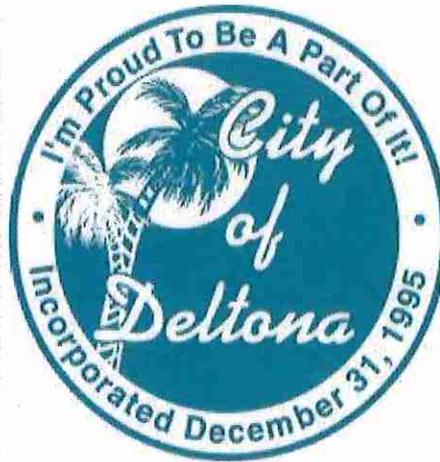


City of Deltona



BID# 22032

BID NAME: Medical Supplies &  
Pharmaceuticals

DUE DATE: May 3, 2022      TIME: 2:30PM

SUBMITTED BY:

<p><b>Submit Bid to:</b></p> <p><b>CITY OF DELTONA</b></p> <p>2345 Providence Blvd. Deltona, Florida 32725 <b>Attn: Purchasing</b></p> <p><b>CLEARLY MARK SEALED ENVELOPE WITH BID NAME AND NUMBER</b></p>	<p><b>INVITATION TO BID# 22032 FOR:</b></p> <p><b>MEDICAL SUPPLIES &amp; PHARMACEUTICALS</b></p>
<p><u>Contact:</u></p> <p>Mary Perez BUYER Phone: (386) 878-8580 Fax: (386) 878-8571</p> <p><b>EMAIL QUESTIONS TO:</b> <b>E-Mail Address: meperez@deltonafl.gov</b></p>	<p>BIDDER NAME: <u>Life-Assist, Inc.</u> <u>11277 Sunrise Park Drive</u> <u>Rancho Cordova, CA. 95742</u></p>
<p><b><u>BID DUE DATE &amp; TIME:</u></b> <b>TUESDAY, MAY 3, 2022 AT 2:30PM AT CITY HALL, 1<sup>ST</sup> FLOOR CONFERENCE ROOM LOCATED AT 2345 PROVIDENCE BOULEVARD, DELTONA, FLORIDA</b></p>	<p><b>MAILING ADDRESS:</b> _____ <u>11277 Sunrise Park Drive</u> <u>Rancho Cordova, CA. 95742</u></p>
<p><u>Location of Public Opening:</u> City of Deltona, 1ST Floor Conference Room 2345 Providence Blvd., Deltona, FL 32725</p>	<p>Phone#: <u>800-824-6016</u></p> <p>Fax#: <u>800-290-9794</u></p>

**GENERAL CONDITIONS, INSTRUCTIONS AND INFORMATION FOR  
BIDDERS**

These documents constitute the complete set of terms and conditions, specification requirements, and bid forms. All bid sheets and attachments must be executed and submitted in a sealed envelope. The face of the envelope shall contain Bidder's name, return address, the date and time of bid opening, the bid number and title. Bids not submitted on the enclosed Bid Form shall be rejected. Bidders shall submit three (3) complete sets (one [1] original and two [2] copies) of their bid, complete with all supporting documentation. **SUBMITTAL OF A BID IN RESPONSE TO THIS INVITATION TO BID CONSTITUTES AN OFFER BY THE BIDDER.** Bids which do not comply with these requirements may be rejected at the option of the City.

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

**CONTACT:** All prospective bidders are hereby instructed not to contact any member of the City of Deltona Commission, City Manager, or City of Deltona Staff members other than the noted contact person OR another member of the City's Purchasing Division regarding this Invitation to Bid or their bid proposal at any time during the bid process. Any such contact shall be cause for rejection of your bid proposal. The Bid process is not over until an award is made.

**DELAYS:** The City, at its sole discretion, may delay the scheduled due dates indicated above if it is to the advantage of the City to do so. The City will notify bidders of all changes in scheduled due dates by written addendum.

**EXECUTION OF BID:** Bid must contain a manual signature, in ink, of an authorized representative, who has the legal ability to bind the Bidder in contractual obligations in the space provided on the Bid Response Form. Failure to properly sign the Bid shall invalidate same, and it shall not be considered for award. Bid must be typed or legibly printed in ink. Use of erasable ink is not permitted. All corrections made by Bidder to any part of the bid document must be initialed in ink. The original bid conditions and specifications cannot be changed or altered in any way. Altered bids will not be considered. Clarification of bids submitted shall be in letter form, signed by bidders and attached to the bid.

**BIDDER INFORMATION:** Bidder shall complete the "Corporate Authority", "Joint Venture", "Sole Proprietorship", or "Partnership" portion of the Bidder Information Sheet, whichever part applies, and include with their bid submittal.

**JOINT VENTURES:** Bids submitted by firms under "joint venture" arrangements or other multi-party agreements must submit a power of attorney delegating authority to one principal with authority to negotiate and execute any/all contract documents resulting from negotiations/award of this Invitation to Bid.

**NO BID:** If not submitting a bid, respond by returning only the Statement of No Bid, and give the reason in the space provided. Failure to respond three (3) times in succession without justification may be cause for removal of the Bidders name from the mailing list.

**BID OPENING:** Shall be public, at the above address, on the date and at the time specified above. The bid time shall be scrupulously observed. Under no circumstances shall bids delivered after the time specified be considered; such bids will be returned unopened. The City will not be responsible for late deliveries or delayed mail. The time/date stamp clock located in the Finance Department serve as the official authority to determine lateness of any bid. It is the Bidders sole responsibility to assure that his/her bid is complete and delivered at the proper time and place of the bid opening. Bids which for any reason are not so delivered will not be considered. Offers by facsimile, telegram or telephone are **not**

acceptable. A bid may **NOT** be altered by the Bidder after opening of the bids. Bid tabulations will be furnished upon written request which includes a self-addressed, stamped envelope.

Persons with disabilities needing assistance to participate in the Public Bid Opening should contact the City Clerk at least 48 hours in advance of the meeting at 386-561-2100.

**TAXES:** The City is exempt from Federal Excise and State Sales Taxes on direct purchases of tangible personal property. The City's exemption numbers are on the face of the purchase order. If requested, the Purchasing Manager will provide an exemption certificate to the awarded Bidder. Vendors/contractors doing business with the City shall **not** be exempted from paying sales tax to their suppliers for materials to fulfill contractual obligations with the City nor shall any Vendor/Contractor be authorized to use the City's Tax Exemption Number in securing such materials.

**CERTIFICATES**

The City reserves the right to require proof that the bidder is an established business and is abiding by the Ordinances, Regulations, and Laws of their Community and the State of Florida such as but not limited to: Occupational Licenses, Business Licenses, Florida Sales Tax Registration, Federal Employee Identification Number.

**DISCOUNTS:** Cash discounts for prompt payment shall **not** be considered in determining the lowest net cost for bid evaluation purposes.

**MISTAKES:** Bidders are expected to examine the terms and conditions, specifications, delivery schedule, bid prices, extensions and all instructions pertaining to supplies and services. **FAILURE TO DO SO WILL BE AT BIDDER'S RISK.** In the event of extension error(s), the unit price will prevail and the Bidder's total offer will be corrected accordingly. Written amounts shall take precedence over numerical amounts. In the event of addition errors(s), the unit price, and extension thereof, will prevail and the Bidder's total offer will be corrected accordingly. Bids having erasures or corrections must be initialed in ink by the Bidder.

**AWARD TERM** Contracts resulting from this Invitation for Bid will run for an initial period of three year (3) years, renewable for two additional one (1) year periods. Both the City and the vendor must mutually agree upon the renewals in writing. Rates quoted will be firm for the first year and will or will not be changed based on the guidelines outlined in the following paragraph "Price Redetermination.

**PRICE REDETERMINATION** The Contractor may petition the Purchasing Manager for price redetermination within forty-five (45) days of the expiration of each term of the contract. Any price redetermination will include all items

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

awarded. If the City and the Contractor cannot agree on any price redetermination, then the contract will expire. (See other conditions under *Special Terms and Conditions*)

**UNUSUAL CIRCUMSTANCES:** If during a contract term where costs to the City are to remain firm or adjustments are restricted by a percentage or CPI cap, unusual circumstances that could not have been foreseen by either party to the contract occur, and those circumstances significantly affect the Seller's cost in providing the required items or services, then the Seller may request adjustments to the costs to the City to reflect the changed circumstances. The circumstances must be beyond the control of the Seller, and the requested adjustments must be fully documented. The City may, after examination, refuse to accept the adjusted costs if they are not properly documented, increases are considered to be excessive, or decreases are considered to be insufficient. In the event the City does not wish to accept the adjusted costs and the matter cannot be resolved to the satisfaction of the City, the City will reserve the following options:

1. The contract can be canceled by the City upon giving thirty (30) days written notice to the Seller with no penalty to the City or Seller. The Seller shall fill all City requirements submitted to the Seller until the termination date contained in the notice.
2. The City requires the Seller to continue to provide the items and services at the firm fixed (non-adjusted) cost until the termination of the contract term then in effect.
3. If the City, in its interest and in its sole opinion, determines that the Seller in a capricious manner attempted to use this section of the contract to relieve themselves of a legitimate obligation under the contract, and no unusual circumstances had occurred, the City reserves the right to take any and all action under law or equity. Such action shall include, but not be limited to, declaring the Seller in default and disqualifying him for receiving any business from the City for a state period of time.
4. If the City does agree to adjusted costs, these adjusted costs shall not be invoiced to the City until the Seller receives notice in writing signed by a person authorized to bind the City in such matters.

**INVOICING AND PAYMENT:** Payment for any and all invoice(s) that may arise as a result of a contract or purchase order issued pursuant to this bid specification shall minimally meet the following conditions to be considered as a valid payment request:

- a. A timely submission of a properly certified invoice(s), in strict accordance with the price(s) and delivery elements as stipulated in the contract or purchase order document, and be submitted to the Finance Department at the address as stipulated on the Purchase Order.

- b. All invoices submitted shall consist of an original and one (1) copy; clearly reference the subject contract or purchase order number; provide a sufficient salient description to identify goods or service for which payment is requested; contain date of delivery; original or legible copy of signed delivery receipt including both manual signature and printed name of a designated City employee or authorized Agent; be clearly marked as "partial", "complete" or "final" invoice. The City will accept partial deliveries.
- c. The invoice shall contain the Bidder's Federal Employer Identification Number (F.E.I.N.).
- d. The City's terms are "Net 30 Days" after acceptance of goods or services and receipt of an acceptable invoice as described herein. Any discounts must be offered on the Bid Response Form.

**GENERAL:** The City of Deltona, having limited storage facilities, requires the service of private firms to provide materials, supplies and/or services on an as needed basis, as indicated herein, to support the City's needs.

**ADDITIONAL TERMS AND CONDITIONS:** Unless expressly accepted by the City, the following conditions shall apply: No additional terms and conditions included with the bid response shall be considered. Any and all such additional terms and conditions shall have no force and effect, and are inapplicable to this bid if submitted either purposely through intent or design, or inadvertently appearing separately in transmittal letters, specifications, literature, price lists or warranties. It is understood and agreed that the general and/or any special conditions in these Bid Documents are the only conditions applicable to this bid and the Bidder's authorized signature on the Bid Response Form attests to this. Exceptions to the terms and conditions will not be accepted.

**INTERPRETATIONS:** All Bidders shall carefully examine the Bid Documents. Any ambiguities or inconsistencies shall be brought to the attention of the City in writing prior to the opening of Bids; failure to do so, on the part of the Bidder, will constitute an acceptance by the Bidder of any subsequent decision. Any questions concerning the intent, meaning and interpretations of the Bid Documents shall be requested in writing (facsimile transmission acceptable (386) 789-7230, and received by the City at least seven (7) calendar days prior to the Bid Opening. Inquires shall be addressed to the attention of the Contact person as indicated on Page 1. No person is authorized to give oral interpretations of, or make oral changes to, the bid. Therefore, oral statements given before the bid opening will not be binding. Any interpretation of, or changes to, the bid will be made in the form of a written Addendum to the bid and will be furnished to all Bidders through DemandStar. Receipt of all addenda shall be acknowledged by the Bidders by signing and enclosing said addenda or addendum acknowledgement with their bid.

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

**ADDENDUM:** The City will record its responses to inquiries, any supplemental instructions, and/or necessary revisions to Bid Documents, in the form of a written addendum. Should revisions to the Bid Documents become necessary, the City will post a written addendum to the DemandStar website which will go out to all Bidders who received a bid package through DemandStar. All addendum are posted to the DemandStar website and current planholders are notified that an addendum has been issued. Bidders who obtain Bid Documents from other sources must officially register with the City's Purchasing Manager in order to be placed on the DemandStar website as a bid holder in order to receive any forthcoming addenda or other official communications. Failure to register as a prospective Bidder may cause your bid to be rejected as non-responsive if you have failed to submit a bid without an addendum acknowledgment for the most current addendum. It is the vendor's responsibility to check the DemandStar website at [www.demandstar.com](http://www.demandstar.com) in order to be sure latest addendum and any prior addendum have been received.

**PROTESTS:** Any Bidder who disputes the bid selection or contract award recommendation shall file such protest according to the bid protest procedures. These procedures are available upon request from the City.

**CONFLICT OF INTEREST:** All Bidders must disclose with their bid the name of any officer, director, or Agent who is also an employee of the City. All Bidders must disclose the name of any City employee who owns, directly or indirectly, an interest of five percent (5%) or more in the Bidder's firm or any of its branches.

**LEGAL REQUIREMENTS:** Bidders are required to comply with all provisions of Federal, State, City and local laws and ordinances, rules and regulations that are applicable to the items being bid. Lack of knowledge by the Bidder shall in no way be a cause for relief from responsibility, or constitute a cognizable defense against the legal effect thereof.

**DRUG-FREE WORKPLACE:** Preference shall be given to business with Drug-Free Work Place (DFW) programs. Whenever two or more bids which are equal with respect to price, quality, and service are received by the City for the procurement of commodities or contractual services, a bid received from a business that completes the attached DFW form certifying that it is a DFW shall be given preference in the award process.

**POSTING OF BID AWARD:** Recommendation for award will be posted for review by interested parties on DemandStar. Failure to file a protest to Purchasing within the time prescribed in the CITY's Purchasing Manual, shall constitute a waiver of proceedings.

**AWARD:** As the best interest of the City may require, the right is reserved to make award(s) by individual item, group of items, "All or None", or a combination thereof; with one or more suppliers; to reject any or all bids, or waive any minor irregularity or technicality in bids received, award or eliminate a portion of the bid, and may, at its sole discretion, request a re-bid, or abandon the project in its entirety. Bidders are cautioned to make no assumption until the City has entered into a contract or issued a purchase order.

**EEO STATEMENT:** The City is committed to assuring equal opportunity in the award of contracts, and, therefore complies with all laws prohibiting discrimination on the basis of race, color, religion, national origin, age or sex.

**CONTRACTUAL AGREEMENT:** The contents of this Bid and all provisions of the successful bid proposal deemed pertinent by the City may be incorporated into a contract and become legally binding. A separate contract document, other than the purchase order, may or may not be issued. Any and all legal action necessary to enforce a contract or purchase order will be interpreted according to the laws of Florida. The venue shall be County of Volusia, Florida.

**GOVERNMENTAL RESTRICTIONS:** In the event that any governmental restrictions are imposed which would necessitate alteration of the material quality, workmanship or performance of the items offered on this bid prior to their delivery, it shall be the responsibility of the Bidder to notify Purchasing at once, indicating in his/her letter the specific regulation which required an alteration, including any price adjustments occasioned thereby. The City reserves the right to accept such alteration or to cancel the contract or purchase order at no further expense to the City.

**PERMITS/LICENSES/FEES:** Any permits, licenses, or fees required will be the responsibility of the Contractor, no separate or additional payment will be made.

Adherence to all applicable code regulations (Federal, State, City, City) are the responsibility of the Contractor.

**INDEMNIFICATION:** The Bidder, without exemption, shall indemnify and save harmless, the City, its employees and/or any of its Commissioners from liability of any nature or kind, including cost and expenses for or on account of any copyrighted, patented, or unpatented invention, process, or item manufactured by the Bidder. Further, if such a claim is made, or is pending, the Bidder may, at its option and expense, procure for the City the right to use, replace or modify the item to render it non-infringing. If none of the alternatives are reasonably available, the City agrees to return the article on request to the Bidder and receive reimbursement. If the Bidder used any design, device, or materials covered by letters, patent or copyright, it is mutually agreed and understood, without exception, that the bid prices shall include

all royalties or cost arising from the use of such design, device, or materials in any way involved in the work.

**ADVERTISING:** In submitting a bid, Bidder agrees not to use the results therefrom as a part of any commercial advertising, without the express written approval, by the appropriate level of authority within the City.

**ASSIGNMENT:** Any purchase order or contract issued pursuant to this Invitation to Bid and the monies which may become due hereunder are not assignable except with the prior written approval of the City, through the Finance Department.

**COMPLIANCE WITH OCCUPATIONAL SAFETY AND HEALTH:** Bidder certifies that all material, equipment, etc., contained in his/her bid meets all applicable O.S.H.A. requirements. Bidder further certifies that, if he/she is the successful Bidder, and the material, equipment, etc., delivered is subsequently found to be defective in any applicable O.S.H.A. requirement in effect on the date of delivery, all costs necessary to comply with the requirements shall be borne by the Bidder.

**RESPONSIBILITY:** A Bidder must have at the time of bid opening, a company in operation, (if applicable) or be a fully authorized Agent or representative of the product bid, and capable of producing or providing the items bid, and follow-up parts and service, including any warranty services as applicable, and so provide such certification upon request.

**FACILITIES:** The City reserves the right to inspect the Bidder's facilities at any reasonable time, during normal working hours, to determine that Bidder has a bona fide place of business, and is a responsible Bidder.

**DISQUALIFICATION OF BIDDER:** More than one bid from an individual, firm, partnership, corporation, or association under the same or different names will not be considered. Reasonable grounds for believing that a Bidder is involved in more than one bid submittal will be cause for rejection of all bids in which such Bidders are believed to be involved. Any or all bids will be rejected if there is reason to believe that collusion exists between Bidders. Bids in which the prices obviously are unbalanced will be subject to rejection.

**ADJUSTMENTS / CHANGES / DEVIATIONS:** No adjustments, changes or deviations shall be accepted on any item unless conditions or specifications of a bid expressly so provide. Any other adjustments, changes or deviations shall require prior written approval, and shall be binding **ONLY** if issued by the City's Finance Department. The Bidder shall bear sole responsibility for any and all costs of claims arising from any adjustments, changes or deviations not properly executed as required herein.

**PUBLIC RECORDS:** Upon award recommendation or thirty (30) days after opening, whichever is earlier, bids become "public records" and shall be subject to public disclosure consistent with Chapter 119 Florida Statutes. Bidders must invoke the exemptions to disclosure provided by law in the response to the Bid, and must identify the data or other materials to be protected, and must state the reasons why such exclusion from public disclosure is necessary.

Bids may be reviewed at City Hall, 2345 Providence Blvd., Deltona, FL 32725.

**BID PREPARATION COSTS:** Neither the CITY nor its representatives shall be liable for any expenses incurred in connection with preparation of a response to this Invitation to Bid. Bidders should prepare their bids simply and economically, providing all information and prices as required.

**ACCEPTANCE / REJECTION:** The City of Deltona reserves the right to accept or reject any or all bids and to make the award to that Bidder, who in the opinion of the City will be in the best interest of and/or the most advantageous to the City. The City of Deltona also reserves the right to reject the bid of any vendor who has previously failed in the proper performance of an award or to deliver on time contracts of a similar nature or who, in the City's opinion, is not in a position to perform properly under this award. The City of Deltona reserves the right to inspect all facilities of bidders in order to make a determination as to the foregoing. The City of Deltona reserves the right to waive any irregularities, informalities, and technicalities in offers received, and may, at its discretion, request a re-bid, or abandon the project/procurement in its entirety.

**ANY AND ALL SPECIAL TERMS AND CONDITIONS, TECHNICAL REQUIREMENTS, SCOPE OF WORK OR SPECIFICATIONS ATTACHED HERETO WHICH VARY FROM THESE GENERAL CONDITIONS SHALL HAVE PRECEDENCE.**

# **SCOPE OF WORK**

**Bid No. 22032**

**For**

## **MEDICAL SUPPLIES & PHARMACEUTICALS**

**SCOPE OF SERVICES**

### **GENERAL**

#### **MEDICAL SUPPLIES & PHARMACEUTICALS FOR FIRE DEPARTMENT**

**Scope:** The City of Deltona is requesting bids from medical supply companies to provide items listed at firm fixed prices on an as needed basis for five one-year periods. Both the City and the vendor must mutually agree upon renewals in writing. Rates quoted will be firm for the first year and may or may not be changed at renewal times based on the guidelines outlined in this bid (See section on Price Re-determination). Due to fluctuating PHARMACEUTICAL PRICING, the awarded company may petition the City of Deltona for a price increase if their supplier had been subjected to a price increase. Proof of the price increase (a letter from the manufacturer) must accompany the petition for a price increase for these items.

The City of Deltona reserves the right to split this bid and award on a per item(s) basis if it is in the City's best interest to do so. The City of Deltona understands that not all companies provide all items as listed. Mark item "no bid" if you do not sell it. Your bid will still be considered for items that your company does sell. Awarded companies will be issued a Blanket Purchase Order and orders will be made against the blanket purchase order on an as needed basis.

**PLEASE USE ATTACHED BID FORM**

#### **INSURANCE REQUIREMENTS**

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

### **WORKERS' COMPENSATION**

Coverage is to apply for all employees for statutory limits in compliance with the applicable state and federal laws. The policy must include Employers' Liability with a limit of \$1,000,000 each accident, \$200,000 each employee, \$500,000 policy limit for disease.

### **COMMERCIAL GENERAL LIABILITY – OCCURRENCE FORM REQUIRED**

Contractor shall maintain commercial general liability (CGL) insurance with a limit of not less than \$1,000,000 each occurrence. If such CGL insurance contains a general aggregate limit, it shall apply separately to this location/project in the amount of \$1,000,000. Products and completed operations aggregate shall be \$1,000,000. CGL insurance shall be written on an occurrence form and shall include bodily injury and property damage liability for premises, operations, independent contractors, products and completed operations, contractual liability, broad form property damage and property damage resulting from explosion, collapse or underground (x, c, u) exposures, personal injury and advertising injury.

### **COMMERCIAL AUTOMOBILE LIABILITY INSURANCE**

Contractor shall maintain automobile liability insurance with a limit of not less than \$500,000 each accident for bodily injury and property damage liability. Such insurance shall cover liability arising out of any auto (including owned, hired and non-owned autos). The policy shall be endorsed to provide contractual liability coverage.

### **EVIDENCE OF INSURANCE**

The Contractor shall furnish the City of Deltona with Certificates of Insurance. The Certificates are to be signed by a person authorized by that insurer to bind coverage on its behalf. The City of Deltona is to be specifically included as an additional insured on all policies except Workers' Compensation. In the event the insurance coverage expires prior to the completion of the project, a renewal certificate shall be issued 30-days prior to said expiration date. The policy shall provide a 30-day notification clause in the event of cancellation or modification to the policy. All certificates of insurance must be on file with and approved by the City of Deltona before the commencement of any work activities. Contractor shall have all applicable licenses and insurance required to perform this work.

The terms of the AGREEMENT shall be for a period of one (1) year from date of AGREEMENT. This AGREEMENT may, by mutual assent of all parties, be extended for three (3) additional one year periods; not to exceed 48 months in total. At the end of the first 12 month period, the contractor will be solicited for an extension with all terms, conditions and pricing remaining. If the contractor requests any changes in same, said changes may require City Manager approval or rejection. At such time, staff may be requested to either re-issue a new BID or accept the changes as requested if they are within reason and market value.

The City of Deltona reserves the right to cancel any agreement, or any part thereof without obligation if completion is not made within the time specified. Any work performed after cancellation of order(s) will at the contractor's expense.

Please be advised that the City of Deltona will not prepay for work. Invoices may be submitted upon completion and acceptance of deliverables and will be paid upon submission of a complete invoice to the Department of Finance and Internal Services, 2345 Providence Blvd., Deltona, FL 32725.

Irrevocable Offer: Bidder warrants by virtue of bidding that the prices bid shall remain firm and be considered an irrevocable offer for a period of sixty (60) days, during which time one or more of the bids received may be accepted by the City of Deltona.

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

**EXTRA WORK:**

The City, without invalidating this **AGREEMENT**, may order changes in the operation within the general scope of this **AGREEMENT** consisting of additions, deletions, or other revisions, price and time may be adjusted accordingly. All such changes in the **AGREEMENT** may be authorized by a written Change Order to the **AGREEMENT** and may be executed under the applicable conditions of the **AGREEMENT**. If the contractor plans to make a claim for an increase in the price or any changes in Product, machinery, or service, he/she must submit said change request in writing. This **may be** forwarded to the City Manager, if necessary, for approval or rejection.

**Cancel Agreement:**

The City has the right to cancel this **AGREEMENT** for convenience in accordance with, but not limited to, the terms of default as specified herein. In any of the following events the City at any time hereafter shall have the right to immediately terminate the **AGREEMENT**.

In the event the contractor fails to keep and perform or shall violate any of the terms, covenants and conditions of the **AGREEMENT** on its part to be kept and performed, and the contractor shall not have cured or corrected such failure or violation within 10 days after written notice thereof shall have been given to the contractor; or immediately should the violation affect the health, safety and welfare of the contractor's employees, City employees or the public.

In the event the contractor shall, after 3-separate occasions during the term of this **AGREEMENT**, fail to keep and perform or shall violate any of the terms, covenants and conditions of this **AGREEMENT**, then the City has the right to terminate this **AGREEMENT with no penalties to the City**.

If the contractor shall make an assignment for the benefit of creditors, or shall file a petition in bankruptcy or shall be adjudged a bankrupt, or the interest of the contractor under this **AGREEMENT** shall be levied upon and sold upon execution or shall be operation of law become vested in another person, firm or corporation because of the insolvency of the contractor; or in the event that a receiver or trustee shall be appointed for the contractor or the interest of the contractor under this **AGREEMENT**.

In the event the contractor shall cease to operate the business awarded herein, or shall vacate or abandon said premises or not service and maintain lawn service, or if contractor allows his licenses or permits to expire without renewing as required, contract will be declared null and void.

**Remedies:**

The City may, if it so elects, pursue any other remedies provided by law for the breach of this **AGREEMENT** or any of its terms, covenants, conditions, or stipulations. No right or remedy herein conferred upon or reserved to the City or the contractor is intended to be exclusive of any other right or remedy, and each and every right and remedy given hereunder, or now or hereafter existing at law or at equity or by statute. The contractor is responsible for all damage or loss by fire, theft, vandalism or otherwise to their equipment, including their contents, materials, tools, equipment, and consumables, left on City property by the contractor, his/her employees, agents, subcontractors.

