



CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES		BID # 2014-096		
BID DATE: JANUARY 15, 2014		DEPARTMENT: EL PASO FIRE DEPARTMENT		
		BOUND TREE MEDICAL LLC DUBLIN, OH	EMERGENCY MEDICAL PRODUCTS, INC. CUDAHY, WI	HENRY SCHEIN INC. IRMO, SC
***AMENDMENTS ACKNOWLEDGED		A001 & A002	A001 & A002	A001 & A002
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR		
ITEM DESCRIPTION		NET OR % DISCOUNT OR MARKUP	NET OR % DISCOUNT OR MARKUP	NET OR % DISCOUNT OR MARKUP
ITEM 1:	MEDICAL SUPPLY CATALOG	NET <input type="checkbox"/>	NET <input type="checkbox"/>	NET <input type="checkbox"/>
		- 35 % DISCOUNT <input checked="" type="checkbox"/>	- 22 % DISCOUNT <input checked="" type="checkbox"/>	off list -18.1 % DISCOUNT <input checked="" type="checkbox"/>
		+ ____ % MARKUP <input type="checkbox"/>	+ ____ % MARKUP <input type="checkbox"/>	+ ____ % MARKUP <input type="checkbox"/>
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)		<u>BOUND TREE MEDICAL LLC</u> CATALOG ** PLEASE SEE ATTACHED EXCLUSION LETTER ATTACH	<u>EMERGENCY MEDICAL</u> <u>PRODUCTS, INC.</u>	<u>HENRY SCHEIN EMS</u>
List Number _____ Dated _____		<u>1/13/2014</u>	<u>#48</u> <u>NOV, 2013</u>	<u>01/2013</u> <u>MOST CURRENT</u>
TYPE OF PRICE LIST				
WHOLESALE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DISTRIBUTOR		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
JOBBER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RETAILER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____		<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

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APPROVED BY: _____ /s/ _____

DATE: 2/18/2014



CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES BID # 2014-096
 BID DATE: JANUARY 15, 2014 DEPARTMENT: EL PASO FIRE DEPARTMENT

		BOUND TREE MEDICAL LLC DUBLIN, OH	EMERGENCY MEDICAL PRODUCTS, INC. CUDAHY, WI	HENRY SCHEIN INC. IRMO, SC
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR		
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP
ITEM 1:	MEDICAL SUPPLY CATALOG (ALTERNATE 1)	NET <input type="checkbox"/>	NET <input type="checkbox"/>	NET <input type="checkbox"/>
		- % DISCOUNT <input type="checkbox"/>	- ___% DISCOUNT <input type="checkbox"/>	off list - <u>18.1</u> % DISCOUNT <input checked="" type="checkbox"/>
		+ ___% MARKUP <input type="checkbox"/>	+ ___% MARKUP <input type="checkbox"/>	+ ___% MARKUP <input type="checkbox"/>
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)				<u>FERNO</u>
List Number _____ Dated _____				<u>January 1, 2014</u> <u>MOST CURRENT</u>
TYPE OF PRICE LIST				
WHOLESALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DISTRIBUTOR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JOBBER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RETAILER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____		<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input checked="" type="checkbox"/> <u>MFT</u>

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BID ITEM: MEDICAL SUPPLIES		BID # 2014-096							
BID DATE: JANUARY 15, 2014		DEPARTMENT: EL PASO FIRE DEPARTMENT							
		BOUND TREE MEDICAL LLC DUBLIN, OH		EMERGENCY MEDICAL PRODUCTS, INC. CUDAHY, WI			HENRY SCHEIN INC. IRMO, SC		
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR							
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP			NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP		
ITEM 1:	MEDICAL SUPPLY CATALOG (ALTERNATE 2)	NET <input type="checkbox"/>		NET <input type="checkbox"/>			NET <input type="checkbox"/>		
		- % DISCOUNT <input type="checkbox"/>		- ___% DISCOUNT <input type="checkbox"/>			- <u>18.1</u> % DISCOUNT <input checked="" type="checkbox"/>		
		+ ___% MARKUP <input type="checkbox"/>		+ ___% MARKUP <input type="checkbox"/>			+ ___% MARKUP <input type="checkbox"/>		
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)							<u>LAEDAZ MEDICAL</u>		
List Number _____ Dated _____							<u>1/2014</u> <u>MOST CURRENT</u>		
TYPE OF PRICE LIST									
WHOLESALER		<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>		
DISTRIBUTOR		<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>		
JOBBER		<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>		
DEALER		<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>		
RETAILER		<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>		
OTHER _____		<input type="checkbox"/>		<input type="checkbox"/>			<input checked="" type="checkbox"/> <u>MFT</u>		
TWO (2) COPIES (EITHER HARDCOPY OR CD) OF EACH CATALOG/PRICE LIST ARE INCLUDED WITH THE BID PACKAGE.		YES <input type="checkbox"/>	*Please see attached catalog for Bound Tree Medical List Price NO <input checked="" type="checkbox"/>	YES <input checked="" type="checkbox"/>	*2 additional Catalogs are Included due to an Electronic Price List not Being Available.	NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>		NO <input type="checkbox"/>

