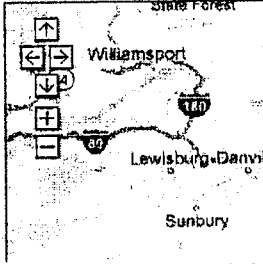
ABOUT US | NEWS & EVENTS | DISTRIBUTORS | VENOFER | CONTRACT MANUFACTURING | GRANT REQUEST



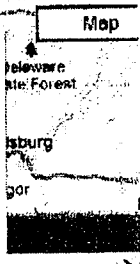
Authorized Distributors

PRODUCT CATALOG

- All Products
- Therapeutic Injectable, Electrolytes & IV Additives
- Multiple Trace Element Additives
- Multiple Electrolyte Additives
- Single Entity Trace Elements
- Inhalation & Oral Solutions
- Ophthalmics & Otics



HENRY SCHEIN INC.
 41 WEAVER ROAD
 DENVER, PA 17517
 Phone: 717-335-7230
[Visit Website](#)
[Get Directions](#)
 Approx: 112 miles



http://www.americanregent.com/Home.aspx

Internet 100%

start 2 PIS... Authentic... My Occu... Inbox... ekam Ist... 2:45 PM

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
CERTIFICATION OF FILING**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Henry Schein Inc
Irmo, SC United States

Certificate Number:
2017-268839

Date Filed:
10/05/2017

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Fort Bend County

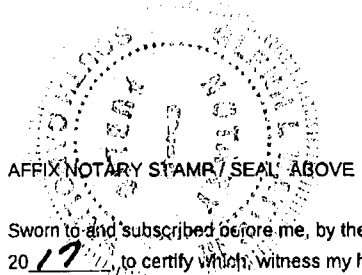
Date Acknowledged:

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
B18-003
Medical Supplies

4	Name of Interested Party	City, State, Country (place of business)	Nature of Interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.



[Signature]
Signature of authorized agent of contracting business entity
ANDY GOLDY, General Manager

AFFIX NOTARY STAMP / SEAL ABOVE
Sworn to and subscribed before me, by the said Andy Goldy, this the 5th day of October, 20 17, to certify which, witness my hand and seal of office.

[Signature] Signature of officer administering oath
GLENN L. WATTS III Printed name of officer administering oath
NOTARY - S. CAROLINA Title of officer administering oath

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 Henry Schein Inc
 Irmo, SC United States

Certificate Number:
 2017-268839

Date Filed:
 10/05/2017

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Fort Bend County

Date Acknowledged:
 10/10/2017

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
 B18-003
 Medical Supplies

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath