

**Lee County Board Of County Commissioners
Agenda Item Summary**

Blue Sheet No. 20030035

1. REQUESTED MOTION:

ACTION REQUESTED: Approve Project # PB030247, the utilization (piggyback) of the City of Jacksonville, Florida Bid # SC-0492-01, which has gone through their competitive bidding process, for the purchase of cardiac monitoring treatment devices from Zoll Medical Corporation, for the Public Safety-EMS Division. The grand total for the 26 defibrillators, maintenance, extended warranty and accompanying accessories is \$596,430.39.

WHY ACTION IS NECESSARY: To allow Public Safety-EMS Division to equip all ambulances and helicopter with uniform devices.

WHAT ACTION ACCOMPLISHES: Allows Public Safety-EMS Division to purchase cardiac monitoring/treatment devices at a reasonable cost off an existing quote with the City of Jacksonville.

2. DEPARTMENTAL CATEGORY:

COMMISSION DISTRICT #

C7A

3. MEETING DATE: DATE CRITICAL

01-28-2003

4. AGENDA:

- CONSENT
- ADMINISTRATIVE
- APPEALS
- PUBLIC
- WALK ON
- TIME REQUIRED:

5. REQUIREMENT/PURPOSE:

(Specify)

- STATUTE
- ORDINANCE
- ADMIN. CODE
- OTHER

AC-4-1

6. REQUESTOR OF INFORMATION:

- A. COMMISSIONER
- B. DEPARTMENT *Public Safety*
- C. DIVISION *EMS*

BY: *John Wilson*
[Signature]

7. BACKGROUND:

On January 7, 2003, Purchasing Services received a request from the Public Safety-EMS Division to utilize (piggyback) a bid established by the City of Jacksonville, Florida with the Zoll Medical Corporation for the Procurement of cardiac monitoring/treatment devices. This is a continuation of a previous project # PB020212 which also utilized this City of Jacksonville bid.

Section 10.1 of the Lee County Purchasing Manual allows Lee County to utilize the quotes/bids of other governmental entities as long as the procurement has gone through their competitive quoting/bidding process.

(Background continued on next page)

8. MANAGEMENT RECOMMENDATIONS:

9. RECOMMENDED APPROVAL:

A Department Director	B Purchasing or Contracts	C Human Resources	D Other	E County Attorney	F Budget Services				G County Manager
<i>M. Reilly</i> <i>1-14-3</i>	<i>Janet Sheehan</i> <i>1-15-03</i>	<i>N/A</i>		<i>[Signature]</i>	<i>OA</i> <i>1/15/03</i>	<i>OM</i> <i>1/15/03</i>	<i>Risk</i> <i>1/15/03</i>	<i>GC</i> <i>1/15/03</i>	<i>[Signature]</i>

10. COMMISSION ACTION:

- APPROVED
- DENIED
- DEFERRED
- OTHER

1/14/03 8:43 PM

FORWARDED TO: *BY*

1/15/03

1/15/03 8:30 AM

FORWARDED TO: *County Admin*

8:30 AM

(Background continued from page 1)

Purchasing has reviewed and verified the City of Jacksonville specifications and the award information. Additionally, Purchasing Services has received permission from the City of Jacksonville and the Zoll Medical Corporation to utilize this bid.

Per the information provided by Public Safety-EMS these machines from the Zoll Medical Corporation have been field-tested and have been recommended by medical director of Lee County.

Account #'s KF5260100100.505221
KF5260100100.505222
KF5260100100.505280
KF5260100100.506410
GRANT-12068013814

Attachments: (1) Department request to piggyback
(2) Medical Directors recommendation
(3) City of Jacksonville's specifications
(4) Zoll Medical Corporation's Bid
(5) City of Jacksonville's Award Notice
(6) City of Jacksonville's Tabulation Sheet
(7) Authorization to piggyback from the City of Jacksonville
(8) Authorization to piggyback from Zoll Medical Corporation
(9) Zoll Medical Corporation quotation for EMS

Division of

Public Safety

MEMO

To: Bob Franceschini, Purchasing Agent
From: Chief Chris Hansen, EMS Manager
Subject: **Bluesheet for ZOLL Purchase**
Date: January 7, 2003

Chris

The purpose of this memorandum is to respectfully request your assistance in preparation of a blue sheet for Board approval to purchase ZOLL cardiac monitoring / treatment devices. This is a continuation of the previous project #PB020212 which utilized the City of Jacksonville piggyback. This purchase will allow EMS to equip all ambulances and the helicopter with uniform devices.

The specifics of the action requested, necessity and accomplishments are the same as the previous ZOLL blue sheet with the exception of the cost as outlined in the attached quotation. I have included copy of the previous blue sheet # 20020104 for reference.

The funding account strings for this project are:

KF5260100100.505221
KF5260100100.505222
KF5260100100.505280
KF5260100100.506410
Grant - 12068013814

Thank you for all your assistance in this important project.

cc: Janet Sheehan, Purchasing Director
Patti Hojnacki, Public Safety Fiscal Officer
John Wilson, Public Safety Director
Lt. Don Plunkett, EMS Supervisor

*Dade
Critical
1/28/03*

Attachments

**Lee County Board Of County Commissioners
Agenda Item Summary**

Blue Sheet No. 20020104

REQUESTED MOTION:

ACTION REQUESTED: Approve Project # PB020212, the utilization (piggyback) of the City of Jacksonville, Florida Bid # SC-0492-01, which has gone through their competitive bidding process, for the purchase of six M Series Med-Pro Biphasic Cardiac Monitor/Defibrillators from the Zoll Medical Corporation, for the Public Safety – EMS Division. The unit cost per machine is \$20,798.84, with a grand total of \$124,793.04 for the six machines.

WHY ACTION IS NECESSARY: Emergency Medical Services requires these medical devices to equip the new ambulances that were approved for purchase by the Board of County Commissioners for this fiscal year.

WHAT ACTION ACCOMPLISHES: Allows Emergency Medical Services to purchase cardiac monitor/defibrillators at a very reasonable price and also have delivery of the devices in a timely fashion.

2. DEPARTMENTAL CATEGORY:
COMMISSION DISTRICT #

3. MEETING DATE:

4. AGENDA:

5. REQUIREMENT/PURPOSE:
(Specify)

6. REQUESTOR OF INFORMATION:

CONSENT
 ADMINISTRATIVE
 APPEALS
 PUBLIC
 WALK ON
 TIME REQUIRED:

STATUTE
 ORDINANCE
 ADMIN. AC-4-1
 CODE
 OTHER

A. COMMISSIONER _____
 B. DEPARTMENT _____
 C. DIVISION Public Safety - EMS

BY: John Wilson

7. BACKGROUND:

On January 30, 2002, the Division of Purchasing Services received a request from the Public Safety – EMS Division to utilize (piggyback) the bid established by the City of Jacksonville, Florida with the Zoll Medical Corporation for the procurement of cardiac monitor/defibrillators.

Section 10.1 of the Lee County Purchasing and Payment Procedures Manual allows Lee County to utilize the quotes/bids of other governmental entities as long as the procurement has gone through their competitive quoting/bidding process.

(BACKGROUND CONTINUED ON PAGE 2)

8. MANAGEMENT RECOMMENDATIONS:

9. RECOMMENDED APPROVAL:

A Department Director	B Purchasing or Contracts	C Human Resources	D Other	E County Attorney	F Budget Services				G County Manager
					OA	OM	Risk	GC	
	<i>Janet Steinhilber 1-31-02 E. Pflaum</i>	N/A							

10. COMMISSION ACTION:

_____ APPROVED
 _____ DENIED
 _____ DEFERRED
 _____ OTHER

(BACKGROUND CONTINUED FROM PAGE 1)

Purchasing Services has reviewed and verified both the specifications used and the award information. Also, Lee County has received permission from the City of Jacksonville and the Zoll Medical Corporation to utilize the bid.

The Zoll Medical Corporation's machines have been field tested and are being recommended by Dr. William Bess, the medical director for Lee County EMS, as evidenced by his memo attached.

One of the advantages of the City of Jacksonville's Bid is how they structured the bid for the machines. They broke down the pricing sheets to include the base unit and many additional components to the base machine, so that the entity purchasing the devices could configure the machines however they want.

Therefore, approval is requested to utilize (piggyback) the City of Jacksonville, Florida Bid # SC-0492-01 for the purchase of six M Series Med-Pro Biphasic Cardiac Monitor/Defibrillators from the Zoll Medical Corporation, for the Public Safety – EMS Division. The unit cost per machine is \$20,798.84, with a grand total of \$124,793.04 for the six machines.

Account # KF5260100100.506410

- ATTACHMENTS:
- (1) Department request to piggyback
 - (2) Dr. William Bess's recommendation
 - (3) City of Jacksonville's specifications
 - (4) Zoll Medical Corporation's Bid
 - (5) City of Jacksonville's Award Notice
 - (6) City of Jacksonville's Bid Tabulation Sheet
 - (7) Authorization to piggyback from the City of Jacksonville
 - (8) Authorization to piggyback from the Zoll Medical Corporation
 - (9) Price quotation from Zoll Medical for the six machines

(Click here and type return address)

William Bess M.D.

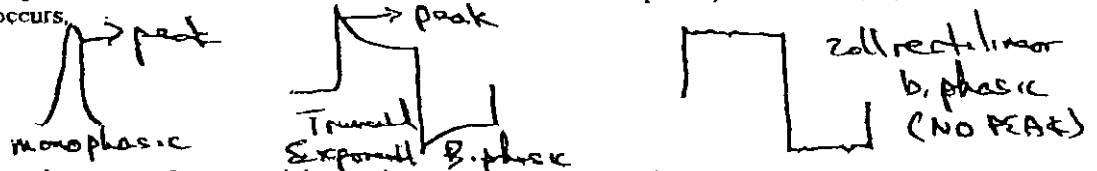
January 28, 2002

Chris Hansen, Director Lee County EMS

Dear Chris:

As Medical Director of LCEMS I recommend purchase of the Zoll biphasic defibrillator. My recommendation is based on the following points:

1. All other manufacturers use a truncated exponential waveform and Zoll is the only one to use the rectilinear waveform. One reason to go to biphasic was to prevent current peaks which have been shown to cause myocardial damage and continued ST depression after defibrillation. The truncated exponential waveform is better than the old sinusoidal monophasic, but some current peak still occurs.



Furthermore, the truncated exponential waveform compensates for patient impedance by changing the size and shape of its waveform. The Zoll rectilinear waveform is constant and impedance in the patient is compensated for by changing the internal resistance in the Zoll.

3. Zoll maintains LOW ENERGY waveforms and Physio Control is pushing theirs because it will go to 360 joules biphasic. I believe that it is very likely that the American Heart Association will soon go to recommend LOW ENERGY.
4. General Electric has just been licensed to use Zoll's waveform in all of their equipment.
5. I have asked one of the EP (electrophysical) specialists at SW Florida Heart Group if there is any advantage to going 360 truncated exponential biphasic for elective cardioversion and he said no one in their group does.
6. Physio talks about a case of a woman with atrial fibrillation who a monophasic defibrillator would not convert with energy levels up to 700 joules. She was shocked at 200 joules with the Zoll biphasic and did not convert. She was then given 1mg of ibutilide and was shocked again without success. LATER that day the Physio machine shocked her at 200 joules and she transiently converted from atrial fib and went back into it and then with 360 joules converted. The time delay from Zoll to Physio and the addition of ibutilide, not to mention that this woman represents 1 out of a thousand that need this treatment makes this single case meaningless to me.
7. The White House staff has bought Zoll machines for the White House, Air Force 1 and Air Force 2.
8. Zoll's pacer captures at half the millamperage of others.

FROM : WILLIAM BESS MD

PHONE NO. : 3327490

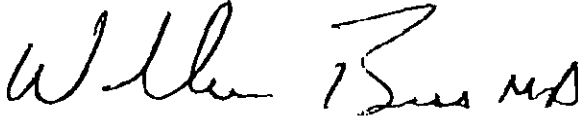
Jan. 28 2002 05:05PM P2

January 28, 2002

Page 2

9. Truncated exponential biphasic waveforms rise quickly to a sharp peak, decay slowly and return to zero.
10. Zoll has a lightweight built in AC power supply, Physio has a heavy optional add on.
11. MRI, sells to no one in the state of Florida currently.