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BID ITEM: MEDICAL SUPPLIES

BID # 2014-096

BID DATE: JANUARY 15, 2014

DEPARTMENT: EL PASO FIRE DEPARTMENT

		BOUND TREE MEDICAL LLC DUBLIN, OH	EMERGENCY MEDICAL PRODUCTS, INC. CUDAHY, WI	HENRY SCHEIN INC. IRMO, SC
PART B: SAMPLE PRICING				
ITEM 1.	DESCRIPTION:	20 G.I.V. CATHETERS, STERILE, SAFETY	20 G.I.V. CATHETERS, STERILE, SAFETY	20 G.I.V. CATHETERS, STERILE, SAFETY
	MANUFACTURER PART NUMBER:	JELCO 3066	JELCO 3066	JELCO 3066
	BIDDER PART NUMBER:	353066	3066	5556718
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$4.00 ea.	\$3.57	\$2.99
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$2.60 ea.	\$2.78	\$1.66
ITEM 2.	DESCRIPTION:	I.V. START KIT	I.V. START KIT	I.V. START KIT
	MANUFACTURER PART NUMBER:	MEDLINE DYND74270H	MEDLINE DYND74270H	MEDLINE DYND74270H
	BIDDER PART NUMBER:	536-DYND74260EA	DYND74278	1142664
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$3.59 ea.	\$1.90	\$1.93
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$2.33 ea.	\$1.48	\$1.43
ITEM 3.	DESCRIPTION:	MACRODRIP I.V. TUBING	MACRODRIP I.V. TUBING	MACRODRIP I.V. TUBING
	MANUFACTURER PART NUMBER:	B BRAUN 352239	B BRAUN 352239	B BRAUN 352239
	BIDDER PART NUMBER:	1712-23935	352239	4996908
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$4.00 ea.	\$3.77	\$4.65
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$2.60 ea.	\$2.94	\$2.32

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BID ITEM: MEDICAL SUPPLIES		BID # 2014-096		
BID DATE: JANUARY 15, 2014		DEPARTMENT: EL PASO FIRE DEPARTMENT		
		BOUND TREE MEDICAL LLC DUBLIN, OH	EMERGENCY MEDICAL PRODUCTS, INC. CUDAHY, WI	HENRY SCHEIN INC. IRMO, SC
SAMPLE PRICING				
	DESCRIPTION:	GLUCOSE TEST STRIPS	GLUCOSE TEST STRIPS	GLUCOSE TEST STRIPS
ITEM	MANUFACTURER PART NUMBER:	ASSURE 4 560050	ASSURE 4 560050	ASSURE 4 560050
4.	BIDDER PART NUMBER:	2763-60050	560050	3027139
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$24.79 bx 50 ea./bx	\$18.59	\$0.35
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$16.11 bx	\$14.50	\$0.28
TOTAL PRICE LIST COST (ITEMS 1-4)		\$36.38	\$27.83	\$9.92
TOTAL CITY'S COST (ITEMS 1-4)		\$23.64	\$21.70	\$5.69

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BID ITEM: MEDICAL SUPPLIES **BID # 2014-096**
BID DATE: JANUARY 15, 2014 **DEPARTMENT: EL PASO FIRE DEPARTMENT**

