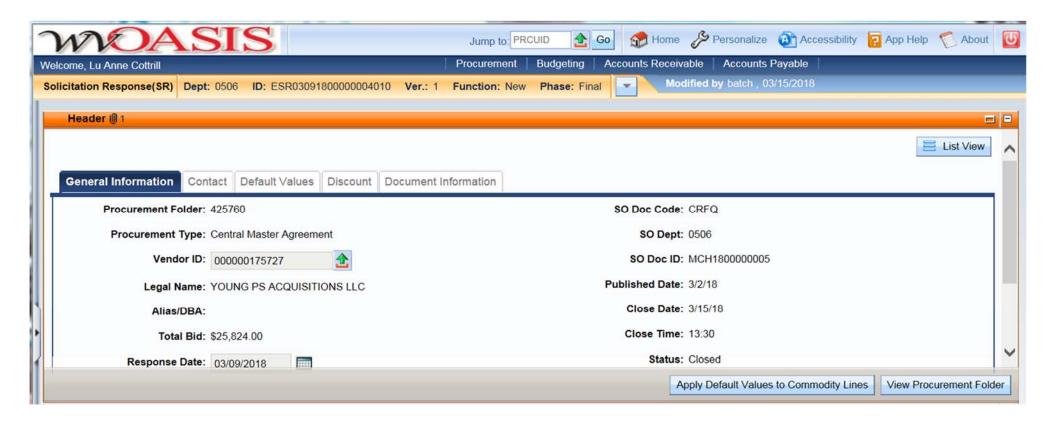


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

The following documentation is an electronicallysubmitted vendor response to an advertised solicitation from the West Virginia Purchasing Bulletin within the Vendor Self-Service portal at wvOASIS.gov. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at WVPurchasing.gov with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.





## State of West Virginia Solicitation Response

Proc Folder: 425760

Solicitation Description: Fluoride Mouthrinse

**Proc Type**: Central Master Agreement

| Date issued S | Solicitation Closes    | Solicitation Response        | Version |
|---------------|------------------------|------------------------------|---------|
| 1             | 2018-03-15<br>13:30:00 | SR 0506 ESR03091800000004010 | 1       |

VENDOR

000000175727

YOUNG PS ACQUISITIONS LLC

Solicitation Number: CRFQ 0506 MCH1800000005

**Total Bid :** \$25,824.00 **Response Date**: 2018-03-09 **Response Time**: 13:59:20

**Comments:** 

FOR INFORMATION CONTACT THE BUYER

April E Battle (304) 558-0067 april.e.battle@wv.gov

Signature on File FEIN # DATE

All offers subject to all terms and conditions contained in this solicitation

Page: 1 FORM ID: WV-PRC-SR-001

| Line               | Comm Ln Desc   | Qty                  | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|--------------------|--|----------------------|------------|--------------|-----------------------------|
| 1                  | Complete Fluoride Program Kit -<br>Grape                 | 100.00000            | KIT        | \$125.000000 | \$12,500.00                 |
| Comm Code          | Manufacturer   | Specification        |            | Model #      |                             |
| 42151905           |  | -                    |            |              |                             |
| Extended Des       | Complete Fluoride Prog                                   | gram Kit - Grape     |            |              |                             |
| Line               | Comm Ln Desc   | Qty                  | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
| 2                  | Complete Fluoride Program Kit -<br>Bubble Gum            | 100.00000            | KIT        | \$125.000000 | \$12,500.00                 |
| Comm Code          | Manufacturer   | Specification        |            | Model #      |                             |
| 42151905           |  |                      |            |              |                             |
| Line               | Comm Ln Desc   | Qty                  | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
| 3                  | Fluoride Powder Packets - 3g -<br>Grape 50 per case      | 10.00000             | CASE       | \$30.000000  | \$300.00                    |
| Comm Code          | Manufacturer   | Specification        |            | Model #      |                             |
| 50501603           |  |                      |            |              |                             |
| Extended Des       | Fluoride Powder Packe                                    | ts - 3g - Grape 50 p | er case    |              |                             |
| Line               | Comm Ln Desc   | Qty                  | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
| 4                  | Fluoride Powder Packets - 3g -<br>Bubble Gum 50 per case | 10.00000             | CASE       | \$30.000000  | \$300.00                    |
|                    | Bubble Guill 30 per dage                                 |                      |            |              |                             |
| Comm Code 50501603 | Manufacturer Manufacturer                                | Specification        |            | Model #      |                             |