Sincerely,



William Bess, M.D.
Medical Director LCEMS

ATTACHMENT # 3

SUBMIT AN ORIGINAL AND ONE (1) COPY

BID SPECIFICATIONS



FOR

CARDIAC MONITOR / DEFIBRILLATORS

FIRE/RESCUE

BID NO: SJ 0492-01

OPEN DATE: 5/30/01

TIME: 2:00 P.M.

PLACE: 3RD FLOOR, CITY HALL, 117 WEST DUVAL STREET,
CONFERENCE ROOM C

PRE-BID CONFERENCE:

DATE:
TIME:
LOCATION:

**CITY OF JACKSONVILLE
PROCUREMENT AND SUPPLY DIVISION**

JOHN DELANEY
MAYOR.

JACQUIE H. GIBBS, CHIEF
PROCUREMENT & SUPPLY

EQUAL BUSINESS OPPORTUNITY PROGRAM

The City of Jacksonville has participated along with other Independent Agencies of the City, in the research and development of a disparity study.

It is an official policy of the City of Jacksonville to encourage the maximum participation of Minority Business Enterprises (MBEs) in its contract awards based upon availability. It is the City's intent in adopting this program to reflect the philosophy with regard to enhancing participation of Minority Business Enterprises in all areas of procurement.

This project has been designated to be under the Equal Business Opportunity Program and has been selected to utilize the following method for achieving minority utilization and goals under the Equal Business Opportunity Program: **The Encouragement Plan.**

Under the encouragement plan, vendors are required to make all efforts reasonably necessary to ensure that Minority Owned Business Enterprises have a full and fair opportunity to compete for performance on this project.

Bidders/Suppliers/Consultants or any entity doing business with the City shall not discriminate on the basis of race, ethnicity, national origin or gender in the award and performance of the work under this contract.

Please use the attached form 1 (MBE Schedule of Participation) to submit Minority Participation on this Bid. The City of Jacksonville will accept certified vendors with the State of Florida. You may contact the City's Equal Business Opportunity Office for a copy of the minority directory or visit our web site at www.coj.net/pub/ebo.

FORM CB-118, revised 1/00

BID NO.: SC-0492-01

SCHEDULE OF MBE PARTICIPATION

NAME OF Vendor _____
 PROJECT TITLE _____
 BID NUMBER _____ TOTAL BASE BID AMOUNT _____

NAME OF MBE	TYPE OF WORK TO BE PERFORMED	TYPE OF MBE	BIDDER/SUPPLIER	TOTAL CONTRACT VALUE

Subcontractor Total Values	
Hispanic, Asian-American Participation Total Value:	\$ _____
African-American Participation Total Value:	\$ _____
Native-American Participation Total Value:	\$ _____
Woman Participation Total Value:	\$ _____

Supplier Total Values	
Hispanic, Asian-American Participation Total Value:	_____ X 60% \$ _____
African-American Participation Total Value:	_____ X 60% \$ _____
Native-American Participation Total Value:	_____ X 60% \$ _____
Woman Participation Total Value:	_____ X 60% \$ _____

The undersigned will enter into a formal Agreement with the MBE Suppliers/Consultants/Subcontractors/Bidders identified herein for work listed in this schedule conditioned upon execution of a contract with the City of Jacksonville. Under penalties of perjury I declare that I have read the foregoing conditions and instructions and the facts are true to the best of my knowledge and beliefs.

Signature: _____ Title: _____ Date: _____

FORM CB-118, revised 1/00

GENERAL CONDITIONS

BID# SC-0492-01

1. RESERVATIONS: The City of Jacksonville, Florida reserves the right to reject any or all bids or any part thereof and/or to waive information if such action is deemed to be in the best interest of the City of Jacksonville. The City reserves the right to cancel any contract, in its opinion, there be a failure at any time to perform adequately the stipulations of this invitation to bid, and the general conditions and specifications which are attached and made part of this bid, or in any case of any attempt to willfully impose upon the City materials or products or workmanship which is, in the opinion of the City, of an unacceptable quality. Any action taken in pursuance of this latter stipulation will not effect or impair any rights or claim of the City to damages for the breach of any covenants of the contract by the contractor. The City also reserves the right to reject the bid of any bidder who has previously failed to perform satisfactorily after having once been awarded a prior bid for furnishing materials similar in nature to those materials mentioned in this bid.

Should the contractor fail to comply with the conditions of this contract or fail to complete the required work or furnish the required materials within the time stipulated in the contract, the City reserves the right to purchase in the open market, or to complete the required work, at the expense of the contractor by any recourse to provisions of the faithful performance bond if such bond is required under the conditions of this bid.

Should the contractor fail to furnish any item or items, or to complete the required work included in this contract, the City reserves the right to withdraw such items or required work from the operation of this contract without incurring further liabilities on the part of the City thereby.

SHOULD ANY BIDDER HAVE ANY QUESTIONS AS TO THE INTENT OF MEANING OF ANY PART OF THIS BID HE SHOULD CONTACT THE OFFICE OF PROCUREMENT AND SUPPLY IN TIME TO RECEIVE A WRITTEN REPLY BEFORE SUBMITTING HIS BID.

All items furnished must be completely new, and free from defects unless specified otherwise. No others will be accepted under the terms and intent of this bid.

2. QUOTATIONS: No bidder will be allowed to offer more than one price on each item even though he may feel that he has two or more uses or styles that will meet specifications. Bidders must determine for themselves which to offer. IF SAID BIDDER SHOULD SUBMIT MORE THAN ONE PRICE ON ANY ITEM ALL PRICES FOR THAT ITEM WILL BE REJECTED AT THE DISCRETION OF THE CHIEF, PROCUREMENT & SUPPLY.

3. TAXES: The City of Jacksonville, Florida is exempt from the following taxes: (a) State of Florida Sales Tax by Certificate No. 03-150-08-26; (b) Manufacturer's Federal Excise Tax Registration No. 58-6000-34.

4. CARTAGE: No charge will be allowed for cartage of packages unless by special agreement.

5. "OR EQUAL" INTERPRETATION: Even though a particular manufacturer's name or brand is specified, bids will be considered on other brands or on the products of other manufacturers. On all such bids the bidder will clearly indicate the product (brand and model number) on which he is bidding, and will supply a sample or sufficient data in detail to enable an intelligent comparison to be made with the particular brand or manufacture specified. All samples will be submitted in accordance with procedures outlined in the paragraph of SAMPLES. Catalog cuts and technical descriptive data will be attached to the original copy of the bid where applicable. Failure to submit the above information may be a sufficient ground for rejection of bid.

6. DEVIATIONS TO SPECIFICATIONS: In addition to the requirements of paragraph five, all deviations from the specifications noted be noted in detail by the bidder, in writing, at the time of the submission of the final bid. The absence of a written list of specification deviations at the time of submission of the bid will hold the bidder strictly accountable to the City to the specifications as written. Any deviation from the specifications as written not previously permitted, as required by the above, will be grounds for rejection of the material and/or equipment when delivered.

7. DATA REQUIRED TO BE SUBMITTED WITH REFERENCE TO BID:

a. Whenever the specifications indicate a product or a particular manufacturer, model, or brand in the absence of any statement to the contrary by the bidder, the bid will be interpreted as for the exact brand, model, or a manufacturer specified, together with all accessories, qualities, tolerances, compositions, etc. enumerated in the detailed specifications.

b. If no particular brand, model or make is specified, and if no data is required to be submitted with this bid, the successful contractor, after award and before manufacturer or shipment, may be required to submit working drawings or detailed descriptive data sufficient to enable the City to judge if each requirement of the specifications is being complied with.

8. SAMPLES: The samples submitted by bidders on items which they have received an award may be retained by the City until the delivery of the contracted items is completed and accepted. Bidders whose samples are required may remove them after delivery is accepted.

Samples on which bidders are unsuccessful must be removed as soon as possible after an award has been made on the item or items by which the samples have been submitted. The City will not be responsible for such samples if not removed by the bidder within 30 days after the award has been made. The City reserves the right to consume any of the samples for testing purposes.

Bidders will make all arrangements for delivery of samples to place designated as well as the removal of samples. Cost of delivery and removal of samples will be borne by the bidder.

All sample packages will be marked "Sample for Purchasing Department" and each sample will bear the name of the bidder, item number, bid number and will be clearly tagged or marked in a substantial manner. Failure of the bidder to clearly identify samples as indicated may be considered sufficient reason for rejection of bid.

9. PERFORMANCE BOND: The successful bidder on this bid must furnish a performance bond as indicated on the bid cover, made out to the City of Jacksonville, Florida, prepared on an approved form, as security for the faithful performance of his contract within ten days of his notification that his bid has been accepted. The surety thereon must be such surety company as is authorized and licensed to transact business in the State of Florida. Attorneys in fact who sign bid bonds must file with each bond a certified copy of their power of attorney to sign said bonds. The successful bidder or bidders, upon failure or refusal to furnish within ten days after his notification the required performance bonds, will pay to the City of Jacksonville, Florida, as liquidated damages for such failure or refusal an amount in cash equal to the security deposited with his bid.

10. PROVISION FOR OTHER AGENCIES: Each bidder agrees when submitting his bid that he will make available to all City agencies and departments, bi-City agencies, in-City fire departments and municipalities, the bid process he submits in accordance with the bid terms and conditions, should any said department or agency wish to buy under this bid proposal.

11. GUARANTEE: The contractor will unconditionally guarantee the materials and workmanship on all equipment furnished by him for a period of one year from date of acceptance of the items delivered and installed, unless otherwise specified herein. If, within the guarantee period, any defects or signs of deterioration are noted, which, in the opinion of the City are due to faulty design and installation workmanship, or materials, upon ratification, the contractor, at his expense, will repair or adjust the equipment or parts to correct the condition, or he will replace the part or entire unit to the complete satisfaction of the City. Repairs, replacements or adjustments will be made only at such times as will be designated by the City as least detrimental to the operation of City business.

12. DISCOUNTS: ALL DISCOUNTS OTHER THAN PROMPT PAYMENT TO BE INCLUDED IN BID PRICE. PROMPT PAYMENT DISCOUNTS OF LESS THAN 30 DAYS WILL NOT BE CONSIDERED IN DETERMINING LOW BID.

13. COLLUSION: THE BIDDER, BY AFFIXING HIS SIGNATURE TO THIS PROPOSAL AGREES TO THE FOLLOWING: "BIDDER CERTIFIES THAT THIS BID IS MADE WITHOUT ANY PREVIOUS UNDERSTANDING, AGREEMENT OR CONNECTION WITH ANY PERSON, FIRM, OR CORPORATION MAKING A BID FOR THE SAME ITEMS; AND IS IN ALL RESPECTS FAIR, WITHOUT OUTSIDE CONTROL, COLLUSION, FRAUD OR OTHERWISE ILLEGAL ACTION."

14. ERRORS IN BIDS: Bidders or their authorized representatives are expected to fully inform themselves as to the conditions, requirements, and specifications before submitting bids; failure to do so will be at the bidder's own risk and he cannot secure relief on the plea of error. Neither law nor regulations make allowance for errors either of omission or commission on the part of bidders. In case of error in extension of prices in the bid, the unit price will govern.

15. PROCUREMENT & SUPPLY AS AGENT: When the Procurement & Supply Division is acting as agents for "other public activities" being defined as activities receiving financial support, in part from the City, but not under the direct governing jurisdiction of the Consolidated Government, the name of such public activity will be substituted for the word "City" in the foregoing paragraphs No's 1 - 14.

16. ETHICS PROVISION FOR VENDORS/SUPPLIERS: The bidder, by affixing its signature to the proposal form, and/or the acceptance of a purchase order, represents that it has reviewed the provisions of the Jacksonville Ethics Code contained in chapter 602, Jacksonville Ordinance Code and the provisions of the Purchasing code contained in chapter 126, Jacksonville Ordinance Code.

17. NONDISCRIMINATION PROVISIONS: In compliance with Section 4 of Ordinance 69-630-653, the bidder will, upon affixing his signature to the proposal form, and/or the acceptance of a purchase order, sign draft, field order, certifies that his firm meets and agrees to the following provisions which will become a part of this contract.

a. The contractor represents that he has adopted and will maintain a policy of nondiscrimination as defined by ordinance of the City of Jacksonville throughout the term of this contract.

b. The contractor agrees that on written request, he will permit the reasonable access to his employment, employment advertisement, application forms, and other pertinent data and records by the Executive Director of the Community Relations Commission of the City of Jacksonville for the purpose of investigation to ascertain compliance with the nondiscrimination provisions of this contract, provided however, that the contractor will not be required to produce for inspection any records covering periods of time more than one year prior to the date of this contract.

c. The contractor agrees that if any of the obligations of this contract are to be performed by a subcontractor, then the provisions of a and b of this section will be incorporated into and become a part of the subcontract.