	BOUND TREE MEDICAL LLC DUBLIN, OH	EMERGENCY MEDICAL PRODUCTS, INC. CUDAHY, WI	HENRY SCHEIN INC. IRMO, SC
<p>THE CITY AT ITS SOLE DISCRETION, MAY EXERCISE ANY OPTION TO EXTEND THE TERM OF THE AGREEMENT, BY GIVING THE CONTRACTOR WRITTEN NOTICE WITHIN THE TIME PERIOD NOTED ON THE SELECTED OPTIONS.</p> <p>BIDDER OFFERS THE CITY THE OPTION OF EXTENDING THE TERM OF THE CONTRACT FOR:</p> <p>ONE (1) ADDITIONAL YEAR AT THE SAME UNIT PRICE(S), IF THE OPTION IS EXERCISED PRIOR TO THE EXPIRATION OF THE ORIGINAL TERM OF CONTRACT.</p> <p>TWO (2) ADDITIONAL YEARS AT THE SAME UNIT PRICE(S), IF THE OPTION IS EXERCISED PRIOR TO THE EXPIRATION OF THE ORIGINAL TERM OF CONTRACT.</p> <p>NO OPTION OFFERED.</p>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/>
PAYMENT TERMS:	NET- 30 DAYS	NET- 30 DAYS	NET - 30 DAYS
BIDDER AGREES TO ACCEPT PAYMENT BY PROCUREMENT CARD:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
BIDDER'S PROMISED DELIVERY: Within ___ consecutive calendar days.	2 <small>***if item is in stock</small>	7	3
Within ___ hours or overnight after receipt of verbal order in cases of emergency.	SEE ATTACHED DISASTER PROGRAM	48	24
<p>IF BIDDER DOES NOT SPECIFY AN EARLIER DELIVERY, THE CITY'S REQUIRED DELIVERY SHALL PREVAIL. A DELIVERY DATE LATER THAN THE CITY'S REQUIRED DELIVERY MAY BE CAUSE FOR THE REJECTION OF THE BID.</p>			

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CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES BID # 2014-096
 BID DATE: JANUARY 15, 2014 DEPARTMENT: EL PASO FIRE DEPARTMENT

		MOORE MEDICAL LLC FARMINGTON, CT	MRI ENTERPRISES, LLC EL PASO, TX (OPTION A)	MRI ENTERPRISES, LLC EL PASO, TX (OPTION B)
***AMENDMENTS ACKNOWLEDGED		A001 & A002	NONE	NONE
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR		
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP
ITEM 1:	MEDICAL SUPPLY CATALOG	NET <input type="checkbox"/>	NET <input type="checkbox"/>	NET <input type="checkbox"/>
		- <u>18</u> % DISCOUNT <input checked="" type="checkbox"/>	MEDLINE - <u>29%</u> , 1%, <u>75%</u> DISCOUNT <input checked="" type="checkbox"/>	MEDLINE - <u>29% & 75%</u> DISCOUNT <input checked="" type="checkbox"/>
		+ _____ % MARKUP <input type="checkbox"/>	+ _____ % MARKUP <input type="checkbox"/>	+ _____ % MARKUP <input type="checkbox"/>
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)		www.mooremedical.com	<u>29% J36066 I.V. CATHETER</u> <u>1% DVND 74278 I.V. STARTER KIT</u> <u>75% ASSURE 4 TEST STRIPS</u>	<u>29% J3606 I.V. CATHETER</u> <u>75% ASSURE 4 TEST STRIPS</u>
List Number _____ Dated _____		<u>1/15/2014</u>	<u>1/10/2014</u>	<u>1/13/2014</u>
TYPE OF PRICE LIST				
WHOLESALE		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DISTRIBUTOR		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
JOBBER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RETAILER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____		<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

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BID ITEM: MEDICAL SUPPLIES BID DATE: JANUARY 15, 2014		BID # 2014-096 DEPARTMENT: EL PASO FIRE DEPARTMENT		
		MOORE MEDICAL LLC FARMINGTON, CT	MRI ENTERPRISES, LLC EL PASO, TX (OPTION A)	MRI ENTERPRISES, LLC EL PASO, TX (OPTION B)
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR		
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP
ITEM 1:	MEDICAL SUPPLY CATALOG (ALTERNATE 1)	NET <input type="checkbox"/>	NET <input type="checkbox"/>	NET <input type="checkbox"/>
		<small>CIA: CENTRAL INFUSION ALLIANCE</small>	<small>ICU MEDICAL</small>	
		- % DISCOUNT <input type="checkbox"/>	- <u>13</u> % DISCOUNT <input checked="" type="checkbox"/>	- <u>8</u> % DISCOUNT <input checked="" type="checkbox"/>
		+ ____ % MARKUP <input type="checkbox"/>	+ ____ % MARKUP <input type="checkbox"/>	+ ____ % MARKUP <input type="checkbox"/>
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)			<u>MACRO DRIP I.V. TUBING</u> <u>B. BRAUN 352239</u>	<u>I.V. STARTER KIT B79140</u> <u>WITH MICRO CLAVE</u>
List Number _____ Dated _____			<u>1/10/2014</u>	<u>1/13/2014</u>
TYPE OF PRICE LIST WHOLESALE <input type="checkbox"/> DISTRIBUTOR <input type="checkbox"/> JOBBER <input type="checkbox"/> DEALER <input type="checkbox"/> RETAILER <input type="checkbox"/> OTHER _____ <input type="checkbox"/>		<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input checked="" type="checkbox"/> MFT