**Compliance with Laws, Regulations, Codes, Etc.:**

The contractor is required to comply with all present and future valid laws, ordinances, codes and regulations of the Federal Government, State of Florida, County of Volusia, City of Deltona and agencies thereof relating to the premises including, but not limited to, those applicable to health and sanitary conditions and safety and fire prevention. Any

permits necessary will be the responsibility of the contractor to obtain from the proper agency, paying the fees directly to that agency.

**Federal and State Taxes:**

The City is exempt from payment of Florida State Sales and User Taxes. The City will sign an exemption certificate submitted by the contractor. The contractor shall not be exempted from paying sales tax to its suppliers for materials used to fulfill contractual obligations with the City, nor is the contractor authorized to use the City's Tax Exempt Number in securing such materials, or product.

The contractor shall be responsible for their portion of payment for its own employees FICA and Social Security benefits with respect to the resulting **AGREEMENT**.

**Severability:**

If any term or provision of the resulting **AGREEMENT**, or the application thereof to any person or circumstances shall, to any extent, be held invalid or unenforceable, to remainder of the **AGREEMENT** or the application of such terms or provisions, to persons or circumstances other than those as to which it is held invalid or unenforceable, shall not be affected, and every other term and provision of the **AGREEMENT** shall be deemed valid and enforceable to the extent permitted by law.

**CERTIFICATION OF INDEPENDENT PRICE DETERMINATION**

By submission of this bid, the Bidder certifies, and in the case of a joint bid each party thereto certifies as to its own organization, that in connection with this procurement:

1. The prices in this bid have been arrived at independently, without consultation, collusion, communication, or agreement for the purpose of restricting competition, as to any matter relating to such prices with any other bidder or with any competitor.
2. Unless otherwise required by law, the prices which have been quoted in this bid have not been knowingly disclosed by the Bidder and will not knowingly be disclosed by the Bidder prior to opening, directly or indirectly to any other Bidder or to any competitor; and,
3. No attempt has been made or will be made by the Bidder to induce any other person or firm to submit or not to submit a bid for the purpose of restricting competition.
5. Bidder agrees that supplies/services furnished regarding this offer, if awarded, shall be covered by the most favorable commercial warranties the Bidder gives to any customer for such supplies services and that rights and remedies provided herein are in addition to and do not limit any rights offered to the City by any other provision of the bid award.

**PURCHASING AGREEMENTS WITH OTHER GOVERNMENT AGENCIES**

All Bidders submitting a response to this Invitation to Bid agree that such response also constitutes a bid to all governmental agencies, under the same conditions, for the same contract price, and for the same effective period as this bid, should the Bidder feel it is in their best interest to do so.

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

Each governmental agency desiring to accept these bids, and makes an award thereof, shall do so independently of any other governmental agency. Each agency shall be responsible for its own purchases and each shall be liable only for materials and/or services ordered and received by it, and no agency assumes any liability by virtue of this bid. This agreement in no way restricts or interferes with the right of any governmental agency to rebid any or all items.

#### **REFERENCES**

Bidder must submit with the bid, three (3) references (form attached) for projects of similar scope to include: Point of contact and telephone number. Failure to provide this information with the bid may result in bid being declared non-responsive.

#### **Submittals:**

**All submittals are REQUIRED and must be submitted with the bid package at the time of the bid opening to be considered a responsive bidder.**

**Bidders shall submit a detailed statement of explanation for each item where the quoted product deviates from the Scope of Services requested in this bid. Failure to comply may be cause for rejection**

**TIE ON UNIT PRICE OR BID:** Should there be a tie on either the unit price (if awarded on a per item basis) the deadlock will be decided upon using the following order:

- a. Companies who certify they are a drug-free workplace.
- b. Companies located in Volusia County, Florida.
- c. Companies located in Florida.
- d. All else being equal, both companies will be asked to submit a final bid in a sealed envelope.

The City of Deltona further reserves the right to be the final judge of what is considered equal and hold the bid open for a 90-day period if award is not made on the date specified.

**Fireworks Bid Evaluation and Award: The City of Deltona, at its sole discretion reserves the right to waive all technicalities or irregularities to reject any and all bids and/or accept the bid which is in the best interest of the City.**

The Award, if made, may be based upon considerations including but not limited to: **Quantity of fireworks offered, quality of product, variety of effects, experience and/or qualifications of the bidder. Good references from prior customers with similar budgets to that of the City or any other quality that may be deemed desirable and beneficial to the City.**

**CONTACT: All prospective proposers are hereby instructed not to contact any member of the City of Deltona Commission, City Manager, or City of Deltona Staff members other than the noted contact person OR a member of the Purchasing staff regarding this Request for Proposals or their response at any time during the BID process. Any such contact shall be cause for rejection of your submittal.**

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

**HOLD HARMLESS AND INDEMNITY AGREEMENT**

Life-Assist, Inc., agrees through the signing of this document by an authorized party or agent that it shall defend, indemnify and hold harmless the City of Deltona, and its agents, employees, and public officials from and against all suits, losses, claims, demands, judgments of every name and description arising out of or incidental to the performance of this contract or work performed thereunder, whether or not due to or caused by the negligence of the City of Deltona, its agents, employees, and public officials excluding only the sole negligence of the City of Deltona, its agents, employees, and Public Officials.

This provision shall also pertain to any claims brought against the City of Deltona, its agents, employees, and public officials by an employee of the named Contractor, any Sub-contractor, or anyone directly or indirectly employed by any of them.

The Contractor's obligation to indemnify the City of Deltona, its agents, employees and public officials under this provision shall be limited to \$1,000,000 per occurrence which the parties agree bears a reasonable commercial relationship to the contract.

The Contractor agrees to accept, and acknowledges as adequate remunerations, the consideration of \$10, which is part of the agreed bid price, the promises contained herein, and other good and valuable consideration, the receipt of which is hereby acknowledged, for agreement to enter into this Hold Harmless and Indemnity Agreement.

Life-Assist, Inc.  
CONTRACTOR

04/29/2022  
DATE

***This Form Must Be Completed and Returned with your Submittal.***

**CITY OF DELTONA  
BIDDER INFORMATION FORM  
Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

The information below is required to complete your bid packet. Type or print only.

Company Name: Life-Assist, Inc.

Address: 11277 Sunrise Park Drive

City: Rancho Cordova

State: California

Zip Code: 95742

Phone Number: 800-824-6016

Fax Number: 800-290-9794

Project Contact: Chris Nelson, Contracts Assistant Manager

e-mail address: quotes@life-assist.com

**Remittance (Payment) Mailing Information**

Address: 11277 Sunrise Park Drive

City: Rancho Cordova State: California Zip Code: 95742

Phone Number: 800-824-6016

Fax Number: 800-290-9794

Project Contact: Accounting

e-mail address: accounting@life-assist.com

Federal Tax ID No.: 94-2440500

Tax ID Type:  Federal Tax ID  Social Security Number

*This Form Must Be Completed and Returned with your Submittal.*

## References

---

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

CUSTOMER NAME	CONTACT PERSON	TELEPHONE AND FAX NUMBER	SCOPE OF SERVICES PROVIDED/JOB NAME
New Orleans EMS	Cedric Palmisano, Deputy Chief	( 504 ) 201-6947 ( 504 ) 658-2643	Providing EMS Supplies / Medical Supplies & Pharma
Riverside County Fire	Sean Reed	( 951 ) 940-6344 ( 951 ) 940-6777	Providing EMS Supplies / NPP
Kansas City Kansas Fire	Alan Korosec	( 913 ) 573-5969 ( 913 ) 381-3655	Providing EMS Supplies / Medical Supplies

Does Bidder have any similar work in progress at time of Bid Opening? Yes  No

If "Yes", explain:

Life-Assist currently has multiple contracts throughout the US. We can provide more detailed information upon request.

*References who are located in foreign countries are not acceptable.*

***This Form Must Be Completed and Returned with your Submittal.***

**DRUG-FREE WORK PLACE FORM**

The undersigned Bidder in accordance with Florida Statute 287.087, hereby certifies that

Life-Assist, Inc. does:  
(Name of Business)

1. Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance is prohibited in the workplace and specifying the actions that will be taken against employees for violations of such prohibition.
2. Inform employees about the dangers of drug abuse in the workplace, the business's policy of maintaining a drug-free workplace, any available drug counseling, rehabilitation, and employee assistance programs, and the penalties that may be imposed upon employees for drug abuse violations.
3. Give each employee engaged in providing the commodities or contractual services that are proposed a copy of the statement specified in subsection (1).
4. In the statement specified in subsection (1), notify the employees that, as a condition of working on the commodities or contractual services that are under bid, the employee will abide by the terms of the statement and will notify the employer of any conviction of, or plea of guilty or nolo contendere to, any violation of Chapter 893 or of any controlled substance law of the United States or any state, for a violation occurring in the workplace no later than five (5) days after such conviction.
5. Impose a sanction on, or require the satisfactory participation in a drug abuse assistance or rehabilitation program if such is available in the employee's community, by any employee who is so convicted.
6. Make a good faith effort to continue to maintain a drug-free workplace through implementation of this section.

As the person authorized to sign the statement, I certify that this firm complies fully with the above requirements.

x Chris Nelson  
Bidder's Signature

04/29/2022  
Date

***This Form Must Be Completed and Returned with your Submittal, if applicable***

**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

**Statement of No Bid**  
**Bid No. 22032**  
**MEDICAL SUPPLIES & PHARMACEUTICALS**

If your company does not intend to bid on this Procurement, please complete and return this form prior to the date shown for receipt of bids to: CITY OF DELTONA, Purchasing Manager, 2345 Providence Blvd., Deltona, FL 32725.

We, the undersigned, have declined to bid on the above referenced Invitation to Bid for the following reason(s) :

- Specifications are too "restrictive." (please explain below)
- Unable to meet specifications
- Specifications were unclear. (please explain below)
- Insufficient time to respond
- We do not offer this type of product or equivalent
- Our production schedule would not permit us to perform
- Unable to meet bond requirements
- Other (please explain below)

REMARKS:

---



---



---

Company Name	Telephone
<b>X</b>	Fax
Signature	Typed or Printed Name
Title	State
Address	City
City	Zip

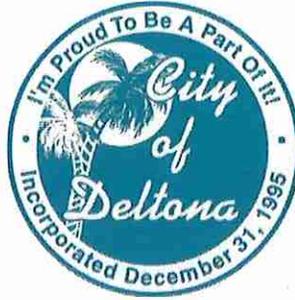
**Bid #22032 – MEDICAL SUPPLIES & PHARMACEUTICALS**

## E-VERIFY FORM

Project Name:	MEDICAL SUPPLIES & PHARMACEUTICALS
Project No.:	22032

A C K N O W L E D G E M E N T	<p><b>Definitions:</b></p> <p>"Contractor" means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration.</p> <p>"Subcontractor" means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.</p> <p>Effective January 1, 2021, public and private employers, contractors and subcontractors will begin required registration with, and use of the E-verify system in order to verify the work authorization status of all newly hired employees. Vendor/Consultant/Contractor acknowledges and agrees to utilize the U.S. Department of Homeland Security's E-Verify System to verify the employment eligibility of:</p> <ul style="list-style-type: none"> <li>a) All persons employed by Vendor/Consultant/Contractor to perform employment duties within Florida during the term of the contract; and</li> <li>b) All persons (including subvendors/subconsultants/subcontractors) assigned by Vendor/Consultant/Contractor to perform work pursuant to the contract with the Department. The Vendor/Consultant/Contractor acknowledges and agrees that use of the U.S. Department of Homeland Security's E-Verify System during the term of the contract is a condition of the contract with the City of Coconut Creek; and</li> <li>c) Should vendor become successful Contractor awarded for the above-named project, by entering into this Contract, the Contractor becomes obligated to comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility," as amended from time to time. This includes but is not limited to utilization of the E-Verify System to verify the work authorization status of all newly hired employees, and requiring all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The contractor shall maintain a copy of such affidavit for the duration of the contract. Failure to comply will lead to termination of this Contract, or if a subcontractor knowingly violates the statute, the subcontract must be terminated immediately. Any challenge to termination under this provision must be filed in the Circuit Court no later than 20 calendar days after the date of termination. If this contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of 1 year after the date of termination.</li> </ul>
---	---

Company Name: <a href="#">Life-Assist, Inc.</a>
Authorized Signature:
Print Name: <a href="#">Chris Nelson</a>
Title <a href="#">Contracts Assistant Manager</a>
Date: <a href="#">04/29/2022</a>
Phone: <a href="#">800-824-6016</a>
Email: <a href="mailto:quotes@life-assist.com">quotes@life-assist.com</a>
Website: <a href="http://www.life-assist.com">www.life-assist.com</a>



**ADDENDA #1 TO BID#22032**  
**MEDICAL SUPPLIES & PHARMACEUTICALS**  
**April 25, 2022**

This addenda is being issued to clarify bid items needed:

Ambu Disposable Canister Kit- This is marked as NO SUB but has been discontinued, will you accept alternate?

Yes, we will accept an alternate as long as the alternate has the same specs as the AMBU kit

Ambu Rescue Pump- This is marked as NO SUB but has been discontinued, will you accept alternate?