(FORM GB-103, revised 12/00)

SUPPLEMENTAL CONDITIONS:

BID# SC-0492-01

Submission of Bids:

Bids submitted in advance of the time set for opening should be delivered to the Procurement and Supply Division, 3rd Floor, St. James Building, New City Hall, 117 West Duval Street, Suite 335, Jacksonville, Florida 32202.

Bids must be submitted **PRIOR** to the set time for opening. Bidders are fully responsible for delivery of bids. Reliance upon mail or public carrier is at the bidder's risk.

LATE BIDS ARE NOT CONSIDERED.

Bid only on the bidding form(s) supplied herewith, using ink or typewriter. Any changes or alterations must be initialed by the person signing the bid.

Bidders' signature on the Bid Form (Form GB-102) signifies that the bidder has familiarized himself with all the Terms and Conditions of this bid, and agrees to them all, and that his bid is made and submitted for the items as specified and detailed herein unless exceptions are clearly noted and that the prices quoted herein are firm for the duration of this bid. Failure to submit a signed Bid Form with bid submission will be grounds for bid rejection. Violations of any of the Terms and Conditions of this bid and delivery time stated, can result in the Bidder's suspension from all bid lists of the City of Jacksonville and its agencies and penalties provided for by the Purchasing Code of the City of Jacksonville.

Bid/Surety Requirements:

All Bids which may require a bond or surety in the form of a certified check, cashier's check or bid bond in the amount as prescribed in the bid documents must accompany the bid submission prior to the scheduled bid opening. Failure to submit the above information timely will be grounds for rejection of bid.

Year 2000 Compliance and Warranty Requirements:

It is a requirement of this bid and the signature affixed hereto certifies that you have implemented and currently monitor Year 2000 and other date sensitive products and systems.

Please use the green label enclosed when submitting your bid, be sure to insert the bid number and the open date on the label. Failure to do so will result in your bid being returned unopened.

Bid Opening and Tabulation:

Due to the large number of bids to be opened, and the numerous items contained in some bids, such bids will not be tabulated at the bid opening. Bids may be reviewed by arrangement with the respective buyer. Bidders desiring a copy of the tabulation sheet and the award recommendation must include a self addressed, stamped envelope with their bid. If a copy of the tabulation sheet is desired prior to award, then two (2) self addressed, stamped envelopes must be included.

BID RESULTS AND AWARD RECOMMENDATIONS WILL NOT BE GIVEN BY TELEPHONE

Public Entity Crime Information:

"A person or affiliate who has been placed on the State Of Florida convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity for a period of 36 months from the date of being placed on the convicted vendor list."

FORM GB-104, (revised 11/00)

Disqualified Vendors

Revised 03-19-2001

In accordance with the City's Purchasing Code 126.202-K, the Chief Purchasing Officer and all agencies are advised to cease doing business with disqualified vendors. However, any existing contracts held by the above vendors should be completed.

Vendor	Vendor #	Date of Disqualification	Eligibility Reinstatement Date	Bld/Contract Number	Reinstatement Requirements
Able Lumber and Supply		07/18/97	07/18/98	AS217098	Written Request
Armored Car Services	593191058	02/10/00	02/10/01	SC-0255-00	Written Request
Carolina Paper Mill		10/20/80	10/20/81		Written Request
Concerned Citizens of Developing the Disable Inc. d/b/a A.I.C.R.		07/23/98	07/23/99	SC-0381-08	Written Request
Court Yard Concepts		05/07/97	05/07/98	XF-0509-97	Written Request
Creed Company	45357941	03/07/90	03/07/91	1304	Written Request
Elite Public Safety	593191058	03/25/00	03/25/01	SC-0644-98	Written Request
Fire Defense Centers	593035606	06/08/87	06/08/88		Written Request
George Patterson & Associates	59317759	06/05/98	06/05/99	CONTRACT # 7455	Written Request
G K Solutions	593541756	09/08/99	09/08/00	P-37-99 DA#10	Written Request
L. J. Carns		02/25/99	02/25/00		Written Request
Tiger Tale Publication		05/21/98	05/21/99		Written Request
Whittle & Sons		07/25/80	07/25/81		Permanent Written Request
* Vendors disqualified from bidding as Prime Contractors					
* Florida Sod	593446269	8/3/00	2/3/01		Written Request
* Cleft Landscapes Management	590036843	10/26/00	10/26/01		Written Request

P. 08

FAX NO. 9

JAN-04-2002 FRI 11:33 AM ZOLL MEDICAL

NO BID FORM

BID# SC-0492-01

UNABLE TO SUBMIT A BID? WE SINCERELY HOPE THIS IS NOT THE CASE.

If your firm cannot submit a bid at this time, please provide the information requested in the space provided below and return it to:

**City of Jacksonville
Procurement and Supply Division
117 West Duval Street, Suite 335
Jacksonville, Florida 32202**

We are unable to submit a bid at this time due to the following reasons:

Name of Firm _____

Signature and Title _____

Street Address or P.O. Box _____

City _____ **State** _____ **Zip Code** _____

PLEASE SUBMIT THIS FORM ONLY; DO NOT SEND BACK THE BID PACKAGE

FORM GB-107, Revised 6/1998

TERMS AND CONDITIONS

1. SCOPE:

The purpose of this bid invitation is to establish a firm price and source of supply for providing Cardiac Monitor / Defibrillators as listed on the Bid Form for the Jacksonville Fire & Rescue, City of Jacksonville.

2. AWARD:

Award to be ALL OR NONE or BY ITEM. Price will remain firm for one year from date of award with a two (2) one (1) year renewal options to be exercised at the City of Jacksonville discretion.

3. DELIVERY:

F.O.B. delivered to Jacksonville Fire & Rescue, Logistical Support, 515 Julia Street, Jacksonville, Florida, 32202, state delivery terms on bid form, stated in number of days ARO of purchase order. Delivery time stated will be binding on bidder. Failure of comply with delivery requirements may result in rejection of bid.

4. CORRECTIONS MADE BY BIDDER:

Bidders are cautioned not to obliterate, erase or strike over any printed material as set forth in this bid invitation. In quoting prices, whether unit prices or total price, wherever bidders have made an error, and has corrected it, any and all such corrections should be initialed by person signing the bid cover sheet. Failure to comply with this provision may result in rejection of bid.

5. GENERAL CONDITIONS:

Signature on bid form verifies that the bidder is acquainted with the general conditions contained herein and will comply with all specifications, terms and conditions contained in this bid invitation.

6. COMPLIANCE WITH SPECIFICATIONS:

Bid only in items that meet specifications. Bid only a single offering for each bid item. Do not bid multiple offerings or "alternates". Bid only on forms supplied, using ink or typewriter, all corrections must be initialed. Bid only new, unused material.

7. VENDOR ACCESSIBILITY:

Vendors must be capable of being contacted by telephone during normal business hours (8:00am. - 5:00pm) at the telephone number furnished on the fact page of this bid package. Any vendor who cannot be contacted by telephone will be considered non-responsive and will be subject to removal from bid list.

8. STATE CONTRACTS:

The City is entitled to purchase from contracts established by the State of Florida. Should the State establish a contract for item or items on this bid, the City reserves the right to cancel this contract in whole or in part and purchase those item (s) from the State contract, if in its best interest.

9. QUANTITIES:

Quantities indicated reflect the approximate quantities to be purchased throughout the contract period and are subject to fluctuation in accordance with actual requirements.

10. PICK UP AND RETURNS:

The City reserves the right to return an order, in whole or in part, if the merchandise delivered is not the quality indicated in the bid. The City will be sole judge as to acceptable quality. Pick up and returns will be made within 48 hours from notice to bidder by using agency. The vendor will coordinate all returns of its merchandise returns without a charge to the City, subject upon agreed limitations.

11. PRICES:

Submit bids for items with delivery and freight charges included in unit price.

12. INVOICING:

Invoices will be issued once supplies are shipped and delivered to our using agencies. At a minimum, invoices must include: Purchase Order number, Item Number and Description, date of shipment, quantity ordered, unit price, unit of measure, and a total for all purchases. The vendor will work with the Purchasing and Accounts Payable Department to determine mutually agreeable alternatives to invoicing such as: summary Billing Reports or Electronic Data Interchange (EDI). Standard payment terms are net 30 days.

13. PACKING REQUIREMENTS:

A packing list must always accompany each delivery of products, which shall indicate at a minimum the following: Purchase Order number, Description and Item Number, Quantity of Units, using Agency, contact Name and Phone Number. Each carton shall be labeled to show quantity (Number of Cartons), Purchase Order Number, Item Number and Product Description.

14. WARRANTY:

Warranty shall be per specifications for three (3) years with full factory warranty to include biomedical checks and preventive maintenance including all parts and labor. Attached warranty information sheet must be completed and returned at time of bid opening.

CARDIAC MONITOR/DEFIBRILLATORS SPECIFICATIONS

GENERAL REQUIREMENTS

- 1) All quoted prices to be good for one calendar year after acceptance, with two (2) one (1) year renewal options not to exceed a 3% pricing increase each subsequent year.
- 2) Manufacturer will update all devices with any update of Hardware or Software for the first twelve (12) months after delivery at N/C.
- 3) If a definitive waveform or energy level is established and purchased devices do not meet; purchased devices will be brought into compliance at N/C during initial three (3) year period.
- 4) At Jacksonville Fire & Rescue Department option, if manufacturer develops a new device or new technology that necessitates a change in the physical device, Jacksonville Fire & Rescue Department will receive 100% of purchase price as credit toward the new devices during the initial three (3) year period.
- 5) Manufacturer shall explain in detail if exception is taken to any specification section.

WARRANTY APPLICABLE TO ALL DEVICES

- Three-year full factory warranty with biomedical checks and preventive maintenance.
- Parts and labor against defects in workmanship, materials and construction.
- Initial functional check of all system level functions.
- Preventive Maintenance performed once per year to include as a minimum:
 1. Analysis of electrical leakage currents checked against factory specifications.
 2. Diagnostic checks performed by devices internal CPU.
 3. Testing of power supply, ECG, Pace Outputs and Rates, Defib Times & Output energy against factory specifications.
 4. Testing of system level functions against factory specifications.
 5. Testing of Real Time Clock of the system.
- If on-site service is unavailable and/or unit needs to be removed from service to complete repairs, an appropriate loaner unit will be provided at a minimum, for overnight delivery, until the removed unit is returned.
- Cost of freight to and from Manufacturer for either service loaner or customers equipment to be borne by Manufacturer.
- Manufacturer will provide each year up to two (2) batteries per device based on customer providing evidence that the battery fails to meet the battery performance test and/or battery age exceeds two (2) years.

TRAINING REQUIREMENTS APPLICABLE TO ALL DEVICES

- Manufacturer shall provide on-site training on features and capability (preferably a Windows based software program), full installation and on going support.

TRADE IN ALLOWANCES

- Should be reflective of fair market value for particular model.
- Trade-in devices are as is basis.
- Will be offered for trade in value and shipped to Manufacturer no later than three (3) months after receipt of new devices.
- Manufacturer shall be responsible for all costs associated with shipping of trade-in devices.

ATTACHMENT #4

BID FORM

DATE: 5/2/01

City of Jacksonville
Procurement and Supply Division

REQUEST TO BID NO. SC-0492-01

THIS FORM MUST BE SIGNED AND INCLUDED IN BID SUBMISSION

ZOLL Medical Corporation
32 Second Avenue
Burlington, MA 01803-4420

SUBMIT BID IN DUPLICATE

THIS BID WILL BE OPENED ON Wednesday, May 30, 2001
2:00 P.M. IN THE THIRD FLOOR CONFERENCE ROOM C, CITY HALL.
RESPONSE(S) TO BID MUST BE IN INK OR TYPEWRITTEN.

BUYER: JERRIE GUNDER PHONE: (904) 630-4856

FID/SSN# _____

BID SECURITY REQUIREMENTS

- None Required
- Certified Check or Bond
Amount: _____

TERM OF CONTRACT

- One time purchase
- Annual requirement - Prices will remain firm for one year from date of award
- Other ONE (1) YEAR FROM DATE OF AWARD WITH TWO (2) ONE (1) YEAR RENEWAL OPTIONS

SAMPLE REQUIREMENTS

- None Required
- Samples Required PRIOR to Bid Opening
- Literature Required With Bid
- Samples May be Required Subsequent to Bid Opening

PERFORMANCE BOND

- None Required
- Bond Required \$ _____ % of bid award

QUANTITIES:

- Quantities indicated are exacting
- Quantities indicated reflect the approximate quantities to be purchased throughout contract period and are subject to fluctuation in accordance with actual requirements.