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BID ITEM: MEDICAL SUPPLIES		BID # 2014-096		
BID DATE: JANUARY 15, 2014		DEPARTMENT: EL PASO FIRE DEPARTMENT		
		MOORE MEDICAL LLC FARMINGTON, CT	MRI ENTERPRISES, LLC EL PASO, TX (OPTION A)	MRI ENTERPRISES, LLC EL PASO, TX (OPTION B)
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR		
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP
ITEM 1:	MEDICAL SUPPLY CATALOG (ALTERNATE 2)	NET <input type="checkbox"/>	NET <input type="checkbox"/>	NET <input type="checkbox"/>
		- % DISCOUNT <input type="checkbox"/>	- ____% DISCOUNT <input type="checkbox"/>	CIA: CENTRAL INFUSION ALLIANCE - <u>13</u> % DISCOUNT <input checked="" type="checkbox"/>
		+ ____% MARKUP <input type="checkbox"/>	+ ____% MARKUP <input type="checkbox"/>	+ ____% MARKUP <input type="checkbox"/>
		Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)		<u>BBRAUN 352239 MACRO DRIP I.V. TUBING</u>
List Number _____ Dated _____				<u>1/14/2013</u>
TYPE OF PRICE LIST				
WHOLESALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DISTRIBUTOR		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
JOBBER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RETAILER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TWO (2) COPIES (EITHER HARDCOPY OR CD) OF EACH CATALOG/PRICE LIST ARE INCLUDED WITH THE BID PACKAGE.		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>	YES <input checked="" type="checkbox"/>
		<input type="checkbox"/>	See Attachment List at the End of this Document	NO <input type="checkbox"/>
		<input type="checkbox"/>	See Attachment List at the End of this Document	NO <input type="checkbox"/>

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BID ITEM: MEDICAL SUPPLIES

BID # 2014-096

BID DATE: JANUARY 15, 2014

DEPARTMENT: EL PASO FIRE DEPARTMENT

		MOORE MEDICAL LLC FARMINGTON, CT	MRI ENTERPRISES, LLC EL PASO, TX (OPTION A)	MRI ENTERPRISES, LLC EL PASO, TX (OPTION B)
PART B: SAMPLE PRICING				
ITEM 1.	DESCRIPTION:	20 G.I.V. CATHETERS, STERILE, SAFETY	20 G.I.V. CATHETERS, STERILE, SAFETY	20 G.I.V. CATHETERS, STERILE, SAFETY
	MANUFACTURER PART NUMBER:	JELCO 3066	JELCO 3066	JELCO 3066
	BIDDER PART NUMBER:	59750	MEDLINE J-J3066	MEDLINE J-J3066
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$170.00	\$812.11	\$812.00
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$139.40	\$576.52	\$576.52
ITEM 2.	DESCRIPTION:	I.V. START KIT	I.V. START KIT	I.V. START KIT
	MANUFACTURER PART NUMBER:	MEDLINE DYND74270H	MEDLINE DYND74270H	MEDLINE DYND74270H
	BIDDER PART NUMBER:	20165	MEDLINE DYND 74278	ICU MEDICAL B79140
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$3.29	\$142.11	\$290.00
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$2.70	\$140.58	\$266.80
ITEM 3.	DESCRIPTION:	MACRODRIP I.V. TUBING	MACRODRIP I.V. TUBING	MACRODRIP I.V. TUBING
	MANUFACTURER PART NUMBER:	B BRAUN 352239	B BRAUN 352239	B BRAUN 352239
	BIDDER PART NUMBER:	95398	CIA BBRAUN 352239	CIA B BRAUN 352239
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$5.19	\$167.00	\$167.00
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$4.26	\$145.29	\$145.29