Yes, we will accept an alternate as long as the alternate has the same specs as the AMBU pump

Mask, disposable patient- need manufacturer item name/#

We will use any brand of disposable procedure type mask i.e. 3M Earloop Procedure Face Mask 1820

Sharps container, large, 2 gallon- need manufacturer name/# or dimensions

Any brand of sharps container with approximate measurements 10"x7"x9.5" high – currently using Curaplex

Sharps container small, 1/2qt - need manufacturer name/# or dimensions

Change the capacity from ½ qt to 1 qt with approximate measurements 4.5"x4.5"x6.25" high – currently using Henry Schein

Syringe, 1cc w/detachable needle- what size needle?

Tuberculin needle size 25 gauge x 5/8"

Thermometer, Braun, lens filters- need manufacturer item name/#, should the quantity of 80 be a box, not an each?

Braun or Welch Allyn PC20 lens filters/probe covers. 80 is the quantity of boxes we predict to use next year. We distribute the lens filters by box of 20.

Ventilator patient circuit for Pnuepac VR1- need manufacturer item#

Item # 122002 – Disposable Patient Circuit Kit with exhaust collector and PEEP valve

Video Laryngoscope Clear Vue- need item #, marked as NO SUB

Infinium ClearVue Video Laryngoscope with Disposable Blades

***This Form Must Be Completed and Returned with your Submittal.***

***I hereby confirm that I am authorized to submit this bid on behalf of***

Life-Assist, Inc.

**Company Name**

Chris Nelson, Contracts Assistant Manager

**Representative**

04/29/2022

**Date**

PART DESCRIPTION	MANUFACTURER	PART NUMBER	TOTAL UNITS*	NO SUB	UNIT PRICE	TOTAL
AccuVent Sensor for Zoll X-Series Advanced monitor	Zoll Medical	ZOL 8000-001128	40	**	\$ 73.00	\$ 2,920.00
ACR Child Restraint System	Quantum EMS	DQ-STRAP	2		\$ 118.00	\$ 236.00
Alcohol Preps Pad (box)	Cardinal Health	MW-APM	70 boxes		\$ 1.65	\$ 115.50
Ambu Colormetric CO2 detector	Med Plus Services	MAL EASYCAP II 6	5		\$ 9.25	\$ 46.25
Ambu Disposable Canister Kit	Laerdal Medical	985001	5	**	\$ 20.56	\$ 102.80
Ambu Rescue Pump	Laerdal Medical	985000	5	**	\$ 83.43	\$ 417.15
Ambulance blanket, twin size, acrylic/polyester	Taylor Healthcare	60-NFB6080	275		\$ 7.57	\$ 2,081.75
Antibiotic ointment 1 oz tube	Cardinal Health	2222545	10		\$ 2.00	\$ 20.00
Antibiotic ointment single dose .9 gram	Med Plus Services	NWI TAOP9	10 boxes		\$ 10.08	\$ 100.80
Asherman Chest Seal	Teleflex	849200	10		\$ 9.15	\$ 91.50
Autopulse cable ties	Zoll Medical	8700-0711-01	5 packs	**	\$ 100.00	\$ 500.00
Autopulse Case	Zoll Medical	8700-000850-40	1	**	\$ 585.00	\$ 585.00
Autopulse Grip strips kit	Zoll Medical	8700-0708-01	5 packs	**	\$ 44.80	\$ 224.00
Autopulse head immobilizer	Zoll Medical	8700-0710-01	5	**	\$ 16.60	\$ 83.00
Autopulse LifeBand	Zoll Medical	8700-0706-01	45	**	\$ 150.00	\$ 6,750.00
Autopulse Shoulder restraint	Zoll Medical	8700-0709-01	5	**	\$ 88.00	\$ 440.00
Autopulse Soft Stretcher	Zoll Medical	8700-0712-01	2	**	\$ 166.00	\$ 332.00
B.V.M. Adult SPUR II	Ambu	520 211 000	215		\$ 9.11	\$ 1,958.65
B.V.M. Child SPUR	Ambu	530 213 000	10		\$ 12.08	\$ 120.80
B.V.M. Infant	Ambu	540 212 000	10		\$ 12.08	\$ 120.80
Baby bunting, foil	HealthSmart	650-4006-0600	10		\$ 6.48	\$ 64.80
Backboard	Ferno Washington	275201105	5		\$ 159.00	\$ 795.00
Backboard restraint straps, 5' 2 pc, side release buckle w/metal speed clips	Morrison Medical	1210-ORANGE	100		\$ 8.64	\$ 864.00
Backboard straps, disposable, 5' 2 pc side release buckle, plastic speed clips	Dick Medical Supply	47552OR	530		\$ 4.40	\$ 2,332.00
Bacteria filter, latex free	Smiths Medical	002862	2		\$ 0.98	\$ 1.96
Bag, O2, Iron Duck Breathsaver Plus, Red	Fleming Industries	34016DP-RD	2		\$ 193.23	\$ 386.46
Band-Aid (adult) box 100	Dynarex	3601	10 boxes		\$ 1.32	\$ 13.20

Band-Aid (butterfly)	Dynarex	3615	2 boxes		1.49 bx-100	\$	2.98
Band-Aid (pedi) character preferred	Med Plus Services	NUT 1075737	5			\$	0.05
Battery charger, ZOLL Autopulse	Zoll Medical	8700-0753-01	1	**		\$	2,730.00
Battery Lifepak 1000 AED	Physio-Control	11141-000100	5			\$	340.00
Battery, Laerdal LSU suction unit	Laerdal Medical	780800	5	**		\$	102.48
Battery, Zoll Autopulse	Zoll Medical	8700-0752-01	5	**		\$	981.75
Bio Hazard bags, 23"x23"	Medegen Medical	116	220			\$	0.13
Bio Hazard Board Bags, 24"x86"	Poly Systems	BOARD BAG 2ML	10			\$	1.75
Bio Hazard Boot covers, Tyvek 14" disposable, pair	ORS Nasco	251- IC457SWHLG010 00S (substitution)	1 case			\$	192.00
Bio Hazard Bouffant Caps, Tyvek 21", disposable	ORS Nasco	251- IC729SWH00025 00B (substitution)	1 case			\$	192.00
Bio Hazard Gauntlets, Tyvek, disposable, pair	ORS Nasco	251-TY500S	1 case			\$	99.00
Bio Hazard Gowns, impervious, universal size, disposable	Tidi Products	8576	150			\$	1.37
Bite Stick	American Diagnostic	4010T	2			\$	0.38
Blanket, disposable	Taylor Healthcare	60- FCB4080GREY	250			\$	4.29
Blood Pressure kit w/gauge, Aneroid Adult manual	Medsource	MS-BP100	5			\$	7.27
Blood Pressure kit w/gauge, Aneroid infant manual	Medsource	MS-BP400	2			\$	7.27
Blood Pressure kit w/gauge, Aneroid lg adult manual	Medsource	MS-BP200	2			\$	8.10
Blood Pressure kit w/gauge, Aneroid pedi manual	Medsource	MS-BP300	2			\$	7.27
Blood Pressure kit w/gauge, Aneroid thigh manual	Medsource	MS-BP500	2			\$	7.73

Bougie introducer ET Tube, Adult 15 fr	Sun Medical	9-0212-70	20			\$	7.20	\$	144.00
Bougie introducer ET Tube, Pedi 10 fr	Sun Medical	9-0211-70	15			\$	7.20	\$	108.00
Broselow Tape		NOBID	10			\$	-	\$	-
Bulb Syringe, latex free	Medegen Medical	4172	5			\$	0.92	\$	4.60
Burn Sheet, sterile, 60"x90"	Medsource	MS-BS0033	10			\$	2.50	\$	25.00
Capnolines Smart Plus O2 (Adult/Intermediate)	Optimal	MVAO100U	2150			\$	10.39	\$	22,338.50
Capnolines Smart Plus (Pediatric)	Optimal	MVPO	60			\$	14.31	\$	858.60
CAT Tourniquet Gen 7 Orange	North American Rescue	30-0023	5	**		\$	21.39	\$	106.95
Cervical Collar (Adult-Adjustable), Perfit Ace	Ambu	000 281 000	250	**		\$	4.92	\$	1,230.00
Cervical Collar (Infant-Adjustable), Mini Perfit Ace	Ambu	000 281 106	30	**		\$	4.92	\$	147.60
Clipboard, Aluminum, 8 1/2"x14", legal size, Redi-Rite	Saunders Mfg.	11019	10	**		\$	26.48	\$	264.80
Coban 2" cohesive bandage	3M Health Care	1582	240			\$	1.76	\$	422.40
Combine Dressings, 5"x9"	Dukal	5590	350			\$	0.14	\$	49.00
CPR face shields, Resusci, individually packaged	Laerdal Medical	46000001	50			\$	2.00	\$	100.00
CPAP, Flow-Safe II EZ	Mercury Medical	1057319	115	**		\$	52.93	\$	6,086.95
Cricothyrotomy catheter kit, The Quick Kit		NOBID	5	**		\$	-	\$	-
Cricothyrotomy catheter kit, The Quick Kit, pedi		NOBID	2	**		\$	-	\$	-
E.T. Tube Holder (Adult)	Laerdal Medical	600-10000	85	**		\$	2.48	\$	210.80
E.T. Tube Holder (Child)	Laerdal Medical	600-20000	20	**		\$	2.48	\$	49.60
EKG Paper for Zoll X-Series Advanced monitor	Leonhard Lang Usa	17437	320			\$	2.30	\$	736.00
Electrodes Adult, Ambu Blue Sensor SP, 50/pk	Ambu	SP-00-S/50	950	**		\$	11.55 pk-50	\$	10,972.50
Electrodes Pedi, Huggables, 30/bx	Conmed	1620-003	10	**		\$	5.25	\$	52.50
Emesis bags	Medegen Medical	3933	120			\$	0.46	\$	55.20
Endotracheal Tube 2.5, uncuffed	Medsource	MS-23125	50			\$	0.82	\$	41.00
Endotracheal Tube 3.0, uncuffed	Medsource	MS-23130	30			\$	0.82	\$	24.60

Endotracheal Tube 3.5, uncuffed	Medsource	MS-23135	10		\$	0.82	\$	8.20
Endotracheal Tube 4.0, uncuffed	Medsource	MS-23140	45		\$	0.82	\$	36.90
Endotracheal Tube 4.5, flexiset	Teleflex	506540	10		\$	3.36	\$	33.60
Endotracheal Tube 5.0, flexiset	Teleflex	506550	10		\$	3.36	\$	33.60
Endotracheal Tube 5.5, flexiset	Teleflex	504555	10		\$	3.66	\$	36.60
Endotracheal Tube 6.0, flexiset	Teleflex	504560	20		\$	3.66	\$	73.20
Endotracheal Tube 6.5, flexiset	Teleflex	504565	10		\$	3.66	\$	36.60
Endotracheal Tube 7.0, flexiset	Teleflex	504570	70		\$	3.66	\$	256.20
Endotracheal Tube 7.5, flexiset	Teleflex	504575	40		\$	3.66	\$	146.40
Endotracheal Tube 8.0, flexiset	Teleflex	504580	30		\$	3.66	\$	109.80
Endotracheal Tube 8.5, flexiset	Teleflex	504585	10		\$	3.66	\$	36.60
Endotracheal Tube 9.0, flexiset	Teleflex	504590	10		\$	3.66	\$	36.60
Extension Set, Saline locks, 8" Roberts slide clamp, priming volume 2.0 mL	Amsino International	AE3108	39 boxes	**	\$	147.00 cs-100	\$	14,700.00
Eye cups	Afasco	709	15		\$	2.92	\$	43.80
Face Mask (Adult)	Ambu	000 252 055	5		\$	1.76	\$	8.80
Face Mask (Child)	Ambu	000 252 054	5		\$	1.76	\$	8.80
Face Mask (Infant)	Ambu	000 252 052	5		\$	1.76	\$	8.80
Filter Line Set EtCO2, H set (Adult/Pedi)	Optimal	MVAIH	140		\$	15.13	\$	2,118.20
Filter Straw, 1 3/4", 5 particulate filter	Optimal	415021	130		\$	0.49	\$	63.70
Forceps, magill adult	Maco International	7338	2		\$	4.50	\$	9.00
Forceps, magill, pedi	Maco International	7337	2		\$	4.50	\$	9.00
Forehead Thermometers, Accu-Bar temperature indicator	Medline Industries	ATC430Z (substitution)	6 boxes		\$	68.00	\$	408.00
Gauze, conforming, non-sterile, 2", 12/pk	Dukal	602	30 packs		\$	1.44	\$	43.20
Gauze, conforming, non-sterile, 4", 12/pk	Dukal	604	60 packs		\$	2.34	\$	140.40
Gauze, non-Sterile 4x4" 200/pk	Dukal	6114	135 packs		\$	3.77	\$	508.95
Gauze Sterile 4x4	Dukal	6124	200		\$	0.10	\$	20.00
Goves, Nitrile, large	Ansell Healthcare	SEC-375-L	755 boxes	**	\$	9.20	\$	9.20
Gloves, Nitrile, medium	Ansell Healthcare	SEC-375-M	560 boxes	**	\$	9.20	\$	9.20
Gloves, Nitrile, small	Ansell Healthcare	SEC-375-S	190 boxes	**	\$	9.20	\$	9.20