FOR TECHNICAL INQUIRIES, CONTACT:

THOMAS MCCRONE, DIVISION CHIEF
Telephone: (904) 798-1148

AGENCY: FIRE/RESCUE

PROVIDE AND DELIVER CARDIAC MONITOR/DEFIBRILLATORS PER SPECIFICATIONS, TERMS, AND CONDITIONS.

Price shall include all packaging, installation and delivery charges to F.O.B. destinations as indicated on this form. The Manufacturer must provide any updates to Hardware or Software for the first twelve (12) months after delivery at no charge. The City of Jacksonville reserves the right to make use of this contract for other agencies and locations as requirements are identified.

Supply contract to be effective ONE (1) YEAR FROM DATE OF AWARD WITH TWO (2) ONE (1) YEAR RENEWAL OPTION. Prices shall remain firm and not to exceed a 3% pricing increase each subsequent year for the duration of this contract. Quantities indicated on the proposal form are estimated quantities only. The City of Jacksonville, Florida shall not be held accountable for quantities listed, as purchases are made in accordance with actual requirements. All awards made are contingent upon availability of funds.

Basis of award: ALL OR NONE, or BY ITEM, whichever may be most advantageous to the City of Jacksonville, Florida, to the lowest responsive bidder. The City of Jacksonville, Florida reserves the right to make awards to more than one responsive bidder for the same item.

TERMS OF PAYMENT: NET OR % DISCOUNT DAYS
(DISCOUNTS OFFERED FOR PAYMENT PERIODS OF LESS THAN 30 DAYS WILL NOT BE CONSIDERED IN MAKING AWARD)

Bidder's Certification Material is F.O.B. Burlington, ZOLL pays freight and insurance.
DELIVERED: JFID, LOGISTICAL SUPPORT, 515 JULIA ST., JACKSONVILLE, FL. 32202

Delivery will be made in 90-120 business days from receipt of purchase order.

I have received addenda

Dustin Donahoe
Handwritten Signature of Authorized Officer of Firm

5-23-01
Date

through _____

Dustin Donahoe, Sr. Ems Terr. mgr. (800) 242-9150 x 262 (781) 272-5549
Print Individual's Name Title Phone Number Fax Number

CARDIAC MONITOR/DEFIBRILLATORS PRICING

ITEM	DEVICE	QTY	UDI	UNIT PRICE	EXTENDED PRICE
# 1	DEFIBRILLATOR/PACER/MONITOR/12-LEAD. Medtronic-Physio Control LifePac 12 Series or Zoll Medical Corporation M-Series. (No Substitution)	30	EA	\$ 13,000.00	\$ 390,000.00

Description:

- Bi-phasic defibrillator with pacing and cardioverter which is pad/paddle based and allows for standard limb lead ECG monitoring and complete 12 lead ECG with interpretation using Marquette 12SL or later algorithm.
- Device shall allow the operator to configure the operating parameters of the device.
- Code summary and alarm printout modes should be configurable by the user.
- Device shall record significant events in resuscitation, such as shocks, time, analysis, and be capable of code markers for medications.
- Data recording and export via data card, data cable or modem.
- Device shall use Multi-function pads that are capable of ECG monitoring, pacing, defibrillation, synchronized cardioversion and AED operation.
- Device must contain a built-in defibrillator tester that test energy output and documents this on the strip chart recorder.
- Strip chart recorder should utilize a standard or configurable delay.
- Strip Chart recorder must be able to print 3 leads simultaneously.
- Device shall record a delayed code summary for on-scene personnel.
- Device must be upgradeable to SpO₂, EtCO₂ and NIBP/Temperature and Data Management option.
- Device must utilize a high-resolution flat panel EL (Electroluminescent) display.
- Device must use rechargeable NiCd or sealed lead acid batteries.
- Device shall have a low-battery indicator.
- Device shall come with three (3) complete sets of batteries.
- Device will be capable of operating using DC power that recharges the battery(s) and powers the device continuously.
- Device shall be capable of data transmission of 12-lead ECG via fax/modem.
- Device shall include all necessary additional equipment, such as 3-lead and 12-lead cables, defib/pacing cables, defib paddles (adult & pediatric), protective carrying case with straps and compartments to contain cables, paddles and supplies and enough battery power for full capability use.

CARDIAC MONITOR/DEFIBRILLATORS PRICING

(CONTINUED)

ITEM	DEVICE	QTY	UOI	UNIT PRICE	EXTENDED PRICE
# 2	AED/DEFIBRILLATOR/PACER/MONITOR Medtronic-Physio Control LifePak 12 Series or Zoll Medical Corporation M-Series (No Substitution)	50	EA	\$ 8,250.00	\$ 412,500.00

Description

- Bi-phasic defibrillator with pacing and cardioverter, which is pad based and allows for standard limb lead ECG monitoring. Unit will be capable of functioning in an advisory or automated mode for rapid defibrillation that meets or exceeds standards for automated defibrillation (AED). Unit will be programmable to power-up in "manual" or "automated mode with manual override."
- SAED function shall have voice instruction and/or visual message advisory prompts.
- Device shall allow the operator to configure the operating parameters of the device.
- Code summary and alarm printout modes should be configurable by the user.
- Device shall record significant events in resuscitation, such as shocks, time, analysis, and be capable of code markers for medications.
- Data recording and export via data card, data cable or modem.
- Device shall use Multi-function pads that are capable of ECG monitoring, pacing, defibrillation, synchronized cardioversion and AED operation.
- Device must contain a built-in defibrillator tester that test energy output and documents this on the strip chart recorder.
- Strip chart recorder should utilize a standard or configurable delay.
- Device shall record a delayed code summary for on-scene personnel.
- Device must be upgradeable to SpO₂, EtCO₂ and NIBP/Temperature and Data Management option.
- Device must utilize a high-resolution flat panel EL (Electroluminescent) display.
- Device must use rechargeable NiCd or sealed lead acid batteries.
- Device shall have a low-battery indicator.
- Device shall come with three (3) complete sets of batteries.
- Device shall include all necessary additional equipment, such as 3-lead cables, defib/pacing cables, protective carrying case with straps and compartments to contain cables and supplies and enough battery power for full capability use.

CARDIAC MONITOR/DEFIBRILLATORS PRICING
(CONTINUED)

ITEM	DEVICE		QTY	UOI	UNIT PRICE	EXTENDED PRICE
# 3	AUTOMATED DEFIBRILLATION (AED) Medtronic-Physio Control LifePak 500 AED or Zoll Medical Corporation M-Series AED (No Substitution)	AED	55	EA	\$ 3,000.00	\$ 165,000.00
<p>Description</p> <ul style="list-style-type: none"> • Bi-phasic defibrillator capable of functioning in an advisory or automated mode for rapid defibrillation that meets or exceeds standards for automated defibrillation (AED). Unit will be programmable to power-up in "manual" or "automated mode with manual override". • SAED function shall have voice instruction and/or visual message advisory prompts. • Device shall use Multi-function pads that are capable of ECG monitoring, pacing, defibrillation, synchronized cardioversion and AED operation. • Device must be upgradeable to Data Management option. • Data recording and export via data card, data cable or modem. • Device must use either rechargeable NiCd, sealed lead acid or lithium batteries. • Device shall come with three (3) complete sets of batteries. (Non-applicable for lithium batteries). • Device shall include all necessary additional equipment, such as defib cables, protective carrying case with straps and compartments to contain cables and supplies and enough battery power for full capability use. 						
# 4	BATTERY SUPPORT SYSTEM (No Substitution)	Sufficient quantities to maintain purchase device		53 EA	\$ 1,000.00	\$ 53,000.00
<p>Description</p> <ul style="list-style-type: none"> • Battery Support system shall test, charge, recondition, and alert the user of a failed capacity test. (Non-applicable for lithium batteries). 						

UPGRADEABLE OPTIONS/PRICING

ITEM	DEVICE DESCRIPTION	QTY	UOM	UNIT PRICE	EXTENDED PRICE
# 5	PULSE OXIMETRY (SpO₂) (No Substitution) <ul style="list-style-type: none"> Device shall include all necessary additional equipment, Cables and sensors (Adult, Pediatric & Neonate). 	1	EA	\$ 2,600.00	\$ 2,600.00
# 6	END-TIDAL CARBON DIOXIDE (EtCO₂) (No Substitution) <ul style="list-style-type: none"> Device shall include all necessary additional equipment, Cables and sensors (Adult, Pediatric & Neonate). 	1	EA	\$ 4,800.00	\$ 4,800.00
# 7	NONINVASIVE BLOOD PRESSURE (NIBP) - (No Substitution) <ul style="list-style-type: none"> Device shall include all necessary additional equipment, Cables and full range of cuff sizes (adult, large adult, adult thigh, pediatric & infant). 	1	EA	\$ 4,000.00	\$ 4,000.00
# 8	DATA TRANSMISSION OF 12-LEAD ECG VIA FAX/MODEM. (No Substitution) <ul style="list-style-type: none"> List required Communications Accessories necessary excluding Cellular telephone 	1	EA	Included on units with \$ 12 Lead option	\$ _____
# 9	EXTENDED WARRANTY <ul style="list-style-type: none"> Same specifications noted in WARRANTY APPLICABLE TO ALL DEVICES section 	1	EA	\$ 850.00	\$ 850.00
# 10	DATA MANAGEMENT SYSTEM (No Substitution) <ul style="list-style-type: none"> Windows based system for reviewing, storing and generating reports of post-event data in order to track events and improve quality control. Data shall be retrievable via data card or download via modem. Data shall include at a minimum: time, date, serial number or unit, itemized audit of an emergency cardiac arrest or advanced life support call (including defibrillation, power output, number of shocks, code markers for cardiac medications, and animated ECG). Manufacturer shall be provided training and support with the Data Management System. 	1	EA	\$ 1,996.00	\$ 1,996.00

REPLACEMENT SUPPLIES PRICING

ITEM	ITEM DESCRIPTION	QTY	UOI	UNIT PRICE	EXTENDED PRICE
# 11	RECORDER PAPER	1	EA	\$ 2.75	\$ 2.75
# 12	3-LEAD CABLES	1	EA	\$ 76.00	\$ 76.00
# 13	12-LEAD CABLES	1	EA	\$ 236.00	\$ 236.00
# 14	MULTI-FUNCTION PADS, ADULT	1	EA	\$ 25.00	\$ 25.00
# 15	MULTI-FUNCTION PADS, PEDIATRIC	1	EA	\$ 25.00	\$ 25.00
# 16	INTEGRATED SIX PRECORDIAL ELECTRODES FOR 12-LEAD ECG	1	EA	\$ 140.00	\$ 140.00
# 17	PADDLES, ADULT	1	EA	\$ 440.00	\$ 440.00
# 18	PADDLES, PEDIATRIC Included with Adult PADDLES	1	EA	\$ No Charge	\$ No Charge
# 19	SpO ₂ CABLE	1	EA	\$ 120.00	\$ 120.00
# 20	SpO ₂ SENSORS, ADULT	1	EA	\$ 200.00	\$ 200.00
# 21	SpO ₂ SENSORS, PEDIATRIC	1	EA	\$ N/A	\$ N/A
# 22	SpO ₂ SENSORS, NEONATES	1	EA	\$ N/A	\$ N/A
# 23	SpO ₂ DISPOSABLE SENSORS, ADULT	1	EA	\$ 12.00	\$ 12.00
# 24	SpO ₂ DISPOSABLE SENSORS, PEDIATRIC	1	EA	\$ 12.00	\$ 12.00
# 25	SpO ₂ DISPOSABLE SENSORS, INFANT	1	EA	\$ 12.00	\$ 12.00
# 26	EtCO ₂ CABLE	1	EA	\$ 1,036.00	\$ 1,036.00
# 27	EtCO ₂ SENSOR, ADULT INCLUDED WITH CABLE	1	EA	\$ No Charge	\$ No Charge

REPLACEMENT SUPPLIES PRICING - (CONTINUED)