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BID DATE: JANUARY 15, 2014		DEPARTMENT: EL PASO FIRE DEPARTMENT		
		MOORE MEDICAL LLC FARMINGTON, CT	MRI ENTERPRISES, LLC EL PASO, TX (OPTION A)	MRI ENTERPRISES, LLC EL PASO, TX (OPTION B)
SAMPLE PRICING				
	DESCRIPTION:	GLUCOSE TEST STRIPS	GLUCOSE TEST STRIPS	GLUCOSE TEST STRIPS
ITEM	MANUFACTURER PART NUMBER:	ASSURE 4 560050	ASSURE 4 560050	ASSURE 4 560050
4.	BIDDER PART NUMBER:	85626	MEDLINE CMD5600502	MEDLINE CMD5600502
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$43.69	\$65.33	\$65.33
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$35.83	\$16.33	\$16.33
TOTAL PRICE LIST COST (ITEMS 1-4)		\$222.17	\$1,186.55 <small>BIDDER'S PRICE \$1,186.33</small>	\$1,334.33 <small>BIDDER'S PRICE \$1,334.25</small>
TOTAL CITY'S COST (ITEMS 1-4)		\$182.19 <small>BIDDER'S PRICE \$181.78</small>	\$878.72	\$1,004.94

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BID ITEM: MEDICAL SUPPLIES
BID DATE: JANUARY 15, 2014

BID # 2014-096

DEPARTMENT: EL PASO FIRE DEPARTMENT

	MOORE MEDICAL LLC FARMINGTON, CT	MRI ENTERPRISES, LLC EL PASO, TX (OPTION A)	MRI ENTERPRISES, LLC EL PASO, TX (OPTION B)
<p>THE CITY AT ITS SOLE DISCRETION, MAY EXERCISE ANY OPTION TO EXTEND THE TERM OF THE AGREEMENT, BY GIVING THE CONTRACTOR WRITTEN NOTICE WITHIN THE TIME PERIOD NOTED ON THE SELECTED OPTIONS.</p> <p>BIDDER OFFERS THE CITY THE OPTION OF EXTENDING THE TERM OF THE CONTRACT FOR:</p> <p>ONE (1) ADDITIONAL YEAR AT THE SAME UNIT PRICE(S), IF THE OPTION IS EXERCISED PRIOR TO THE EXPIRATION OF THE ORIGINAL TERM OF CONTRACT.</p> <p>TWO (2) ADDITIONAL YEARS AT THE SAME UNIT PRICE(S), IF THE OPTION IS EXERCISED PRIOR TO THE EXPIRATION OF THE ORIGINAL TERM OF CONTRACT.</p> <p>NO OPTION OFFERED.</p>	<input checked="" type="checkbox"/> Please see bid clarification document for exceptions	<input type="checkbox"/>	<input type="checkbox"/>
	<input checked="" type="checkbox"/> Please see bid clarification document for exceptions	<input type="checkbox"/>	<input type="checkbox"/>
	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
PAYMENT TERMS:	NET - 30 DAYS	NET - 30 DAYS	NET - 30 DAYS
BIDDER AGREES TO ACCEPT PAYMENT BY PROCUREMENT CARD:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
BIDDER'S PROMISED DELIVERY:	4	8	8
Within ___ consecutive calendar days.			
Within ___ hours or overnight after receipt of verbal order in cases of emergency.	48	48	48
<p>IF BIDDER DOES NOT SPECIFY AN EARLIER DELIVERY, THE CITY'S REQUIRED DELIVERY SHALL PREVAIL. A DELIVERY DATE LATER THAN THE CITY'S REQUIRED DELIVERY MAY BE CAUSE FOR THE REJECTION OF THE BID.</p>			

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APPROVED BY: ___/s/___

DATE: 2/18/2014



CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES **BID # 2014-096**
BID DATE: JANUARY 15, 2014 **DEPARTMENT: EL PASO FIRE DEPARTMENT**