Gloves, Nitrile, X-Large	Ansell Healthcare	SEC-375-XL	**	\$	9.20	\$	9.20
Glucometer	Microdot	201-01,801-01,811-01		\$	31.45	\$	471.75
Glucose Test Strips ( box of 25)	Microdot	200-25		\$	11.34	\$	1,701.00
Head Blok (c-spine immob. Aid), Sta-Block	Laerdal Medical	700-00001	**	\$	3.89	\$	680.75
I.V. Catheter, Via Valve 14 ga, 1 1/4"	Smiths Medical	326810	**	\$	1.53	\$	1.53
I.V. Catheter Via Valve 16 ga, 1 1/4"	Smiths Medical	326210	**	\$	1.53	\$	1.53
I.V. Catheter Via Valve, 18 ga, 1 1/4"	Smiths Medical	326510	**	\$	1.53	\$	1.53
I.V. Catheter, Via Valve, 20 ga, 1 1/4"	Smiths Medical	326610	**	\$	1.53	\$	1.53
I.V. Catheter, Via Valve, 22 ga, 1"	Smiths Medical	326010	**	\$	1.53	\$	1.53
I.V. Catheter Via Valve, 24 ga, 3/4"	Smiths Medical	326310	**	\$	1.53	\$	1.53
I.V. Drip set 10 ggt/ml, 83" long, latex free, one luer lock injection site, one pre-slit injection site, spin lock connector, priming volume 16ml	Amsino International	108306		\$	2.13	\$	2,236.50
I.V. Drip set 60 ggt/ml, 83" long, latex free, one luer lock injection site, one pre-slit injection site, spin lock connector, priming volume 16ml	Amsino International	608306		\$	2.28	\$	114.00
Ice Packs	Dynarex	4511		\$	11.76 bx-24	\$	94.08
IV Arm Board large, 3"x17"	Medline Industries	NON24291 (substitution)		\$	0.84	\$	8.40
IV Arm Board small, 3"x9"	Medline Industries	NON24293		\$	0.49	\$	4.90
Jaw Spreader	Sun Medical	9-3042-00		\$	24.84	\$	248.40
Kendrick Extrication Device	Ferno Washington	0313676		\$	140.80	\$	281.60
Kendrick Extrication Device head immobilizer	Ferno Washington	0819928		\$	52.78	\$	263.90
Kendrick Extrication Device replacement head/chin straps	E P and R	EP-700		\$	8.60	\$	43.00
King Tube Airway 3 yellow	Ambu	KLTS423		\$	30.03	\$	1,201.20
King Tube Airway 4 Red	Ambu	KLTS424		\$	30.03	\$	1,651.65
King Tube Airway 5 Purple	Ambu	KLTS425		\$	30.03	\$	1,201.20

Lancets, Haemolance, box/50	Med Plus Services	ARK 980121 (substitution)	50			10.17 bx-100	\$	508.50
Laryngoscope handle, fiber optic, medium	Maco International	D8101	5			\$	3.90	\$ 19.50
Laryngoscope handle, fiber optic, small	Maco International	D8102	2			\$	3.90	\$ 7.80
Laryngoscope Blade Mac 2, fiber optic	Maco International	5062	15			\$	3.90	\$ 58.50
Laryngoscope Blade Mac 3, fiber optic	Maco International	5063	35			\$	3.90	\$ 136.50
Laryngoscope Blade Mac. 4, fiber optic	Maco International	5064	15			\$	3.90	\$ 58.50
Laryngoscope Blade Miller 0, fiber optic	Maco International	5060	5			\$	3.90	\$ 19.50
Laryngoscope Blade Miller 1, fiber optic	Maco International	6061	10			\$	3.90	\$ 39.00
Laryngoscope Blade Miller 2, fiber optic	Maco International	6062	20			\$	3.90	\$ 78.00
Laryngoscope Blade Miller 3, fiber optic	Maco International	6063	20			\$	3.90	\$ 78.00
Laryngoscope Blade Miller 4, fiber optic	Maco International	6064	5			\$	3.90	\$ 19.50
Laryngoscope blade for ClearVue, Mac 1	Infinium Medical	306.300.0008	15	**		\$	7.98	\$ 119.70
Laryngoscope blade for ClearVue, Mac 2	Infinium Medical	306.300.0009	15	**		\$	7.98	\$ 119.70
Laryngoscope blade for ClearVue, Mac 3	Infinium Medical	306.300.0010	45	**		\$	7.98	\$ 359.10
Laryngoscope blade for ClearVue, Mac 4	Infinium Medical	306.300.0011	20	**		\$	7.98	\$ 159.60
Littmann stethoscope repair parts for Lightweight II S.E.	Prestige Medical	40020	6			\$	24.98	\$ 149.88
Lubricating jelly foil packets, 3 gram	Cardinal Health	4236972	2 boxes			\$	44.99 bx-144	\$ 89.98
Masimo LNCS pediatric SpO2 adhesive sensor for Zoll X-Series Advanced monitor	Masimo Corporation	1860	165			\$	12.32	\$ 2,032.80
Mask, disposable patient	Dick Medical Supply	91019P3	3300			\$	0.12	\$ 396.00
Mega Mover, up to 1,000 lbs	Graham Medical	51926	220			\$	16.53	\$ 3,636.60

Mercurium Aspirator	Neotech Products	NO101	2		\$	4.83	\$	9.66
Monitor 12-lead ECG cable with 4 wire leads for Zoll X-Series Advanced monitor	Med Plus Services	ZOL 8300-0803-01	5		\$	128.81	\$	644.05
Monitor 12-lead ECG cable with 6 wire leads for Zoll X-Series Advanced monitor	Med Plus Services	ZOL 8300-0802-01	5		\$	279.96	\$	1,399.80
Monitor rear pouch, for Zoll X-Series Advanced monitor	Zoll Medical	8000-000404-01	2		\$	49.80	\$	99.60
Monitor Carry case for Zoll X-Series Advanced monitor	Zoll Medical	8000-000393-01	2		\$	820.00	\$	1,640.00
Monitor Lithium ION battery SurePower II for Zoll X-Series Advanced monitor	Med Plus Services	ZOL 8000-0580-01	2		\$	430.83	\$	861.66
Monitor LNC patient cable 4 ft for Zoll X-Series Advanced monitor	Masimo Corporation	2017	20		\$	140.80	\$	2,816.00
Monitor LNCS reusable SpO2 sensor adult for Zoll X-Series Advanced monitor	Masimo Corporation	1863	10		\$	123.20	\$	1,232.00
Monitor Pacer Pad Connector for Zoll X-Series Advanced monitor	AED Superstore	8000-0370	5		\$	296.80	\$	1,484.00
Monitor Rainbow reusable sensor SpO2, SpCO for Zoll X-Series Advanced monitor	Masimo Corporation	2697	2		\$	550.00	\$	1,100.00
Monitor shoulder strap for Zoll X-series Advanced monitor	Zoll Medical	8000-000405-01	2		\$	28.00	\$	56.00
Multi Trauma Dressing, 12"x30"	Dukal	3050	55		\$	1.04	\$	57.20
N.P. 12 ft.	Teleflex	123312	2		\$	2.18	\$	4.36
N.P. 14 ft.	Teleflex	123314	10		\$	2.18	\$	21.80
N.P. 16 ft.	Teleflex	123316	5		\$	2.18	\$	10.90
N.P. 18 ft.	Teleflex	123318	15		\$	2.18	\$	32.70
N.P. 20 ft.	Medsource	MS-23950	10		\$	1.83	\$	18.30
N.P. 22 ft.	Medsource	MS-23952	30		\$	1.83	\$	54.90
N.P. 24 ft.	Medsource	MS-23954	20		\$	1.83	\$	36.60

N.P. 26 fr.	Medsource	MS-23956	15	\$	1.83	\$	27.45
N.P. 28 fr.	Medsource	MS-23958	15	\$	1.83	\$	27.45
N.P. 30 fr.	Medsource	MS-23960	15	\$	1.83	\$	27.45
Nasogastric Tube 5fr	Cardinal Health	8888268060 (substitution)	5	\$	6.59	\$	32.95
Nasogastric Tube 8fr	Cardinal Health	8888268086 (substitution)	10	\$	6.59	\$	65.90
Nasogastric Tube 10 fr	Cardinal Health	8888264911 (substitution)	20	\$	1.85	\$	37.00
Nasogastric Tube 12 fr	Cardinal Health	155710	5	\$	1.06	\$	5.30
Nasogastric Tube 14 fr	Cardinal Health	155711	5	\$	1.06	\$	5.30
Nasogastric Tube 16 fr	Cardinal Health	155712	5	\$	1.06	\$	5.30
Nasogastric Tube 18 fr	Cardinal Health	155713	5	\$	1.08	\$	5.40
Needle Angiocath (14 ga x 3.25 in.)	Becton Dickinson	382268	5	\$	5.78	\$	28.90
Needle Angiocath (14 ga x 5.25 in.)	Becton Dickinson	329823	5	\$	32.73	\$	163.65
Needle IO Jamshedi pedi	Baxter	DIN1518X	10	\$	11.55	\$	115.50
Needle, Pneumofix 14ga	Combat Medical	PDF119 (US)	20	\$	44.80	\$	896.00
Needle, SafetyGlide, 18ga x 1 1/2"	Becton Dickinson	305918	2 boxes	\$	16.50 bx-50	\$	33.00
Needle, SafetyGlide, 21ga x 1 1/2"	Becton Dickinson	305917	1 box	\$	16.50 bx-50	\$	16.50
Needle, SafetyGlide, 23ga x 1"	Becton Dickinson	305902	2 boxes	\$	16.50 bx-50	\$	33.00
Needle, SafetyGlide, 25ga x 5/8"	Becton Dickinson	305901	2 boxes	\$	16.50 bx-50	\$	33.00
Needle Winged infusion set 19 ga	Exel International	EXE 26702	1 box	\$	37.59 bx-50	\$	37.59
Needle Winged infusion set 21 ga	Exel International	EXE 26704	1 box	\$	12.50 bx-50	\$	12.50
Needle Winged infusion set 23 ga	Exel International	EXE 26706	1 box	\$	12.50 bx-50	\$	12.50
Needle Winged infusion set 25 ga	Exel International	EXE 26708	1 box	\$	12.50 bx-50	\$	12.50
NIBP adult reusable cuff for Zoll X-Series Advanced monitor, double tube w/Twist-Lock connector	Welch Allyn	REUSE-11-2MQ	15	\$	20.28	\$	304.20
NIBP dual lumen tubing assembly 10' for Zoll X-Series Advanced monitor	Med Plus Services	ZOL 8300-0002-01	5	\$	114.99	\$	574.95
NIBP infant reusable cuff for Zoll X-Series Advanced monitor, double tube w/Twist-Lock connector	Welch Allyn	REUSE-07-2MQ	5	\$	18.33	\$	91.65

NIBP lg adult reusable cuff for Zoll X-Series Advanced monitor, double tube w/Twist-Lock connector	Welch Allyn	REUSE-12-2MQ	5	\$	23.04	\$	115.20
NIBP pedi reusable cuff for Zoll X-Series Advanced monitor, double tube w/Twist-Lock connector	Welch Allyn	REUSE-09-2MQ	5	\$	18.98	\$	94.90
NIBP sm adult reusable cuff for Zoll X-Series Advanced monitor, double tube w/Twist-Lock connector	Welch Allyn	REUSE-10-2MQ	5	\$	19.63	\$	98.15
NIBP Thigh reusable cuff for Zoll X-Series Advanced monitor, double tube w/Twist-Lock connector	Welch Allyn	REUSE-13-2MQ	5	\$	35.38	\$	176.90
O.P. 43 mm / #1	Teleflex	121801 (substitution)		\$	0.18	\$	0.90
O.P. 60 mm / #2	Teleflex	121802	5	\$	0.18	\$	0.90
O.P. 80 mm / #3	Teleflex	121803	10	\$	0.18	\$	1.80
O.P. 90 mm / #4	Teleflex	121804	30	\$	0.18	\$	5.40
O.P. 100 mm / #5	Teleflex	121805	35	\$	0.18	\$	6.30
O.P. 110 mm / #6	Teleflex	121806	20	\$	0.18	\$	3.60
OB Kit	Motion Medical	KT500LF	10	\$	4.81	\$	48.10
Oxygen cylinder, composite D size	Genstar Technologies	CMCMD8T	5	\$	199.53	\$	997.65
Oxygen cylinder gaskets, nylon	Meret USA	AREG-100WB50 (substitution)		\$			
Oxygen Nasal Cannula, Adult	Medsource	MS-24003	30	\$	0.52	\$	15.60
Oxygen nasal cannula, pedi	Medsource	MS-24101	65	\$	0.29	\$	18.85
Oxygen Nebulizer w/mask	Medline Industries	HUD1083	5	\$	0.60	\$	3.00
Oxygen nebulizer, pedi w/dragon or puppy mask	Optimal	001266	250	\$	0.38	\$	95.00
Oxygen NRB Mask (Adult)	Medline Industries	HUD1059	25	\$	1.14	\$	28.50
Oxygen NRB Mask (Child)	Medline Industries	HUD1058	270	\$	0.99	\$	267.30
Oxygen NRB Mask (infant), high concentration	Medsource	MS-25055-U	25	\$	1.05	\$	26.25
			10	\$	1.34	\$	13.40