ITEM	ITEM DESCRIPTION	QTY	UOI	UNIT PRICE	EXTENDED PRICE
# 28	EiCO ₂ DISPOSABLE SENSORS, ADULT ADAPTER TO FIT SENSOR	1	EA	\$ 7.50	\$ 7.50
# 29	EiCO ₂ SENSOR, PEDIATRIC INCLUDED WITH CABLE	1	EA	\$ No Charge	\$ No Charge
# 30	EiCO ₂ DISPOSABLE SENSORS, PEDIATRIC	1	EA	\$ 7.50	\$ 7.50
# 31	EiCO ₂ SENSOR, NEONATE INCLUDED WITH CABLE	1	EA	\$ No Charge	\$ No Charge
# 32	EiCO ₂ DISPOSABLE SENSORS, NEONATE	1	EA	\$ 7.50	\$ 7.50
# 33	NIBP CABLE	1	EA	\$ 40.00	\$ 40.00
# 34	NIBP CUFFS, ADULT	1	EA	\$ 28.00	\$ 28.00
# 35	NIBP CUFFS, LARGE ADULT	1	EA	\$ 32.00	\$ 32.00
# 36	NIBP CUFFS, ADULT THIGH	1	EA	\$ N/A	\$ N/A
# 37	NIBP CUFFS, PEDIATRIC	1	EA	\$ 24.00	\$ 24.00
# 38	NIBP CUFFS, NEONATE	1	EA	\$ N/A	\$ N/A
# 39	NiCd BATTERIES	1	EA	\$ N/A	\$ N/A
# 40	SEALED LEAD ACID BATTERIES PROVIDED IN PROPOSAL	1	EA	\$ No Charge	\$ No Charge
# 41	LITHIUM BATTERIES	1	EA	\$ N/A	\$ N/A
# 42	DEFIBRILLATOR/PACER/MONITOR/12-LEAD CARRYING CASE PROVIDED IN PROPOSAL	1	EA	\$ 250.00	\$ 250.00
# 43	AED/DEFIBRILLATOR/PACER/MONITOR CARRYING CASE PROVIDED IN PROPOSAL	1	EA	\$ 170.00	\$ 170.00
# 44	AED CARRYING CASE PROVIDED IN PROPOSAL	1	EA	\$ 170.00	\$ 170.00

TRADE-IN ALLOWANCE

ITEM	DEVICE DESCRIPTION	QTY	UOI	UNIT PRICE	EXTENDED PRICE
# 45	LIFEPAK 11	26	EA	\$ 5,000.00	\$ 130,000.00
# 46	LIFEPAK 10	27	EA	\$ 5,000.00	\$ 135,000.00
# 47	FIRST MEDIC 510 AED	55	EA	\$ 500.00	\$ 27,500.00
# 48	BATTERY SUPPORT SYSTEM	53	EA	\$ 300.00	\$ 15,900.00

CONFLICT OF INTEREST CERTIFICATE

SECTION 00320

BID# SC-0492-01

Bidder must execute either Section I or Section II hereunder relative to Florida Statute 112.313(12). Failure to execute either section may result in rejection of this bid proposal.

SECTION I

I hereby certify that no official or employee of the City or its independent agencies requiring the goods or services described in these specifications has a material financial interest in this company.

Dustin Donahoe
Signature

Dustin Donahoe
Name of Official (type or print)

Zoll Medical Corp.
Company Name

32 Second Avenue
Business Address

Burlington, MA 01803
City, State, Zip Code

SECTION II

I hereby certify that the following named City official(s) and/or employee(s) having material financial interest(s) (in excess of 5%) in this company have filed Conflict of Interest Statements with the Supervisor of Elections, 105 East Monroe Street, Jacksonville, Duval County Florida, prior to bid opening.

Name	Title or Position	Date of Filing

Signature

Name of Official (type or print)

Company Name

Business Address

City, State, Zip Code

PUBLIC OFFICIAL DISCLOSURE

Section 126.112 of the purchasing Code requires that a public official who has a financial interest in a bid or contract make a disclosure at the time that the bid or contract is submitted or at the time that the public official acquires a financial interest in the bid or contract. Please provide disclosure, if applicable, with bid.

Public Official _____

Position Held _____

Position or Relationship with Bidder _____

FORM GB-10 (revised 6/1998)

WARRANTY INFORMATION FORM

BID# SC-0492-01

Item Number ALL DEVICES

Equipment Specified THREE-YEAR FULL FACTORY WARRANTY PER SPECIFICATIONS

***** ALL BLANKS MUST BE FILLED AND SUBMITTED WITH BID *****

MAKE AND MODEL OF EQUIPMENT PROPOSED: Zoll M Series

Is there a warranty on the equipment proposed? Yes No

Does warranty apply to ALL components or only part? (State explicitly) _____

Please see reverse of Zoll's quotation and additional warranty printouts.

*Parts warranty period Pls see quote Service warranty period Pls see quote

Nearest source for parts and/or service: Please return unit directly to Zoll Medical. Separate sheet attached detailing repair procedures.
Name and address of authorized service center(s): _____

Please return unit directly to Zoll Medical Corp.

(please include name, address, city, state, zip, and phone number)

Name and address of the authority issuing this warranty: (manufacturer, distributor, etc.) _____

zoll medical Corp. 32 Second Avenue, Burlington, MA 01803 (800) 242-9150
(please include name, address, city, state, zip, and phone number)

COPY OF COMPLETE WARRANTY STATEMENT IS SUBMITTED HEREWITH: YES NO

NAME OF BIDDER: Zoll Medical Corp.

SIGNATURE Quentin Donahoe DATE 5-25-01

TITLE South Ems Territory Mngr. PHONE NUMBER (800) 242-9150 X 262

* Warranty period must meet or exceed the warranty conditions as stated in the specifications on the bid.

CITY OF JACKSONVILLE

BID NO. SC-0492-01

MAY 30, 2001 @ 2:00 P.M.

WARRANTY INFORMATION FORM

Nearest source for parts and/or service.

Zoll Medical Corporation requests that the customer return the failed unit directly to the factory. Below is a detailed outline of the procedure that Zoll follows to repair the unit and in the meantime make sure the customer remains operational.

1. Customer reports a failure or problem with a unit. The customer provides the serial number and details the problem.
2. ZOLL's 24 hour Loaner Policy. If a loaner is required, it is immediately mailed out for next day A.M. delivery.
3. A prepaid mailing label will be included with the loaner for sending the unit to the factory for repair. A special note worth mentioning is that on site field service may allow for quicker turnaround times, but there is the risk of missing certain problems. Many times a unit that is not performing well during an emergency situation will function perfectly fine when later tested by a field technician. Unfortunately, this unit would then be left behind without further testing of the device.
4. When the unit is returned to Zoll's factory, and there is "no fault found", the testing begins which includes: hot soak, cold soak, vibration, etc. The problems that were unable to be detected in the field may begin to present themselves. This fine attention to detail keeps medical equipment performing at its highest efficiency.
5. If the unit is an "out of box failure" it is not fixed. A new unit is sent to the customer and, if necessary, a loaner is immediately shipped for next day A.M. delivery until the new unit is received.

Name and Address of authorized service center(s):

Please call Zoll Medical Corporation's Technical Support Dept. directly. (Toll Free: (800) 242-9150, ext. 460; Direct: (781) 265-9460).

CITY OF JACKSONVILLE

BID NO. SC-0492-01

MAY 30, 2001 @ 2:00 P.M.

Zoll Medical Corporation has included the following items which will add value to our proposal and control costs for Jacksonville Fire throughout the life of the monitors:

1. A *lifetime warranty* on the shell of each defibrillator. This will eliminate any costly repairs to the exterior shell of any unit. By utilizing the Xtreme Pack II carry cases, the Zoll M Series can withstand the harsh environment that Jacksonville Fire operates in.
2. Zoll Medical is offering to *replace up to 500 batteries during the life of the units*. At a list price of \$130.00 per battery, this equates to additional savings of \$65,000.00.
3. ZOLL Medical has included a *test cap to field test the units*. This allows Jacksonville Fire to check each unit to the end of the cable without any additional equipment or cost.
4. *Pediatric paddles are built in* to the M Series paddle assembly. No additional equipment is needed to utilize the device on children.
5. ZOLL Medical is offering *built-in DC power, 3-lead ECG monitoring, and a screen on all 135 units*.
6. In the event that the *units are purchased by June 22, 2001*, ZOLL Medical will provide Jacksonville Fire with an additional year of warranty, bringing the total to *six (6) years of warranty on all units*. This will eliminate the need for Jacksonville Fire to purchase additional warranties, and eliminate any unknown costs as the units age.
7. While preventive maintenance is included for the first three years of the life of the units, ZOLL Medical will *offer additional preventive maintenance* for years 4 and 5 at a fixed cost of \$150.00 per unit for one preventive maintenance per year.
8. In the event that a unit needs to be returned to ZOLL Medical for maintenance or examination, *ZOLL Medical will pay the freight* both to and from Jacksonville Fire.
9. At no cost to Jacksonville Fire, ZOLL Medical is also offering *one Factory Refurbished unit of each of the three different configurations* of M Series defibrillators. This will be owned by Jacksonville Fire and can be used as backups as needed.

EMS

ZOLL FACTORY WARRANTY

ZOLL Medical Corporation warrants to the Customer that from the date of installation, or thirty (30) days after the date of shipment from ZOLL Medical Corporation's facility, whichever first occurs, the Equipment (other than accessories and electrodes) will be free from defects in material and workmanship under normal use and service for the period for 1 Year.

During such period ZOLL Medical Corporation will, at no charge to the Customer, either repair or replace (at ZOLL Medical Corporation's sole option) any part of the Equipment found by ZOLL Medical Corporation to be defective in material or workmanship. If ZOLL Medical Corporation's inspection detects no defects in material or workmanship; ZOLL Medical Corporation's regular service charges shall apply.

The Factory Warranty covers the Equipment (Defibrillators and Battery Chargers) for 1 Year from the date of shipment from ZOLL Medical Corporation's facility for the following: all parts and labor, all shipping and insurance costs, and a Service Loaner at no charge for use during the repair.

Accessories (cables, paddles, SpO2 sensors, single battery chargers and electrodes) shall be warranted for 90 days from date of shipment. During such period ZOLL Medical Corporation will, at no charge to the Customer, either repair or replace (at ZOLL Medical Corporation's sole option) any part of the accessories found by ZOLL Medical Corporation to be defective in material or workmanship. If ZOLL Medical Corporation's inspection detects no defects in material or workmanship; ZOLL Medical Corporation's regular service charges shall apply.

ZOLL Medical Corporation shall not be responsible for any Equipment defect, the failure of the Equipment to perform any specified function, or any other nonconformance of the Equipment, caused by or attributable to: (i) any modification of the Equipment by the Customer, unless such modification is made with the prior written approval of ZOLL Medical Corporation; (ii) the use of the Equipment with any associated or complementary equipment, accessory or software not supplied by ZOLL Medical Corporation; (iii) any misuse or abuse of the Equipment; (iv) exposure of the Equipment to conditions beyond the environmental, power or operating constraints specified by ZOLL Medical Corporation; or (v) installation or wiring of the Equipment other than in accordance with ZOLL Medical Corporation's instructions. (c) This warranty does not cover items subject to normal wear and burnout during use, including but not limited to lamps, fuses, batteries, patient cables and accessories. (d) The foregoing warranty does not apply to software included as part of the Equipment (including software embodied in read-only memory, known as "firmware"). (e) The foregoing warranty constitutes the exclusive remedy of the customer and the exclusive liability of ZOLL Medical Corporation for any breach of any warranty related to the Equipment supplied hereunder. THE WARRANTY SET FORTH HEREIN IS EXCLUSIVE AND ZOLL MEDICAL CORPORATION EXPRESSLY DISCLAIMS ALL OTHER WARRANTIES WHETHER WRITTEN, ORAL, IMPLIED, OR STATUTORY, INCLUDING BUT NOT LIMITED TO ANY WARRANTIES OF MERCHANTABILITY OF FITNESS FOR A PARTICULAR PURPOSE.

EXTENDED WARRANTY AND SERVICE PROGRAMS FOR ZOLL DEFIBRILLATORS AND BATTERY SUPPORT SYSTEMS

ZOLL Medical Corporation offers a variety of Service Programs to help plan budgets and ongoing maintenance of your ZOLL products. This document describes the Extended Warranty programs that are offered for these products.

An Extended Warranty can be purchased at anytime. These programs are designed to help control your maintenance costs by fixing the cost and protecting you against any price increases while the product is under an Extended Warranty.