		QUADMED, INC. JACKSONVILLE, FL	WEST TEXAS MEDICAL SPECIALTIES EL PASO, TX	
***AMENDMENTS ACKNOWLEDGED		A001 & A002	A001 & A002	
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR		
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP
ITEM 1:	MEDICAL SUPPLY CATALOG	NET <input type="checkbox"/>	NET <input checked="" type="checkbox"/>	NET <input type="checkbox"/>
		- <u>15</u> % DISCOUNT <input checked="" type="checkbox"/>	- ___ % DISCOUNT <input type="checkbox"/>	- _ % DISCOUNT <input type="checkbox"/>
		+ ___ % MARKUP <input type="checkbox"/>	+ ___ % MARKUP <input type="checkbox"/>	+ ___ % MARKUP <input type="checkbox"/>
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)		www.quadmed.com	<u>NATIONAL DISTRIBUTION & CONTRACTING</u>	
List Number _____ Dated _____			<u>2009</u>	
TYPE OF PRICE LIST				
WHOLESALER <input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DISTRIBUTOR <input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
JOBBER <input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEALER <input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RETAILER <input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____ <input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES

BID # 2014-096

BID DATE: JANUARY 15, 2014

DEPARTMENT: EL PASO FIRE DEPARTMENT

		QUADMED, INC. JACKSONVILLE, FL	WEST TEXAS MEDICAL SPECIALTIES EL PASO, TX	
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR		
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP
ITEM 1:	MEDICAL SUPPLY CATALOG (ALTERNATE 1)	NET <input type="checkbox"/>	NET <input type="checkbox"/>	NET <input type="checkbox"/>
		- ____ % DISCOUNT <input type="checkbox"/>	- ____ % DISCOUNT <input type="checkbox"/>	- ____ % DISCOUNT <input type="checkbox"/>
		+ ____ % MARKUP <input type="checkbox"/>	+ ____ % MARKUP <input type="checkbox"/>	+ ____ % MARKUP <input type="checkbox"/>
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)				
List Number _____ Dated _____				
TYPE OF PRICE LIST				
WHOLESALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DISTRIBUTOR		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
JOBBER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DEALER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RETAILER		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
OTHER _____		<input type="checkbox"/> _____	<input type="checkbox"/> _____	<input type="checkbox"/> _____

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CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES		BID # 2014-096					
BID DATE: JANUARY 15, 2014		DEPARTMENT: EL PASO FIRE DEPARTMENT					
		QUADMED, INC. JACKSONVILLE, FL		WEST TEXAS MEDICAL SPECIALTIES EL PASO, TX			
PART A: PRICE LIST PRICING		PRICE ADJUSTMENT FACTOR					
ITEM DESCRIPTION		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP		NET <u>OR</u> % DISCOUNT <u>OR</u> MARKUP	
ITEM 1:	MEDICAL SUPPLY CATALOG (ALTERNATE 2)	NET <input type="checkbox"/>		NET <input type="checkbox"/>		NET <input type="checkbox"/>	
		- % DISCOUNT <input type="checkbox"/>		- ___% DISCOUNT <input type="checkbox"/>		- _% DISCOUNT <input type="checkbox"/>	
		+ ___% MARKUP <input type="checkbox"/>		+ ___% MARKUP <input type="checkbox"/>		+ ___% MARKUP <input type="checkbox"/>	
Discount/Mark-up or Net proposed from the _____ Price List or Catalog (MANUFACTURER OR BRAND NAME)							
List Number _____ Dated _____							
TYPE OF PRICE LIST							
WHOLESALE <input type="checkbox"/>							
DISTRIBUTOR <input type="checkbox"/>							
JOBBER <input type="checkbox"/>							
DEALER <input type="checkbox"/>							
RETAILER <input type="checkbox"/>							
OTHER _____ <input type="checkbox"/>							
TWO (2) COPIES (EITHER HARDCOPY OR CD) OF EACH CATALOG/PRICE LIST ARE INCLUDED WITH THE BID PACKAGE.		YES <input checked="" type="checkbox"/>		NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/>		NO <input type="checkbox"/>