Oxygen regulator w/liter flow, 1 DISS port	Meret USA	EMSREG8725-B1D	5	\$	59.74	\$	298.70
Oxygen supply tubing, 7'	Optimal	10043496	5	\$	0.39	\$	1.95
Oxygen wrench large metal	Allied Healthcare	66082	5	\$	7.91	\$	39.55
Oxygen Wrench small metal	Allied Healthcare	66079	5	\$	1.92	\$	9.60
Pacer Pads Adult for Zoll X-Series Advanced monitor, CPR Stat-Padz	Zoll Medical	ZOL 8900-0400	130	\$	62.58	\$	8,135.40
Pacer Pads Adult for Zoll X-Series Advanced monitor, OneStep CPR Complete	Zoll Medical	ZOL 8900-0224-01	130	\$	104.00	\$	13,520.00
Pacer Pads Pedi for Zoll X-Series Advanced monitor, OneStep CPR	Zoll Medical	ZOL 8900-000219-01	25	\$	92.00	\$	2,300.00
Pedi Immobilizer, blue	Ferno Washington	0313065	2	\$	412.11	\$	824.22
Pedi Immobilizer head & chin strap	Ferno Washington	0313981	2	\$	29.85	\$	59.70
Pedi Immobilizer head pads		NOBID	2	\$	-	\$	-
Pedi Immobilizer shoulder pads		NOBID	2	\$	-	\$	-
Penlight w/pupil gauge	American Diagnostic	351PLA	25	\$	0.76	\$	19.00
Pillow case, disposable	Graham Medical	47256	45	\$	0.31	\$	23.25
Pillows, disposable	The Pillow Factory	51107-652	40	\$	2.62	\$	104.80
Povidone Pad (box)	Medline Industries	MDS093917H	5 boxes	\$	19.97 bx-100	\$	99.85
Pressure Infuser, 500 ml, Infusurg	Sun Medical	950194210	15	\$	15.73	\$	235.95
Razor, disposable	Dynarex	2135	85	\$	0.21	\$	17.85
Restraints, double strap limb holder	J.T. Posey Company	2750	25	\$	23.86	\$	596.50
Ring Cutter Blade	Maco International	RINGCUTTERB					
		LD	2	\$	1.80	\$	3.60
Ring cutter saw	Maco International	RINGCUTTER	2	\$	6.60	\$	13.20
Sam Splint, 3"x36" flat	Sam Medical	SP507-OB-EN	40	\$	6.90	\$	276.00
Scoop Stretcher, plastic, x-ray translucent	Medsource	MS-SCP123					
			2	\$	493.92	\$	987.84
Sharps Container, large, 2 gallon	Becton Dickinson	305490	30	\$	9.61	\$	288.30
Sharps Container, small, 1/2 qt	Medegen Medical	185S	140	\$	2.87	\$	401.80
Sharps Shuttle	Medsource	MS-64250	5	\$	1.88	\$	9.40
Shears, Lister bandage, 5 1/2"	American Diagnostic	301	2	\$	1.91	\$	3.82
Shears, Trauma/Rescue, 7"	Dynarex	4180	15	\$	0.84	\$	12.60

Sheets, disposable	Tidi Products	359		370		\$	0.60	\$	222.00
Sheets, G-Force Snugfit	Taylor Healthcare	90-GFRC3690		4000		\$	2.60	\$	10,400.00
Splint, cardboard with foam, 24"	AMPAC Services, Inc.	SS240 W/FOAM		25		\$	2.18	\$	54.50
Splint, cardboard with foam, 18"	AMPAC Services, Inc.	SS180 W/FOAM		30		\$	2.00	\$	60.00
Splint, cardboard with foam, 12"	AMPAC Services, Inc.	SS120 W/FOAM		20		\$	1.26	\$	25.20
Splint, wire ladder	Faretec	1211300		20		\$	9.00	\$	180.00
Stethoscope, Littmann Lightweight II S.E.	Prestige Medical	2450		10		\$	54.00	\$	540.00
Stethoscope, pediatric	American Diagnostic	604LB		2		\$	32.48	\$	64.96
Stopcock 3 valve	Smiths Medical	MX5311L		20		\$	0.58	\$	11.60
Suction Canisters w/tubing	Bemis Manufacturing	485410		45		\$	7.09	\$	319.05
Suction Cath #6 fr.	Amsino International	AS361		2		\$	0.31	\$	0.62
Suction Cath # 8 fr.	Amsino International	AS362		5		\$	0.31	\$	1.55
Suction Cath # 10 fr	Amsino International	AS363		2		\$	0.31	\$	0.62
Suction Cath #12 fr.	Amsino International	AS364		20		\$	0.31	\$	6.20
Suction Cath #14 fr	Amsino International	AS365		10		\$	0.31	\$	3.10
Suction Cath # 16 fr.	Amsino International	AS366		10		\$	0.31	\$	3.10
Suction Handle, Yankauer, "The Big Stick"	Scor	44241C		50		\$	2.05	\$	102.50
Suction Tubing, 6 foot with straw connector	Amsino International	AS825		50		\$	0.77	\$	38.50
Suction unit 12 volt plug	Laerdal Medical	780200	**	2		\$	80.00	\$	160.00
Suction unit A/C wall plug	Laerdal Medical	780210	**	2		\$	32.85	\$	65.70
Suction Unit, Laerdal LSU	Laerdal Medical	78002001	**	2		\$	741.31	\$	1,482.62
Surgical Clippers, Wet/Dry		NO BID	**	2					
Surgical clippers attachment blade, coarse blade		NO BID	**	60					
Syringe, 1cc w/ detachable needle	Dynarex	6937		30		\$	0.09	\$	2.70
Syringe, 3 cc	Dynarex	6988		75		\$	0.08	\$	6.00
Syringe, 3cc w/vial access cannula	Becton Dickinson	303401		660		\$	0.45	\$	297.00
Syringe, 5 cc	Dynarex	6989		30		\$	0.08	\$	2.40

Syringe, 5 cc w/vial access cannula	Becton Dickinson	303403	250		\$	0.44	\$	110.00
Syringe, 10cc	Dynarex	6990	1150		\$	0.11	\$	126.50
Syringe, 20cc	Dynarex	6991	25		\$	0.19	\$	4.75
Syringe, 30 cc	Dynarex	6992	40		\$	0.29	\$	11.60
Syringe, 60 cc	Dynarex	6993	70		\$	0.47	\$	32.90
Syringe, Toomey	Dynarex	4262	10		\$	0.58	\$	5.80
Tape, adhesive 1"x10 yards, cloth, hypo-allergenic	Dukal	C110	90		\$	0.76	\$	68.40
Tape, adhesive 2"x10 yards, cloth, hypo-allergenic	Dukal	C210	50		\$	1.52	\$	76.00
Tape, Water Proof, 2"x10 yards	Medline Industries	NON260502	36		\$	3.16	\$	113.76
Thermometer, Braun, lens filters,	Welch Allyn	06000-005	80	**	\$	0.07	\$	5.60
Thermometer, Braun, Thermoscan ear	Ernest Packaging	2280	2	**	\$	7.25	\$	14.50
Thermometer Probe covers, SureTemp 690, bx/25	Welch Allyn	05031-750	50 boxes	**	\$	0.95	\$	47.50
Thermometer, SureTemp Plus 690	Welch Allyn	01690-200	4	**	\$	261.86	\$	1,047.44
Tourniquet, latex free, 250/pk, textured	Dynarex	3139	4300		\$	30.55 PK-250	\$	549.90
Traction Splint adult/child combination	Faretec	1126514	2		\$	144.64	\$	289.28
Traction splint replacement aluminum ratchet	Faretec	1124500	2		\$	63.84	\$	127.68
Traction Splint replacement ankle hitch	Faretec	1124200	2		\$	28.00	\$	56.00
Triangular Bandage, 40"x40"x56"	Dukal	CTB40	85		\$	0.43	\$	36.55
Vacuum connector for LSU suction unit	Laerdal Medical	780422	2		\$	2.10	\$	4.20
Vaseline Gauze, 3"x9"	Med Plus Services	DER DKC20056	25		\$	0.68	\$	17.00
Veni-Gard IV catheter dressing	Conmed	705-4431	36 boxes		\$	37.62 BX-100	\$	37.62
Veni-Gard Junior, IV catheter dressing	Conmed	730-4432	5 boxes		\$	35.34 BX-100	\$	35.34
Ventilator patient circuit for Pneupac VR1	Smiths Medical	122002	2		\$	17.55	\$	35.10
Vial Access Cannula	Becton Dickinson	303367	100	**	\$	0.32	\$	32.00
Video Laryngoscope Clear Vue	Infinium Medical	000.300.0008	2	**	\$	1,048.95	\$	2,097.90
Vionex towlettes, 50/box	Aseptic Control	10-1520	8 boxes		\$	9.71 bx-50	\$	9.71
					\$		\$	
<b>GRAND TOTAL</b>								<b>\$178,289.27</b>

\* TOTAL UNITS IS EACH UNLESS OTHERWISE INDICATED

Life-Assist, Inc.  
COMPANY NAME

Chris Nelson  
COMPANY REPRESENTATIVE

4/29/2022  
DATE

PART DESCRIPTION	MANUFACTURER	NDC #	TOTAL UNITS*	NO SUB	UNIT PRICE	TOTAL
Adenocard (Adenosine), 12mg/4ml vial	Mylan Institutional LLC	67457-854-04 (substitution)	8		123.20 bx-10	\$ 985.60
Albuterol, 3 ml ampule 2.5 mg	Nephron Pharmaceuticals Corporation	0487-9501-25	15		4.06 bx-25	\$ 60.90
Amiodarone, 150 mg, 3 ml vial	Hikma Pharmaceuticals	00143-9875-25	10		25.00 bx-25	\$ 250.00
Atropine, 1mg/10ml Lifeshield PFS	Pfizer Injectables	00409-4911-34	12		127.87 bx-10	\$ 1,534.44
Atrovent (Ipratropium Bromide) inhalent 0.02% ampule	Nephron Pharmaceuticals Corporation	0487-9801-25	11		4.72 bx-25	\$ 51.92
Aspirin, 81 mg, low dose, chewable	MAJOR Pharmaceuticals Inc.	0904-4040-73	25 bottles		0.81 btl-36	\$ 20.25
Benadryl (Diphenhydramine), 1 ml dosette vials, 50 mg/ml	Hikma Pharmaceuticals	00641-0376-25	3		31.25 bx-25	\$ 93.75
Calcium Chloride, 1g/10ml, 100mg/ml, PFS	Int'l Medication Systems	76329-3304-1	6		111.00 bx-10	\$ 666.00
Cardizem, 25mg/5ml vial, refrigerated	Hikma Pharmaceuticals	00641-6013-10	12		36.50 bx-10	\$ 438.00
Cyanokit, Includes 5gm Hydroxocobalamin, Contains 1 IV Admin set and 1 Transfer Spike	BTG Specialty Pharm	50633-310-11	3 kits		932.04 ea-1	\$ 2,796.12
Dextrose, 25% infant injection, 2.5g/10ml, 250 mg/ml	Pfizer Injectables	00409-1775-10 (substitution)	1		118.20 bx-10	\$ 118.20
Dextrose, 10%, 250 ml bag	Baxter Healthcare Corporation	0338-0023-02	125 bags		9.98 ea-1	\$ 9.98
Epinephrine, 1:10,000, 1 mg , 0.1 mg/ml, PFS	Int'l Medication Systems	76329-3316-1	25		99.80 bx-10	\$ 2,495.00
Epinephrine, 1:1,000 1 ml ampule, 1mg/ml	Par Pharmaceutical, Inc.	42023-159-25	25		416.98 bx-25	\$ 10,424.50
Glucose Gel	Paddock	00574-0069-30	45 each		3.55 ea-1	\$ 159.75
I.V. Solution D5W injection, 250 ml bag	ICU Medical	0990-7922-02	25 bags		3.54 ea-1	\$ 88.50
I.V. Solution NACL 100 ml bag	ICU Medical	0990-7984-23	25 bags		3.03 ea-1	\$ 75.75
IV solution, NACL injection, 1000 ml bag	Baxter Healthcare	0338-0049-04	145 bags		4.35 ea-1	\$ 630.75
I.V. Solution, NACL injection 250 ml bag	Baxter Healthcare	0338-0049-02	100 bags		3.48 ea-1	\$ 348.00
IV solution, NACL injection, 50 ml bag	ICU Medical	0990-7984-36	75 bags		2.00 ea-1	\$ 150.00
IV solution, NACL injection, 500 ml bag	Baxter Healthcare	0338-0049-03	900 bags		3.67 ea-1	\$ 3,303.00
Lidocaine 2%, 100mg, 5ml, 20 mg/ml, PFS	Pfizer Injectables	00409-4903-34	3		36.64 bx-10	\$ 109.92
Lidocaine, IV pre-mix 2 g, 500 ml bag	Baxter Healthcare	0338-0409-03	30 bags		7.10 ea-1	\$ 213.00
Magnesium sulfate 50%, 5gm/10ml PFS	Pfizer Injectables	00409-1754-10	2		233.94 bx-10	\$ 467.88
Naloxone 2mg/2ml, PFS	AuroMedics	55150-0345-10	20		153.90 bx-10	\$ 3,078.00
Nitro spray, 400 mcg per spray, 200 metered sprays	EVUS Health Solutions	76299-0430-08	10 bottles		154.44 ea-1	\$ 1,544.40
Nitro-BID Paste ointment, 1 gm packet	Savage Laboratories	0281-0326-08	100 packets		2.61 ea-1	\$ 261.00
Nitrostat Tablets, .4 mg 25/pack	Dr.Reddy's Laboratories Inc	43598-436-11	35 bottles		20.15 btl-25	\$ 705.25
Norepinephrine 4mg, 4 ml, amp	Baxter Healthcare	36000-162-10	1		220.37 ea-1	\$ 220.37
Ondansetron (Zofran) 4 mg, 2 ml vial	Pfizer Injectables	00409-4755-03	22		13.00 bx-25	\$ 286.00
Ondansetron 4 mg tablets	Glenmark	68462-157-13	6		7.01 pk-30	\$ 42.06
Saline, Sodium Chloride irrigation, 500 ml bottle	Baxter Healthcare	00338004803	130 bottles		2.96 ea-1	\$ 384.80