Extended Warranty Coverage

The One Year through Four Year programs carries the same warranty coverage as the original factory Warranty:

- Parts and Labor
- Free Service Loaner provided via priority overnight for the duration of the repair
- All shipping and insurance paid by ZOLL Medical Corporation
- Re-certification of the product after repair
- Toll free 800 number for Technical/Clinical phone support

Annually Renewable Extended Warranty Program

The pre-paid Extended Warranty covers the product for an additional year beyond the new product factory warranty. This program is available at anytime even if the Factory Warranty has expired.

Multiple Year Extended Warranty Programs

The Multiple Year Extended Warranty Programs cover the product for two through four years beyond the Factory Warranty. This option is available at anytime with an 11% discount for two years, a 13% discount for three years and a 15% discount for four years compared to the annually renewable extended warranty. Most companies raise the contract price with longer contracts; ZOLL locks in the price and provides an additional discount for Multiple Year contracts.

Preventive Maintenance Programs

Preventive Maintenance programs can be purchased to maintain the superior performance of your ZOLL equipment. In most areas, ZOLL has authorized Biomedical representatives, who have been factory trained, to provide Preventive Maintenance on site at the Customer's location. These representatives are dispatched by the ZOLL Technical Support Contracts Department based on contract requirements.

In the event that a ZOLL authorized Biomedical representative is not available in your area, arrangements will be made to send the devices to ZOLL Burlington Service Depot for service. A service loaner or loaners will be shipped to the Customer's location for use during the time the units are in the ZOLL Service Depot.

ZOLL recommends that Preventive Maintenance be performed twice per year or every 6 months.

Multiple Unit Discounts

Multiple Unit Discounts are available with any of the Multiple Year Extended Warranty Programs or the Annually Renewable Extended Warranty Program. The Multiple Unit Discounts also apply to the Preventative Maintenance Program when purchased with an Extended Warranty Program.

Extended Warranty Exclusions

The Extended Warranty does not cover Equipment defect, failure of the Equipment to perform any specified function, or any other nonconformance of the Equipment, caused by or attributed to:

- Any modification of Equipment by the Customer, unless such modification is made with the prior written approval of ZOLL Medical Corporation.
- The use of Equipment with any associated or complementary Equipment, accessory or software not supplied by ZOLL Medical Corporation.
- Any misuse or abuse of the Equipment.
- Exposure of the Equipment to conditions beyond the environmental, power or operating constraints specified by ZOLL Medical Corporation.
- Installation or wiring of the Equipment other than in accordance with ZOLL Medical Corporation's instructions.

The Extended Warranty does not cover items subject to normal wear and burnout during use, including but not limited to lamps, fuses, batteries, cables and accessories.

Extended Warranty Cancellation

The request to cancel an Extended Warranty must be sent in writing to the Technical Support Contracts Department. The Extended Warranty Contract will be terminated 60 Days after receipt of request to cancel.

Request for Extended Warranty Quotations

All requests for quotations should be directed to the Technical Support Contracts Department at (800) 348-9011 extensions 170, 362 or 62.

PREVENTIVE MAINTENANCE

Performance of Preventive Maintenance Includes:

- * Initial functional check of all system level functions.
- * Analysis of electrical leakage currents checked against factory spec.
- * Diagnostic checks performed by devices internal CPU.
- * Testing of Power Supply, ECG, Printer Outputs & Rates, Defib Times & Output Energy.
- * Testing of MFE functions.
- * Testing of Real Time Clock of the system.

Preventive Maintenance also includes:

- * The use of a Service Loaner during the PM
- * The cost of the freight for the Service Loaner to the Customer and back to ZOLL.
- * The freight of the Customer's Equipment to and from ZOLL.

Preventive Maintenance is recommended every 6 months.

Preventive Maintenance can be purchased for \$150.00 per PM

TECHNICAL SERVICE COVERAGE

Hours of Coverage

Technical telephone assistance is provided via our Help Desk using our 800 number from 8:30AM to 6:00PM EST.

After a telephone consultation with Technical Service if it is determined that the product needs to be repaired, a Claim is opened to track the return of the product. We will ask for pertinent information to allow us to do a full evaluation when the product is received at our Depot.

Repairs

Repair service is provided via Depot Repair at the ZOLL Headquarters in Burlington, MA.

Service is performed by factory trained technicians and each unit is certified by successfully completing the 6 Month Checkout Procedure as detailed in the appropriate Service Manual, applying a Calibration sticker and returning the product with a Repair Form indicating the work performed. As an ISO9000 certified facility, we retain training records on each employee and are committed to providing the highest level of quality to the servicing of all ZOLL products.

Hourly Labor Rates (Note: This rate may change every October 1st) Our current Depot Repair Rate is \$99 per hour.

Overtime Hours and Rates

We do not charge for overtime on Depot repaired items. We do not offer on-site service.

Service Loaners

A free Service Loaner is available during the repair analysis process and is shipped to arrive before 10AM the next business day. ZOLL pays for the shipping and insurance of the customer unit and the Service Loaner.

Consignment Equipment

Service Loaners can be made available and stored locally for immediate access.

Emergency Support

Emergency telephone assistance is available 24 hours a day, 7 days a week via our 800 number.

Service Reports

Annual and as needed reports are available with 30 days notice. Reports are stratified by Customer number and model number. The report also includes the same information sorted by Date.

Biomedical/Service Training

ZOLL Technical Support offers a two day training and certification program which will enable the attendees to repair and calibrate the defibrillator.

Replacement Parts

All replacement and repair exchange parts are typically available for shipment on the next business day following the request.

Repair Exchange (R/X) Program

We offer a Repair Exchange program that offers repair exchange listed parts at 50% of List when the returned module can be repaired. We invoice at full list at order time. You return the defective module for repair. If the module is repairable, you receive a 50% of List credit.

Guaranteed Service Turnaround Time

As an ISO 9000 certified facility we are constantly trying to improve our turnaround time while maintaining a high quality of repair. You can expect to see a less than 10 business day turnaround on repairs. A free Service Loaner is available while a product is in for repair.

Guaranteed Response Time for On-site Service

We perform repairs at our Repair Depot. We do not offer on-site service.

Guaranteed Equipment Uptime

You can expect 99% uptime based on typical use and the arrival of a Free Service Loaner by 10AM the next business day.

Description of Phone Support Services and Restrictions

Technical telephone assistance is provided via our Help Desk using our 800 number from 8:30AM to 6:00PM EST. After a telephone consultation with Technical Service if it is determined that the product needs to be repaired, a Claim is opened to track the return of the product. We will ask for pertinent information to allow us to do a full evaluation when the product is received at our Depot. There are no restrictions for this service except hours of operation. Emergency telephone assistance is available 24 hours a day, 7 days a week via our 800 number.

Problem Escalation

We have no formal escalation policy with time frames as we do not offer on-site service. Problems are reported to Technical Service Management by the Phone Support Help Desk. The problem is then brought to the attention of the Sales Territory Manager.

Performance Capability of the Repair Depot

Service is performed by factory trained technicians and each unit is certified by successfully completing the 6 Month Checkout Procedure as detailed in the appropriate Service Manual, applying a Calibration sticker and returning the product with a Repair Form indicating the work performed. As an ISO9000 certified facility, we retain training records on each employee and are committed to providing the highest level of quality to the servicing of all ZOLL products.

We currently have a staff of six Telephone Support agents and twenty Technicians in the Repair Depot plus Logistics, Shipping/Receiving, Contracts Administration and Service Management. There are over 200 years of technical support experience. We handle over 25,000 calls per year.

MTBF

We do not track MTBF for system components. We use QA trend analysis to track the product.

On-Site PM Service

ZOLL has authorized representatives, who have been factory trained, to provide Preventative Maintenance at the Customer's location. These representatives are dispatched by the ZOLL Technical Service Contract Administration group based on contract requirements. The appropriate work order tracking information is provided to the representative for reporting back to ZOLL Technical Service.

Guaranteed Parts Availability

ZOLL guarantees parts for seven (7) years from the last date of manufacture.

ATTACHMENT #5

7/21/2002 00:50 1-813-792-0096
JUN-21-2002 MON 10:18 AM ZOLL MEDICAL

ZOLL MEDICAL: SOUTH
FAX NO. 9

PAGE 03
P. 01

DEPARTMENT OF ADMINISTRATION AND FINANCE

Procurement and Supply Division



NOTIFICATION OF AWARD AND RELATED ACTIONS

DATE: 7/27/01

Zoll Medical Corporation
32 Second Avenue
Burlington, MA 01803-4420

BID: SC-0492-01
TITLE: CARDIAC MONITOR / DEFIBRILLATORS

Ladies/Gentlemen:

- You are a successful bidder on the above referenced bid. Bid is accepted subject to the terms, conditions and stipulations in our specifications.
- Performance Bond in the amount of \$ _____ (as required in the original bid package) must be returned within 10 days from receipt of this notification. (Please include bid number on performance bond remittance)

**CONTRACT DOCUMENTS OR PURCHASE ORDER TO FOLLOW.
THIS IS NOT AN ORDER.**

Awarded as Follows:

Awarded to Lowest Conforming Bidder in the Estimated Amount of \$1,346,219.25

- You are not a successful bidder. Bids are available for inspection in the Procurement and Supply Division.
- Bid security is herewith returned; Check# _____ Amount _____

Sincerely,

Handwritten signature of Jerrie Gunder in cursive script.
JERRIE GUNDER

117 West Duval Street, Suite 335
Jacksonville, Florida 32202
Phone: (904)630-1184 Fax: (904)630-2151

SUBJECT: CARDIAC MONITOR / DEFIBRILLATORS

BID# SC-0492-01

OPEN DATE: 5/30/01

GENERAL GOVERNMENT AWARDS COMMITTEE

KIND AND BASIS OF CONTRACT:

SUPPLY CONTRACT - One (1) Year From Date of Award with Two (2) One (1) Year Renewal Options

FOR: FIRE/RESCUE

BASIS OF AWARD: ALL OR NONE

NUMBER OF BIDS INVITED 5 NUMBER RECEIVED 3 OTHER: 1

SUMMARY OF BIDS AND RECOMMENDED ACTIONS:

RECOMMEND APPROVAL OF AWARD IN ACCORDANCE WITH MEMO FROM OFFICE OF THE DIRECTOR OF FIRE AND RESCUE DEPARTMENT TO LOWEST CONFORMING BIDDER, ZOLL MEDICAL CORPORATION, IN THE ESTIMATED AMOUNT OF \$1,346,218.25.

ATTACHMENTS: 1) RECOMMENDATION MEMO; 2) TAB SHEET; 3) SCOPE

BUYER: Jerrie Gunder RESPECTFULLY SUBMITTED
JERRIE GUNDER

Joseph H. Gibbs, Chief
Procurement and Supply

CONCURRENCE BY: CHIEF RAY ALFRED, DIRECTOR OF FIRE & RESCUE

(ALL AWARD ACTIONS SUBJECT TO AVAILABILITY OF FUNDS)

ACTION OF AWARDS COMMITTEE ON CPO RECOMMENDATIONS ABOVE

MEMBERS APPROVING _____ MEMBERS DISAPPROVING _____ DATE JUL 12 2001

OTHER _____

ACTION OF AWARDING AUTHORITY _____ DATE: JUL 13 2001

APPROVED / DISAPPROVED _____

OTHER _____

SIGNATURE OF AUTHENTICATION [Signature]