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DATE: 2/18/2014



CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES

BID # 2014-096

BID DATE: JANUARY 15, 2014

DEPARTMENT: EL PASO FIRE DEPARTMENT

		QUADMED, INC. JACKSONVILLE, FL	WEST TEXAS MEDICAL SPECIALTIES EL PASO, TX	
PART B: SAMPLE PRICING				
ITEM 1.	DESCRIPTION:	20 G.I.V. CATHETERS, STERILE, SAFETY	20 G.I.V. CATHETERS, STERILE, SAFETY	20 G.I.V. CATHETERS, STERILE, SAFETY
	MANUFACTURER PART NUMBER:	JELCO 3066	JELCO 3066	JELCO 3066
	BIDDER PART NUMBER:	EDI-3003-PP	200/CS JELCO 3066	
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$149.00	\$425.69	
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$126.65	\$519.14	
ITEM 2.	DESCRIPTION:	I.V. START KIT	I.V. START KIT	I.V. START KIT
	MANUFACTURER PART NUMBER:	MEDLINE DYND74270H	MEDLINE DYND74270H	MEDLINE DYND74270H
	BIDDER PART NUMBER:	N/S	100/CS DYND 74278	
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$149.95	\$107.08	
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$127.42	\$130.59	
ITEM 3.	DESCRIPTION:	MACRODRIP I.V. TUBING	MACRODRIP I.V. TUBING	MACRODRIP I.V. TUBING
	MANUFACTURER PART NUMBER:	B BRAUN 352239	B BRAUN 352239	B BRAUN 352239
	BIDDER PART NUMBER:	N/S	BRAUN 352239	
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$159.95	\$63.50	
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$135.96	\$77.44	

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CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES		BID # 2014-096		
BID DATE: JANUARY 15, 2014		DEPARTMENT: EL PASO FIRE DEPARTMENT		
		QUADMED, INC. JACKSONVILLE, FL	WEST TEXAS MEDICAL SPECIALTIES EL PASO, TX	
SAMPLE PRICING				
	DESCRIPTION:	GLUCOSE TEST STRIPS	GLUCOSE TEST STRIPS	GLUCOSE TEST STRIPS
ITEM	MANUFACTURER PART NUMBER:	ASSURE 4 560050	ASSURE 4 560050	ASSURE 4 560050
4.	BIDDER PART NUMBER:	EFA-400710	560050	
	PRICE LIST COST BEFORE DISCOUNT/MARK-UP (IF APPLICABLE):	\$39.95	\$12.00	
	CITY'S COST, AFTER DISCOUNT/MARK-UP (NET):	\$33.96	\$14.63	
TOTAL PRICE LIST COST (ITEMS 1-4)		\$498.85 <small>BIDDER'S PRICE *NONE STATED*</small>	\$608.27	\$0.00
TOTAL CITY'S COST (ITEMS 1-4)		\$423.99 <small>BIDDER'S PRICE *NONE STATED*</small>	\$741.80	\$0.00

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CITY OF EL PASO BID TABULATION



BID ITEM: MEDICAL SUPPLIES **BID # 2014-096**
BID DATE: JANUARY 15, 2014 **DEPARTMENT: EL PASO FIRE DEPARTMENT**

	QUADMED, INC. JACKSONVILLE, FL	WEST TEXAS MEDICAL SPECIALTIES EL PASO, TX	
<p>THE CITY AT ITS SOLE DISCRETION, MAY EXERCISE ANY OPTION TO EXTEND THE TERM OF THE AGREEMENT, BY GIVING THE CONTRACTOR WRITTEN NOTICE WITHIN THE TIME PERIOD NOTED ON THE SELECTED OPTIONS.</p> <p>BIDDER OFFERS THE CITY THE OPTION OF EXTENDING THE TERM OF THE CONTRACT FOR:</p> <p>ONE (1) ADDITIONAL YEAR AT THE SAME UNIT PRICE(S), IF THE OPTION IS EXERCISED PRIOR TO THE EXPIRATION OF THE ORIGINAL TERM OF CONTRACT.</p> <p>TWO (2) ADDITIONAL YEARS AT THE SAME UNIT PRICE(S), IF THE OPTION IS EXERCISED PRIOR TO THE EXPIRATION OF THE ORIGINAL TERM OF CONTRACT.</p> <p>NO OPTION OFFERED.</p>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
PAYMENT TERMS:	NET - 30 DAYS	NET - 30 DAYS	
BIDDER AGREES TO ACCEPT PAYMENT BY PROCUREMENT CARD:	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
BIDDER'S PROMISED DELIVERY:			
Within ___ consecutive calendar days.	2	2-8	
Within ___ hours or overnight after receipt of verbal order in cases of emergency.	24	48	
IF BIDDER DOES NOT SPECIFY AN EARLIER DELIVERY, THE CITY'S REQUIRED DELIVERY SHALL PREVAIL. A DELIVERY DATE LATER THAN THE CITY'S REQUIRED DELIVERY MAY BE CAUSE FOR THE REJECTION OF THE BID.			

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BIDS SOLICITED: 57 BIDS RECEIVED: 8 BIDS LOCAL: 3 NO BID: 0

APPROVED BY: ___/s/___

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