Sodium Bicarbonate, 50 mEq per 50ml, 8.4% PFS	Int'l Medication Systems	76329-3352-1	7	154.00 bx-10	\$ 1,078.00
Sodium Chloride prefilled syringe, 0.9%, 10 ml	Amsino International	4411009959	55	10.73 bx-30	\$ 590.15
Solu Medrol, 125 mg, 2 ml Act O Vial	Pfizer Injectables	00009-0047-22	190 bottles	9.15 ea-1	\$ 1,738.50
Tetracaine, .5%, 15 ml drops	Oceanside Pharmaceuti	68682-920-64	25 bottles	111.77 ea-1	\$ 2,794.25
Toradol, 1 ml 30mg/ml vial	Pfizer Injectables	00409-3795-01	5	43.52 bx-25	\$ 217.60
Tranexamic Acid, 100 mg/ml, 10 ml vial	Apotex Corp.	60505-6169-01	1	44.90 bx-10	\$ 44.90
<b>*TOTAL UNITS IS BOXES/CASES UNLESS OTHERWISE INDICATED</b>				<b>GRAND TOTAL</b>	<b>38,476.49</b>

Life-Assist, Inc.  
 COMPANY NAME

Chris Nelson  
 COMPANY REPRESENTATIVE

4/29/2022  
 DATE

# ABOUT LIFE-ASSIST

## OUR STORY

---

Stan Davis founded Life-Assist in 1977 to provide first responders with the same attention and dedication that they devote to others when on the job. Our mission of “**Helping Heroes Save Lives,**” is based on this concept and it drives everything we do today. We consistently deliver exceptional service because at Life-Assist, the **customer always comes first.**

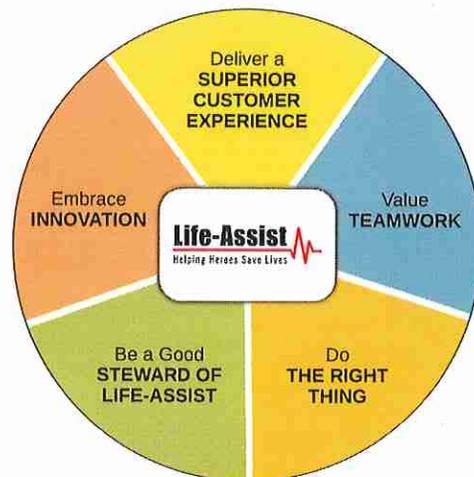
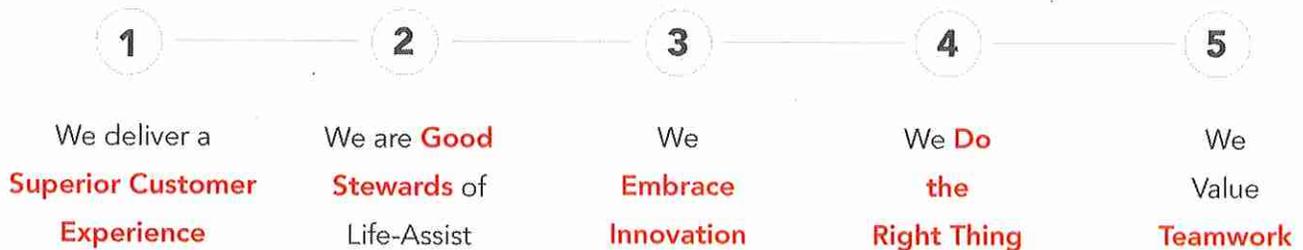
This differentiator sets Life-Assist apart from other EMS distributors. Life-Assist cares about its customers and it shows. Even in today’s digital age, no phone trees exist at Life-Assist. Friendly and knowledgeable Customer Care Specialists greet our customers personally and exceed their expectations by taking the time to listen and satisfy their specific needs with the **highest quality solutions.** For more than **40 years,** this emphasis on customer satisfaction has established our company as one of the **nations’ largest distributors of EMS supplies.**

About Life-Assist

## OUR COMMITMENT

As one of the **nation's largest distributors of emergency medical supplies, equipment and EMS pharmaceuticals**, we pride ourselves on responding to the ever-changing needs of the EMS professional and constantly strive to stay informed about the current procedures and equipment used in the pre-hospital environment. Our mission is to ensure complete satisfaction with the ordering experience and to provide medical equipment and supplies to EMS providers with honesty, integrity, and outstanding customer care. Should a problem arise, our customer care team will promptly resolve the issue.

## OUR CORE VALUES



# FEATURES OF LIFE-ASSIST'S SUPERIOR CUSTOMER EXPERIENCE

## CUSTOMER CARE ADVANTAGE

- Customers are always greeted by one of our trained and knowledgeable Customer Care Specialists when calling during business hours; **no phone trees**
- Full-service website, making it easy to order EMS supplies, with the opportunity to provide ordering oversight within EMS agencies

## SHIPPING BENEFITS

- Orders ship complete with a **99%** accuracy rate
- **Same Day Shipping** when orders are placed by 4 p.m. local time
- **Free Shipping** with no minimum order

## ORDERING EASE

- **Easy to use** website
- Inventory management solutions available
  - Operative IQ
  - Apex Vending Solutions
- Streamlined ordering process using **Smart Supply** List on website

## PRODUCT VALUE

- **Full line** of **quality** EMS and pharmaceutical products
- All manufacturer **warranties** honored, and any warranty issues **facilitated**
- Regular **business reviews** conducted with **low cost** options provided

## **DEDICATED SUPPORT TEAM**

Life-Assist believes that it is important to provide an extensive support system to our customers that starts at the local level for immediate needs. We want to build relationships with our customers based on mutual trust, which starts with having someone in your area who you can meet with face to face, someone who will listen to your needs and expectations and provide you with a personalized solution.

Dedicated Support Team

## GROUND SUPPORT



### MICHELLE LEE

**Account Manager**

[michelle.lee@life-assist.com](mailto:michelle.lee@life-assist.com)

Michelle has been active in the healthcare industry for 19 years. As a hospital liaison at LifeLink in Florida, Michelle worked alongside Trauma/ED, Critical Care and OR team members to assist with processes, education and compliance for organ and tissue donation. Her passion of helping others continued at HCA West Florida Division, as the Director/Coach for the HCA hospitals in North Tampa, where she ensured all hospital staff provided the best quality and safest care to patients. At Life-Assist, Michelle provides excellent communication and customer service, making sure your supply needs are always met.

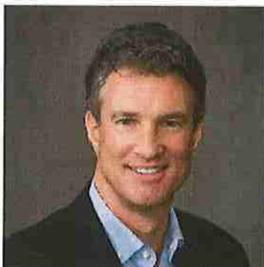


### JOSCELYN COOPERHART

**Director of Sales**

[joscelyn.cooperhart@life-assist.com](mailto:joscelyn.cooperhart@life-assist.com)

Joscelyn, a Virginia Beach Native, is our leader for East Coast Sales operations. She has over 10 years of experience providing best in class solutions to a variety of different government customers, including our First Responders. She will ensure you receive value added solutions that meet and exceed your expectations. As a member of our disaster support team, Joscelyn will activate our emergency procedures in times of need.



### BRYAN HOLLIDAY

**VP of Sales & Marketing**

[bryan.holliday@life-assist.com](mailto:bryan.holliday@life-assist.com)

Bryan is part of the executive leadership team at Life-Assist. He leads our Sales, Customer Care, Contracts and Products teams, as well as being involved with Marketing and Vendor Relations. He has been at Life-Assist for over six years and is responsible for the complete satisfaction of our customers. He is part of the Emergency Disaster Support team and is committed to providing first responders with service that is differentiated from others in the EMS industry.

Dedicated Support Team

## INTERNAL SUPPORT



### KORTNIE SILVEIRA

**Customer Care Manager**  
[customercare@life-assist.com](mailto:customercare@life-assist.com)

The customer care team, headed by Kortnie Silveira, has years of experience serving customers in EMS. This group of exceptionally knowledgeable and friendly customer care advisors is available to answer any questions, take and track orders, as well as handle any order or product issues during the work week. You can contact the team Monday through Friday, from 6:30 am to 5 pm.



### CHERISE AKERS

**Contracts Manager**  
[quotes@life-assist.com](mailto:quotes@life-assist.com)

Cherise manages contracts and ensures compliance. Her over 20 years of experience in the EMS industry has established her as an expert on contract issues in this field. When overseeing contracts, Cherise's primary concern is for our customers' best interest. She is available for any questions you may have.



### SARA KIMBLE

**Products Manager**  
[products@life-assist.com](mailto:products@life-assist.com)

Sara worked for over 10 years as a paramedic and functioned as a preceptor and EMT instructor as well. She brings over 7 years of experience at Life-Assist reviewing and researching products to ensure Life-Assist is offering the best products and support to provide a superior experience for our customers. Sara oversees our Products Department that includes team members with Paramedic and EMS backgrounds who are ready to assist with any questions you may have.

# ORDERING INFORMATION



## INTERNET

Orders can be placed, and pricing verified **24 hours a day, 7 days a week** on our website [www.life-assist.com](http://www.life-assist.com)



## EMAIL

Orders may be emailed to our Customer Care Department at [customer care@life-assist.com](mailto:customer care@life-assist.com)



## OPERATIVE IQ

Life-Assist is **fully integrated** with Operative IQ, so orders can be submitted, and pricing can be verified on this platform



## PHONE

Call us at **1-800-824-6016**. We are available to take your call Monday-Friday.



## ONLINE CHAT

Our **online chat** features allows orders to be placed and questions to be answered via our online chat



## FAX

Orders can be faxed to our office 24 hours a day, 7 days a week at 800-290-9794



## MAIL

Orders can be mailed to our office:  
Life-Assist, Inc., 11277 Sunrise Park Drive, Rancho Cordova, CA 95742

Ordering Information

## ONLINE ORDERING

---

To place an order online, a customer must be registered on the Life-Assist website and have an account. All **pricing will be uploaded** to the online account. Additional items can be added at the **discount rate** specified on the bid. Requests can be sent to Life-Assist for official quotes, to another individual within the ordering agency for approval or can be submitted to Life-Assist directly for processing, depending on how the agency has set up the account.

The Life-Assist website displays **real-time pricing and availability** for all our products. Contract items are easily identified with a green background shown under the price. Adding to a contract is as easy as a click of the mouse.

Online account management allows a user to access and/or modify account information, receive shipments, check on backorder status, create supply lists, lock down users, access the Drug Supply Chain Portal and multiple purchasing reports.

Our website also features a "**Smart Supply List**", which provides a list of all the items that have been ordered within the last 90 days for easy reordering.

Our website includes many **unique features** that allow users to manage their accounts **24/7**:

- View your agency's **pricing on all items** and request quotes online 24/7
- **Custom** supply lists can be created to maintain continuity and eliminate ordering errors: they can also be downloaded for inventory purposes
- User defined fields can be added to make ordering simple
- Approval or review through the chain of command
- Create a **Master Administrator** to manage all users on the account, which can make changes and/or restrict a user's ordering capabilities
- View **invoice** history, **tracking** information, **backorder** status and account activity

A **detailed** presentation can be provided upon request.

Ordering Information

## ORDERING THROUGH INVENTORY MANAGEMENT SYSTEMS

### Operative IQ

Life-Assist's system **integrates** with the **Operative IQ** Operations Management Software, which allows users to **quickly and easily** determine where their items are located, when they expire, how much is used and when supplies should be re-ordered. Operative IQ offers several different licensing options to fit the needs of EMS agencies.

Operative IQ information attached. A **detailed** presentation can be provided upon request.

## OPERATIVE IQ



### Apex Vending Solutions and Operative IQ Integration

Apex Vending Solutions **communicates seamlessly** with Operative IQ allowing you to use both systems together for inventory management and resupply. Safely secure your items in the Apex Vending Solutions and let Operative IQ do the rest.

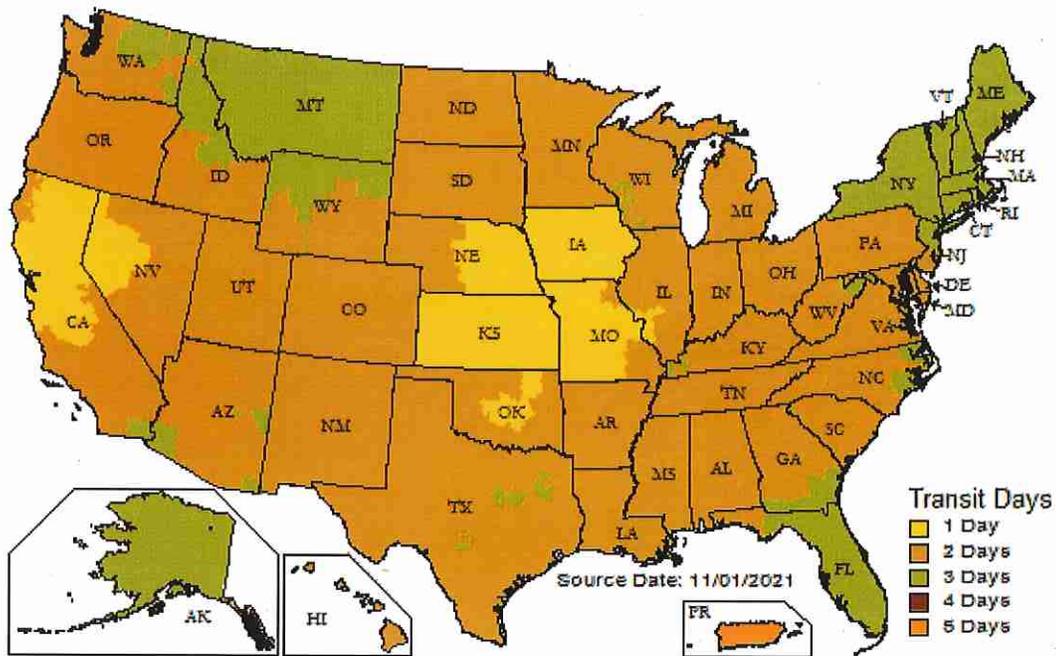
Apex Vending Solutions also works as stand-alone inventory management options using their web-based software **Trajectory Cloud**.