ATTACHMENT #6

01/23/02 16:34 FAX 904 630 1182

PROCUREMENT & SUPPLY

001

COVER

SHEET

FAX



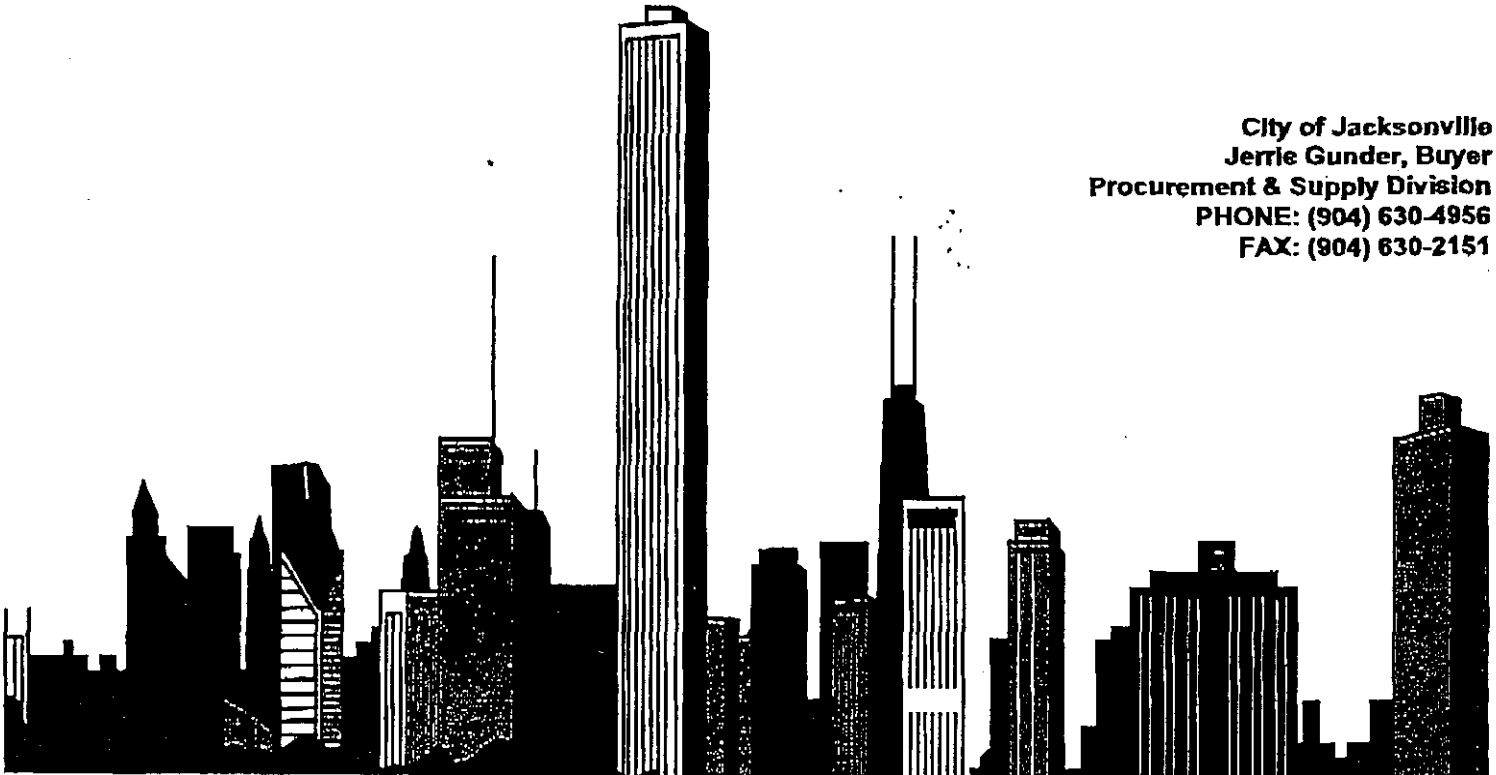
*Earl
Lee County Purchasing
(941) 689-7390*

PER YOUR REQUEST.....

Bid Tabulation sheet

THANKS

City of Jacksonville
Jerrle Gunder, Buyer
Procurement & Supply Division
PHONE: (904) 630-4956
FAX: (904) 630-2151



BID TABULATION SHEET

TITLE: CARDIAC MONITOR/DEFIBRILLATORS - Fire & Rescue BID NO.: SC-0492-01 OPEN: May 30, 2001 @ 2:00pm BUYER: Jerris Gunder, Buyer Invited: (2) Received (3) No Bids: (1) Recorded By: <i>Jerris Gunder</i>				MEDTRONIC-PHYSIO CONTROL	MEDICAL RESEARCH LABS	ZOLL MEDICAL CORPORATION					
QTY	DESCRIPTION	UNIT	EA	PRICE	AMOUNT	UNIT	PRICE	AMOUNT	UNIT	PRICE	AMOUNT
1	DEFIBRILLATOR / PACER / MONITOR / 12-LEAD, Medtronic-Physio Control LifePak 12 Series or Zoll Medical Corporation M-Series. (No Substitution)	30	EA	\$ 22,237.60	\$ 667,128.00	\$ 15,880.00	\$ 475,800.00	\$ 13,000.00	\$ 390,000.00		
2	AED / DEFIBRILLATOR / PACER / MONITOR - Medtronic-Physio Control LifePak 12 Series or Zoll Medical Corporation M-Series. (No Substitution)	50	EA	\$ 14,145.55	\$ 707,277.50	\$ 16,860.00	\$ 793,000.00	\$ 5,250.00	\$ 412,500.00		
3	AUTOMATED DEFIBRILLATION (AED) - Medtronic-Physio Control LifePak 500 AED or Zoll Medical Corporation M-Series AED. (No Substitution)	55	EA	\$ 2,200.00	\$ 121,000.00	\$ 3,573.75	\$ 196,556.25	\$ 3,000.00	\$ 165,000.00		
4	BATTERY SUPPORT SYSTEM - (No Substitution)	1	EA	\$ 1,815.00	\$ 1,815.00	INCLUDED IN ABOVE PRICE		53 @ \$1,000.00	\$ 53,000.00		
UPGRADABLE OPTIONS:											
5	PULSE OXIMETRY (SpO2) (No Substitution) - Device shall include all necessary additional equipment, cables and sensors (Adult, Pediatric & Neonate).	1	EA	\$ 1,425.00	\$ 1,425.00	MRL PART #9710022111	\$ 1,125.00	\$ 2,800.00	\$ 2,800.00		
6	END-TIDAL CARBON DIOXIDE (ETCO2) - (No Sub). Device shall include all necessary additional equipment, cables and sensors (Adult, Pediatric & Neonate).	1	EA	\$ 4,892.00	\$ 4,892.00	MRL PART #971016	\$ 2,246.25	\$ 4,800.00	\$ 4,800.00		
7	NONINVASIVE BLOOD PRESSURE (NIBP) - (No Sub). Device shall include all necessary additional equipment, cables and full range of cuff sizes (adult, large adult, adult high, pediatric & infant).	1	EA	\$ 3,135.00	\$ 3,135.00	MRL PART #971001	\$ 2,825.00	\$ 4,000.00	\$ 4,000.00		
8	DATA TRANSMISSION OF 12-LEAD ECG VIA FAXMODEM. (No Sub). List required Communications Accessories necessary excluding Cellular Telephone	1	EA	\$ 289.25	\$ 289.25	MRL PART #971018	\$ 800.00	INCLUDED ON UNITS WITH 12 LEAD OPTION			
9	EXTENDED WARRANTY - Same specifications noted in WARRANTY APPLICABLE TO ALL DEVICES section	1	EA	LIFEPAK 12 - \$ 972.00 LP 500 - \$ 238.00		\$ 900.00	\$ 900.00	\$ 850.00	\$ 850.00		
10	DATA MANAGEMENT SYSTEM - (No Substitution). Per specification	1	EA	QUIK-VIEW Pro	\$ 2,845.25	MRL PART #980136	\$ 1,995.00	\$ 1,995.00	\$ 1,995.00		

BID TABULATION SHEET

SC-0492-01 - page 2

REPLACEMENT SUPPLIES:										
11	RECORDER PAPER	1	EA	50mm - \$ 15.20 \$ 12.35	100mm -	MRL PART #001729	\$ 14.00	\$ 2.76	\$ 2.75	
12	3-LEAD CABLES	1	EA	\$ 74.10	\$ 74.10	MRL PART #001948	\$ 95.00	\$ 78.00	\$ 78.00	
13	12-LEAD CABLES	1	EA	\$ 285.00	\$ 285.00	MRL PART #001797	\$ 218.00	\$ 236.00	\$ 236.00	
14	MULTI-FUNCTION PADS, ADULT	1	EA	\$ 24.81	\$ 24.81	MRL PART #001788	\$ 295.00	\$ 25.00	\$ 25.00	
15	MULTI-FUNCTION PADS, PEDIATRIC	1	EA	\$ 25.48	\$ 25.48	MRL PART #001781	\$ 295.00	\$ 25.00	\$ 25.00	
16	INTEGRATED SIX PRECORIDAL ELECTRODES FOR 12-LEAD ECG	1	EA	\$ 8.00	\$ 8.00	N/A	\$ -	\$ 140.00	\$ 140.00	
17	PADDLES, ADULT	1	EA	\$ 450.00	\$ 450.00	MRL PART #971108	\$ 495.00	\$ 440.00	\$ 440.00	
18	PADDLES, PEDIATRIC	1	EA	\$ 88.00	\$ 88.00	MRL PART #001637	\$ 130.00	NO CHARGE	\$ -	
19	SpO2 CABLE	1	EA	N/A	\$ -	MRL PART #	\$ 95.00	\$ 120.00	\$ 120.00	
20	SpO2 SENSORS, ADULT	1	EA	\$ 237.50	\$ 237.50	N/A	\$ -	\$ 200.00	\$ 200.00	
21	SpO2 SENSORS, PEDIATRIC	1	EA	\$ 237.50	\$ 237.50	N/A	\$ -	N/A	\$ -	
22	SpO2 SENSORS, NEONATES	1	EA	BOX OF 50 WRAPS	\$ 118.75	N/A	\$ -	N/A	\$ -	
23	SpO2 DISPOSABLE SENSORS, ADULT	1	EA	BOX OF 50 WRAPS	\$ 118.75	N/A	\$ -	\$ 12.00	\$ 12.00	
24	SpO2 DISPOSABLE SENSORS, PEDIATRIC	1	EA	BOX OF 50 WRAPS	\$ 118.75	N/A	\$ -	\$ 12.00	\$ 12.00	

BID TABULATION SHEET

SC-0492-01 - page 3

NO.	DESCRIPTION	QTY	EA	UNIT PRICE	TOTAL PRICE	UNIT PRICE	TOTAL PRICE	UNIT PRICE	TOTAL PRICE		
25	SpO2 DISPOSABLE SENSORS, INFANT	1	EA	BOX OF 50 WRAPS	\$ 118.75	N/A	\$ -	\$ 12.00	\$ 12.00		
26	EICO2 CABLE	1	EA	N/A	\$ -	AIRL PART #001904	\$ 2,495.00	\$ 1,036.00	\$ 1,036.00		
27	EICO2 SENSOR, ADULT	1	EA	N/A	\$ -	N/A	\$ -	NO CHARGE	\$ -		
28	EICO2 DISPOSABLE SENSORS, ADULT	1	EA	BOX OF 25	\$ 174.00	N/A	\$ -	\$ 7.50	\$ 7.50		
29	EICO2 SENSOR, PEDIATRIC	1	EA	BOX OF 25	\$ 275.50	N/A	\$ -	NO CHARGE	\$ -		
30	EICO2 DISPOSABLE SENSORS, PEDIATRIC	1	EA	BOX OF 25	\$ 275.50	N/A	\$ -	\$ 7.50	\$ 7.50		
31	EICO2 SENSORS, NEONATE	1	EA	N/A	\$ -	N/A	\$ -	NO CHARGE	\$ -		
32	EICO2 DISPOSABLE SENSORS, NEONATE	1	EA	BOX OF 25	\$ 275.50	N/A	\$ -	\$ 7.50	\$ 7.50		
33	NIBP CABLE	1	EA	N/A	\$ -	N/A	\$ -	\$ 40.00	\$ 40.00		
34	NIBP CUFF, ADULT	1	EA	\$ 23.75	\$ 23.75	N/A	\$ -	\$ 28.00	\$ 28.00		
35	NIBP CUFF, LARGE ADULT	1	EA	\$ 28.50	\$ 28.50	N/A	\$ -	\$ 32.00	\$ 32.00		
36	NIBP CUFF, ADULT TIGHT	1	EA	\$ 112.10	\$ 112.10	N/A	\$ -	N/A	\$ -		
37	NIBP CUFF, PEDIATRIC	1	EA	\$ 19.00	\$ 19.00	N/A	\$ -	\$ 24.00	\$ 24.00		
38	NIBP CUFFS, NEONATE	1	EA	\$ 16.15	\$ 16.15	N/A	\$ -	N/A	\$ -		