Apex Vending Solutions information attached. A **detailed** presentation can be provided upon request.

# DELIVERY & DISTRIBUTION

## LOCATIONS AND SHIPPING

With two distribution centers, one at our headquarters in Rancho Cordova, CA, and the other in Lenexa, KS, Life-Assist offers 2 to 3 business day delivery across the United States. The Central Distribution Center in Lenexa, KS will be the primary warehouse for your agency, providing **2-day delivery**. All orders placed by 4pm CST will ship out the **same day**. Life-Assist primarily ships UPS, however large shipments may be sent by a trucking company. All standard ground orders are shipped with **free freight**.



Western Distribution Center  
 11277 Sunrise Park Drive  
 Rancho Cordova, CA 95742  
 Approx: 75,000 sq ft

Central Distribution Center  
 10816 Strang Line Road  
 Lenexa, KS 66216  
 Approx: 50,000 sq ft

Delivery & Distribution

## **RUSH SHIPPING POLICY**

---

Life-Assist never charges a rush fee on any order. Orders in by 4pm CST ship same day. The dedicated warehouse for the your department is in Lenexa, KS providing a 2-day ground delivery window. If Next Day Air shipping is required, additional freight charges may apply.

## **INVENTORY LEVELS**

---

Life-Assist will adjust inventory levels at the time of award based on estimated annual usage provided by your agency. We use an electronic warehouse management system for inventory control and tracking customer allocations, lot numbers and expiration dates for all the products we provide. Manual adjustments are made as needed.

## **DISTRIBUTION AND DELIVERY PROCESS**

---

Stock availability is clearly indicated on our website. When an order is placed, a confirmation email is sent to the email login address used to complete the order. The confirmation includes any items not in stock at the time the order is being processed (if applicable) and provides an estimated availability date. Our Customer Care Specialists can also provide stock availability by phone.

The shipping location is identified, and an order number is generated. Each order is processed independently, ensuring it is shipped to its specified address. As many of our customers have multiple locations, this system ensures multiple shipping locations are never an issue.

Once an order ships from our warehouse, an invoice is immediately generated for the items shipped. We have a 99% fill rate and adapt our inventory levels according to the needs of our customers to ensure backorders are kept to a minimum. If necessary, we also offer the ability to provide drop shipments directly from the manufacturer. Invoices are sent according to the method requested. In unlikely cases involving invoicing or product issues, backorders, mis-shipments, etc., the Customer Care Department will address them immediately.

DELIVERY & DISTRIBUTION

---

## **SUBSTITUTIONS & ALTERNATIVE PRODUCTS**

If substitutions are needed for any reason, your dedicated Account Manager will work with you directly to accommodate your needs. Customers are notified of any long-term backorder items or no longer available items as soon as the manufacturer provides information. Our Product Specialist team searches for alternatives if the manufacturer does not offer a replacement item based on the needs outlined by your dedicated Account Manager.

---

## **EXPIRATION DATES**

All items are shipped with a minimum 12-month expiration date. Should an item be available with less than a 12-month expiration date, customers are notified at the time of order and their approval is required prior to shipment. The Life-Assist website also provides detailed expiration information on any products that fall short of the 12-month minimum policy.

---

## **MANUFACTURER RELATIONSHIPS**

Life-Assist has been serving the EMS community for over 40 years. We have strong, loyal relationships with all the manufacturers we distribute for, such as Microflex, Laerdal, Ambu, Pulmodyne, Dukal, etc. Authorized Distributer letters from all manufacturers can be provided upon request.

# RETURNS & WARRANTY

## GENERAL RETURN POLICY

---

We want you to be 100% satisfied with your purchase. If a product does not meet your specifications, you may return the item in its original packaging, in resalable condition, within 30 days for full credit.

Prior to returning any purchase, please contact Customer Care at (800) 824-6016 or email [CustomerCare@life-assist.com](mailto:CustomerCare@life-assist.com) to obtain a return authorization number. To expedite the process, have your shipping or invoice document available for reference.

Returned merchandise must be sent freight prepaid and received in new, resalable condition.

If a damaged shipment is received, please note the extent of the damage to the carrier at the time of delivery. Keep all boxes and packaging materials and immediately contact Customer Care at (800) 824-6016 or email [CustomerCare@life-assist.com](mailto:CustomerCare@life-assist.com).

## RETURN POLICY FOR SPECIAL ORDERS

---

Some goods, such as special-order items and items over 90 days old, etc. may not be eligible for credit. If we make an error in filling or shipping your order, we will promptly rectify the mistake at no cost to you. Please note that refrigerated items cannot be returned.

## WARRANTY

---

Life-Assist is an authorized distributor for all items we provide. We honor all manufacturer warranties and will help facilitate any warranty issues that may arise. Life-Assist stands behind the products we provide and will ensure 100% satisfaction for the products purchased through us.

# HOURS OF OPERATION

Life-Assist's official hours of operation are:

## TIME ZONE

PACIFIC TIME ZONE

CENTRAL TIME ZONE

EASTERN TIME ZONE

## OPEN

6:30AM

8:30AM

9:30AM

## CLOSED

5PM

7PM

8PM

We are available 24 hours a day / 7 days a week in the case of an emergency. You can contact us by phone Monday through Friday during operating hours. You will be answered by real people, no phone trees exist at Life-Assist.

See Disaster Support Program information for afterhours emergency contact.

# DISASTER SUPPORT PROGRAM



Customers can sign up for Life-Assist's emergency disaster support program by sending an email to [DisasterSupport@life-assist.com](mailto:DisasterSupport@life-assist.com).

This email address is also located on our website:

<https://www.life-assist.com/Info/DisasterSupport>

Once signed up, a 24-hour emergency number is provided to use in the event of a disaster. Our emergency number is linked to several managers with **24-hour access** to our warehouses and to key manufacturers that are committed to providing disaster relief.

When an emergency occurs, our managers mobilize operation teams to pack and ship supplies in the most expedient manner via the best available method to ensure the fastest reaction times and quick delivery of the EMS supplies needed.

- Orders will be shipped from our strategically located warehouses using whatever means necessary, including helicopter, airplane, UPS Express Critical and private courier services
- As a result of our strong relationship with key manufacturers, we can also provide the option of **direct delivery** from their warehouses
- In the case that one of the Life-Assist warehouses cannot be accessed, all orders will be redirected to the other warehouse, ensuring continuous service

Our disaster support program is tested and reviewed quarterly to ensure preparedness when you need it most.

## SUMMARY OF CONTACT INFORMATION

- Emergency phone number reserved for Life-Assist customers after business hours: 916-949-7574
- Phone number during business hours: 800-824-6016
- Emergency Disaster Support tab on website: <https://www.life-assist.com/Info/DisasterSupport>
- Life-Assist's Disaster Support Program Email: [DisasterSupport@life-assist.com](mailto:DisasterSupport@life-assist.com)

## REFERENCES



### NEW ORLEANS EMS

3711 General Meyer Ave  
New Orleans, LA 70114  
Cedric Palmisano, Deputy Chief  
(504) 201-6947  
[cpalmisano@nola.gov](mailto:cpalmisano@nola.gov)



### RIVERSIDE COUNTY FIRE

210 W. San Jacinto Avenue  
Perris, CA 92570  
Sean Reed  
(951) 940-6344  
[sean.reed@fire.ca.gov](mailto:sean.reed@fire.ca.gov)



### SACRAMENTO METRO FIRE

3012 Gold Canal  
Rancho Cordova, CA 95670  
Mark Jones  
(916) 859-4374  
[jones.mark@smfd.ca.gov](mailto:jones.mark@smfd.ca.gov)



### KANSAS CITY KANSAS FIRE

815 N. 6th Street  
Kansas City, Kansas 66101  
Alan Korosec  
(913) 573-5969  
[akorosec@kckfd.org](mailto:akorosec@kckfd.org)



**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**FLORIDA DRUGS, DEVICES AND COSMETICS  
2601 BLAIR STONE ROAD  
TALLAHASSEE FL 32399-1047**

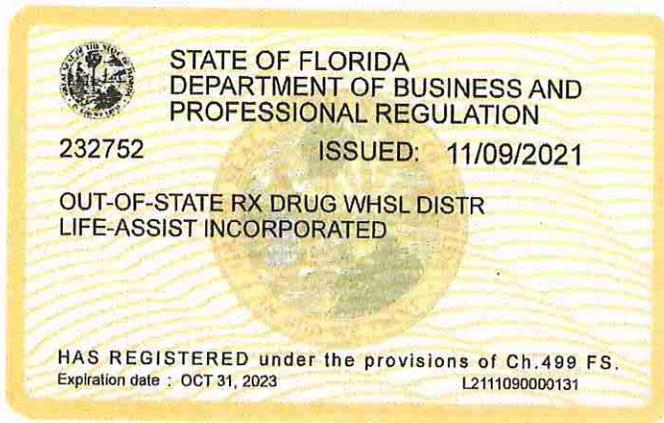
**(850) 487-1395**

**LIFE-ASSIST INCORPORATED  
11277 SUNRISE PARK DRIVE  
RANCHO CORDOVA CA 95742**

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto [www.myfloridalicense.com](http://www.myfloridalicense.com). There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

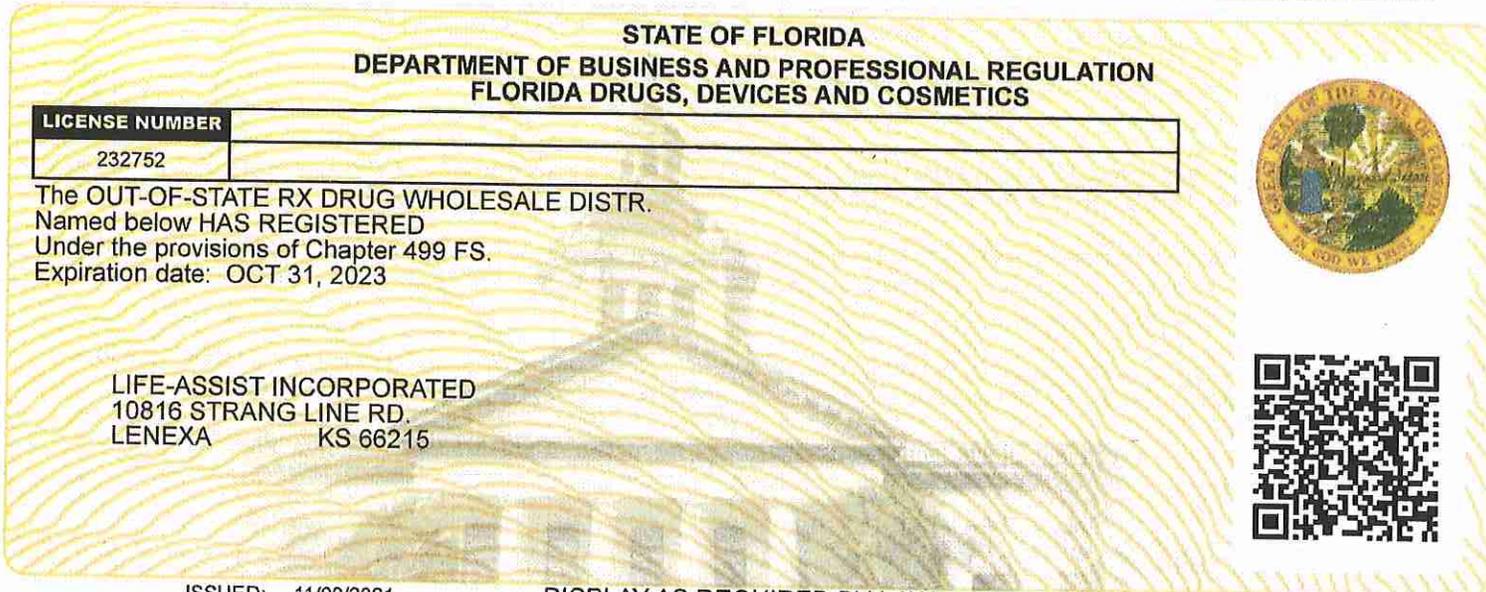
Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



DETACH HERE

RON DESANTIS, GOVERNOR

JULIE I. BROWN, SECRETARY



# Request for Taxpayer Identification Number and Certification

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

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Life-Assist, Inc.</b>	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <input type="checkbox"/> 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) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <b>11277 Sunrise Park Drive</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Rancho Cordova, CA 95742</b>	
7 List account number(s) here (optional)	

Print or type.  
See Specific Instructions on page 3.

## 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 instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
or									
Employer identification number									
9	4	-	2	4	4	0	5	0	0

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

## Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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 for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ <u>02/04/2022</u>
------------------	----------------------------	--------------------------

## General Instructions

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

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### 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)
  - 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, later.*