BID TABULATION SHEET

PAGE 4

NO.	DESCRIPTION	QTY	UNIT	UNIT PRICE	TOTAL PRICE	ALTERNATE	PRICE	ALTERNATE	PRICE	
39	NICD BATTERIES	1	EA	\$ 180.50	\$ 180.50	N/A	\$ -	N/A	\$ -	
40	SEALED LEAD ACID BATTERIES	1	EA	\$ 123.50	\$ 123.50	N/A	\$ -	NO CHARGE	\$ -	
41	LITHIUM BATTERIES	1	EA	\$ 191.50	\$ 191.50	N/A	\$ -	N/A	\$ -	
42	DEFIBRILLATOR / PACER / MONITOR / 12-LEAD CARRY CASE	1	EA	\$ 188.55	\$ 188.55	N/A	\$ -	\$ 250.00	\$ 250.00	
43	AED / DEFIBRILLATOR / PACER / MONITOR CARRYING CASE	1	EA	\$ 186.85	\$ 186.85	N/A	\$ -	\$ 170.00	\$ 170.00	
44	AED CARRYING CASE	1	EA	\$ 102.50	\$ 102.50	N/A	\$ -	\$ 170.00	\$ 170.00	
TRADE-IN ALLOWANCE:										
45	LIFEPAK 11	28	EA	\$ 10,800.00	\$ 280,800.00	\$ 1,000.00	\$ 1,000.00	\$ 5,000.00	\$ 130,000.00	
46	LIFEPAK 10	27	EA	\$ 7,000.00	\$ 189,000.00	\$ 1,000.00	\$ 1,000.00	\$ 5,000.00	\$ 135,000.00	
47	FIRST MEDIC 610 AED	55	EA	\$ 200.00	\$ 11,000.00	\$ 100.00	\$ 100.00	\$ 500.00	\$ 27,500.00	
48	BATTERY SUPPORT SYSTEM	50	EA	\$ 400.00	\$ 21,200.00	\$ 250.00	\$ 250.00	\$ 300.00	\$ 15,000.00	
LUMP SUM BASE BID:				\$ 2,015,657.27	\$ 1,481,627.50	\$ 1,346,219.25				
TERMS:				NET	NET	N/S				
DELIVERY:				30 DAYS	N/S	90 - 120 DAYS				
MBE PARTICIPATION:				✓	N/A	N/A				
CONFLICT OF INTEREST:				✓	✓	✓				
WARRANTY INFORMATION:				✓	✓	✓				

ATTACHMENT # 7

01/28/02 11:53 FAX 904 630 1182

PROCUREMENT & SUPPLY

001

DEPARTMENT OF ADMINISTRATION AND FINANCE
PROCUREMENT AND SUPPLY DIVISION



January 28, 2002

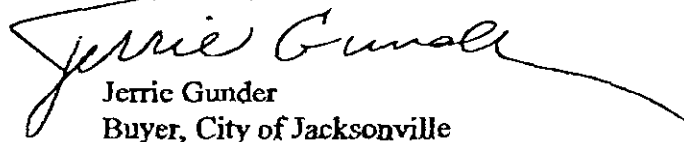
Earl Pflaumer
Lee County Purchasing
Fax: 941-689-7390

Subject: CARDIAC MONITOR / DEFIBRILLATORS

Please be advised that the City of Jacksonville has no problem with any other city or county agency using the above mentioned contract(s), as long as the vendor(s) are in agreement.

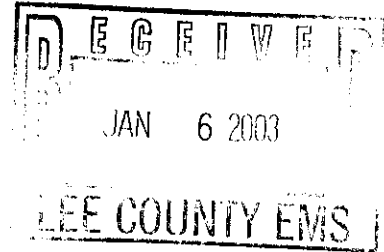
The following is a copy of the original awarded contract signed by the City of Jacksonville's Award Committee and a copy of the awarded bidder's proposal. Please contact the vendor(s) if you wish to purchase from the agreement submitted.

Respectfully,


Jerrie Gunder
Buyer, City of Jacksonville

Attachments

ATTACHMENT #8



ZOLL

January 3, 2003

H.C. (Chris) Hansen
EMS Program Manager
14752 Ben C. Pratt /
6 Mile Cypress Parkway
Ft. Myers, Fl 33902
chrish@leegov.com

Chris,

Per your request, I would like to confirm that the pricing provided by Zoll Medical to Lee County for the purchase of defibrillator/monitors is based on the competitive bid for Jacksonville Fire and Rescue contract BID # SC-0492-01, May 30, 2001.

Please contact me if you have any questions or concerns. Thank you for considering Zoll Medical.

Sincerely,

A handwritten signature in cursive script that reads "Steve Rea".

Steve Rea
South Region Manager
Zoll Medical – EMS
813-928-5011
srea@zoll.com

ATTACHMENT #9

TO: LEE COUNTY DIVISION OF PUBLIC SAFETY EMS

P.O. Box 398
14752 Ben C. Pratt/Six Mile Cypress Pkwy
Fort Myers, FL 33902-3098

Attn: **H.C Hansen**
Title: EMS Program Manager
Email: chrish@leegov.com

ZOLL MEDICAL QUOTATION

DATE: January 6, 2003

TERMS: Net 30 Days

Cc: **Patty Hojnacki**

FOB: Destination

Email: phojnacki@leegov.com

ITEM	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
1	41621531100123010 M SERIES MED-PRO PLUS BIPHASIC	Manual/Advisory Defibrillator with Rectilinear Biphasic Waveform, AC Power, Multiple Application Printer with Summary Report, Code Markers, SPO2 with reusable sensor and 4' cable, Noninvasive Pacing, NIBP with Adult-Plus cuff and hose and 12-Lead with 1-Step Cable Includes: High contrast display, 3-lead patient cable with integral lead wires, universal cable, One XL battery, carry case, ac mains power cord, one package of recorder paper, integral diagnostic frequency response, 2 PCMCIA card slots, RS232 data transfer capabilities and operator's manual. Standard One Year EMS Warranty	25	\$24,185.00	\$19,251.26	\$481,281.50 *
2	44521711100124010 M SERIES CCT - BIPHASIC	Advisory Defibrillator w/Color Display, AC Power, Multiple Application Printer, Summary Report with Trending, SPO2, Code Markers, NIBP with Adult-Plus cuff and hose, 12-Lead with 1-Step Cable, EtCO2 with mainstream capnostat sensor and Noninvasive Pacing Includes: 3-channel color display, background rhythm analysis, 3-lead ECG patient cable, 1 rechargeable XL lead acid battery, RS232 data transfer capabilities, carry case, AC power cord, 1 package recorder paper, 2 PC Card slots, VGA output and 1 operator's manual. Standard 1 Year EMS Warranty	1	\$28,990.00	\$23,076.04	\$23,076.04 *
3	8050-0012-01	ZOLL Base PowerCharger 4x4 Battery Charger/Tester with Auto Test. (No Batteries Included)	26	\$1,545.00	\$1,000.00	\$26,000.00 *
4	8000-0686-01	Smart Ready Battery XL, package of three (3)	32	\$595.00	\$301.00	\$9,632.00 *

WE PROPOSE TO FURNISH THE ITEMS LISTED ABOVE, SUBJECT TO CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF, AND THE WRITTEN ACCEPTANCE OF THIS QUOTATION.

TOTAL

\$539,989.54

1. DELIVERY WILL BE MADE 60-90 DAYS AFTER RECEIPT OF ACCEPTED PURCHASE ORDER.
2. PRICES WILL BE F.O.B. DESTINATION.
3. WARRANTY PERIOD (See above and reverse side).
4. PRICES QUOTED ARE FIRM FOR 60 DAYS.

Kevin Jung/el
Territory Manager
800-242-9150, x576

TO: LEE COUNTY DIVISION OF PUBLIC SAFETY EMS

P.O. Box 398
 14752 Ben C. Pratt/Six Mile Cypress Pkwy
 Fort Myers, FL 33902-3098

Attn: **H.C Hansen**
 Title: EMS Program Manager
 Email: chhsh@leegov.com

ZOLL MEDICAL QUOTATION

DATE: January 6, 2003

TERMS: Net 30 Days

Cc: **Patty Hojnacki**

FOB: Destination

Email: phojnacki@leegov.com

ITEM	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
5	8204-0103-01	Smart Battery Replacement for Standard Battery (at time of initial purchase when ordering new equipment)	122	\$50.00	\$39.80	\$4,855.60 *
6	8000-0753	Xtreme Pack II Carry Case, XL with modem extension cable for 12-Lead and rear pouch for use with paddles, NIBP (price at time of initial purchase)	25	\$595.00	\$250.00	\$6,250.00 *
7	8000-0748	Xtreme Pack II Carry Case for CCT with modem extension cable for 12-Lead and rear pouch for use with paddles, NIBP (price at time of initial purchase)	1	\$595.00	\$250.00	\$250.00 *
8	8000-1010-01	M Series External Paddle Assembly Apex/Sternum with controls and built-in pediatric electrodes	26	\$550.00	\$300.00	\$7,800.00 *
9	8777-9998	Preventative Maintenance Contract	78	\$175.00	N/C	N/C *
10	8777-0237	MedPro w/options, Extended Warranty, 4 Year	26	\$4,658.00	N/C	N/C *
11	8000-1007-01	1 Step Patient Cable for 12 Lead ECG with limb leads and v leads	10	\$295.00	\$250.75	\$2,507.50 *
12	8000-1006	1 Step Patient Cable for 12 Lead ECG with limb leads	10	\$150.00	\$127.50	\$1,275.00 *
13	8000-0655	Hose, Air, 1.5mtr, NIBP	15	\$50.00	\$42.50	\$637.50 *
14	8000-0652	Adult Cuff, Limb Circumference 25.4 to 34.3	15	\$35.00	\$29.75	\$446.25 *
15	8000-0650	Pediatric cuff, Limb Circumference 16.0 to 21.8	30	\$30.00	\$25.50	\$765.00 *
16	8000-0250	Reusable 4 ft. SPO2 cable	30	\$150.00	\$127.50	\$3,825.00 *
17	8000-0045	Reusable Adult Sensor	20	\$250.00	\$212.50	\$4,250.00 *
Subtotal Page 1						\$539,989.54

WE PROPOSE TO FURNISH THE ITEMS LISTED ABOVE, SUBJECT TO CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF, AND THE WRITTEN ACCEPTANCE OF THIS QUOTATION.

Subtotal Page 2

\$572,851.39

1. DELIVERY WILL BE MADE 60-90 DAYS AFTER RECEIPT OF ACCEPTED PURCHASE ORDER.
2. PRICES WILL BE F.O.B. DESTINATION.
3. WARRANTY PERIOD (See above and reverse side).
4. PRICES QUOTED ARE FIRM FOR 60 DAYS.

Kevin Jung/el
 Territory Manager
 800-242-9150, x576

TO: LEE COUNTY DIVISION OF PUBLIC SAFETY EMS

P.O. Box 398
 14752 Ben C. Pratt/Six Mile Cypress Pkwy
 Fort Myers, FL 33902-3098

**ZOLL MEDICAL
 QUOTATION**

Attn: **H.C Hansen**
 Title: EMS Program Manager
 Email: chrish@leegov.com

DATE: January 6, 2003

TERMS: Net 30 Days

Cc: **Patty Hojnacki**
 Email: phojnacki@leegov.com

FOB: Destination

ITEM	MODEL NUMBER	DESCRIPTION	QTY.	UNIT PRICE	DISC PRICE	TOTAL PRICE
18	8000-0044	Disposable Pediatric Sensor, (>10 <50 kg.) 20 sets per case	10	\$360.00	\$306.00	\$3,060.00 *
19	8900-4003	stat•padz HVP Multi-Function Electrodes, 12 pair/case	30	\$456.00	\$387.60	\$11,628.00 *
20	8900-2065	pedi•padz Multi-Function Electrodes, 6 pair/case	20	\$237.00	\$201.45	\$4,029.00 *
21	8900-0004	4 ECG electrodes (480) /pouch, 120 pouches/case	25	\$96.00	\$81.60	\$2,040.00 *
22	8000-0301	Recorder Paper 80 mm Fan Fold , 20 packages	30	\$69.00	\$58.65	\$1,759.50 *
23	8000-0308-01	Universal Cable, allows use of Paddles or Multi-Function Electrodes, Replacement	10	\$125.00	\$106.25	\$1,062.50 *
*REFLECTS DISCOUNT PRICING						
All discounts off List Price are contingent upon payment within agreed upon terms.						
Subtotal Page 2						\$572,851.39

WE PROPOSE TO FURNISH THE ITEMS LISTED ABOVE, SUBJECT TO CONDITIONS SET FORTH ON THE REVERSE SIDE HEREOF, AND THE WRITTEN ACCEPTANCE OF THIS QUOTATION.

TOTAL

\$596,430.39

1. DELIVERY WILL BE MADE 60-90 DAYS AFTER RECEIPT OF ACCEPTED PURCHASE ORDER.
2. PRICES WILL BE F.O.B. DESTINATION.
3. WARRANTY PERIOD (See above and reverse side).
4. PRICES QUOTED ARE FIRM FOR 60 DAYS.

Kevin Jung/el
 Territory Manager
 800-242-9150, x576