| Line                                  | Comm Ln Desc  | Qty   | Unit Issue         | Unit Price                                   | Ln Total Or Contract Amount            |
|---------------------------------------|---|---|--------------------|--|--|
| 5                                     | Polyethylene Food-Grade Containers with Childproof Caps   | 2.00000                                       | EA                 | \$11.000000                                  | \$22.00                                |
| Comm Code                             | Manufacturer  | Specification                                 |                    | Model #                                      |  |
| 12152500                              |   | <u> </u>                                      |                    |  |  |
| Extended Des                          | scription : Polyethylene Food-Grade C   | Containara with                               | Childproof Co      | 200  |  |
| Extended Des                          | rolyelliylelle rood-Grade C   | Jonainers with                                | Crinapidoi Ca      | aps  |  |
| Line                                  | Comm Ln Desc  | Qty   | Unit Issue         | Unit Price                                   | Ln Total Or Contract Amount            |
| 6                                     | Dispenser Pump with Stainless Steel Fitments for 10ml   | 2.00000                                       | EA                 | \$11.000000                                  | \$22.00                                |
| Comm Code                             | Manufacturer  | Specification                                 |                    | Model #                                      |  |
| 42152500                              |   |   |                    |  |  |
|                                       |   |   |                    |  |  |
| Line                                  | Comm Ln Desc  | Qty   | Unit Issue         | Unit Price                                   | Ln Total Or Contract Amount            |
| Line<br>7                             | Comm Ln Desc Plastic Cups - 3 oz 2400 per case  | <b>Qty</b> 1.00000                            | Unit Issue<br>CASE | Unit Price<br>\$75.000000                    | Ln Total Or Contract Amount<br>\$75.00 |
| 7                                     |   |   |                    |  |  |
| 7 Comm Code                           | Plastic Cups - 3 oz 2400 per case   | 1.00000                                       |                    | \$75.000000                                  |  |
| 7                                     | Plastic Cups - 3 oz 2400 per case  Manufacturer   | 1.00000<br>Specification                      |                    | \$75.000000                                  |  |
| 7 Comm Code 42152500                  | Plastic Cups - 3 oz 2400 per case  Manufacturer   | 1.00000<br>Specification                      |                    | \$75.000000                                  |  |
| Comm Code<br>42152500<br>Extended Des | Plastic Cups - 3 oz 2400 per case  Manufacturer  scription : Plastic Cups - 3 oz 2400   | 1.00000  Specification  per case              | CASE               | \$75.000000<br>Model #                       | \$75.00                                |
| Comm Code 42152500 Extended Des       | Plastic Cups - 3 oz 2400 per case  Manufacturer  Scription: Plastic Cups - 3 oz 2400  Comm Ln Desc  1-ply Junior Low-Fold Dispenser | 1.00000  Specification  per case              | CASE  Unit Issue   | \$75.000000  Model #                         | \$75.00  Ln Total Or Contract Amount   |
| 7 Comm Code 42152500 Extended Des     | Manufacturer  Scription: Plastic Cups - 3 oz 2400  Comm Ln Desc  1-ply Junior Low-Fold Dispenser Napkins - 8000 per case            | 1.00000  Specification  per case  Qty 1.00000 | CASE  Unit Issue   | \$75.000000  Model #  Unit Price \$90.000000 | \$75.00  Ln Total Or Contract Amount   |

| Line | Comm Ln Desc                         | Qty     | Unit Issue | Unit Price  | Ln Total Or Contract Amount |
|------|--------------------------------------|---------|------------|-------------|-----------------------------|
| 9    | Clear Poly Trash Bags and Ties - 100 | 1.00000 | CASE       | \$15.000000 | \$15.00                     |
|      | per case                             |         |            |             |                             |

| Comm Code        | Manufacturer              | Specification                | Model # |  |
|------------------|---------------------------|------------------------------|---------|--|
| 42152500         |                           |                              |         |  |
|                  |                           |                              |         |  |
| Extended Descrip | otion: Clear Poly Trash I | Bags and Ties - 100 per case |         |  |
|                  |                           |                              |         |  |

### STATE OF WEST VIRGINIA Purchasing Division

### **PURCHASING AFFIDAVIT**

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL OTHER CONTRACTS: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

### **DEFINITIONS:**

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code* §61-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

### WITNESS THE FOLLOWING SIGNATURE:

.....

| Vendor's Name: PLAKSMACKER   |           |   |
|--|-----------|---|
| Authorized Signature:  | _ Date: _ | 8-MAC-2018                                |
| State of   |           |   |
| County of Mary, to-wit:  |           |   |
| Taken, subscribed, and sworn to before me this day of  |           | , 20 <u>\\</u> .                          |
| My Commission expires  |           |   |
| AFFIX SEAF HERSEAL  JACKIE L GREGORY  NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:03/30/19 | P         | Jurchasing Affidavit (Revised 07/07/2017) |

WV-10 Approved / Revised 12/16/15

### State of West Virginia

### **VENDOR PREFERENCE CERTIFICATE**

Certification and application is hereby made for Preference in accordance with *West Virginia Code*, §5A-3-37. (Does not apply to construction contracts). *West Virginia Code*, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the *West Virginia Code*. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Vendor Preference, if applicable.

|                      | Application is made for 2.5% vendor preference for the reason checked:  Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,  Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification;   |
|----------------------|---|
|                      | Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; or,   |
|                      | Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4) years immediately preceding the date of this certification; or,  |
| 2.                   | Application is made for 2.5% vendor preference for the reason checked:  Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,  |
| 3.                   | Application is made for 2.5% vendor preference for the reason checked:  Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; or, |
| <b>4.</b>            | Application is made for 5% vendor preference for the reason checked:  Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,  |
| 5 <b>.</b>           | Application is made for 3.5% vendor preference who is a veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,   |
| <b>6.</b>            | Application is made for 3.5% vendor preference who is a veteran for the reason checked:  Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.   |
| 7.                   | Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with West Virginia Code §5A-3-59 and West Virginia Code of State Rules.  Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.   |
| requiren             | understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the nents for such preference, the Secretary may order the Director of Purchasing to: (a) rescind the contract or purchase order; seess a penalty against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to racting agency or deducted from any unpaid balance on the contract or purchase order.  |
| authoriz<br>the requ | nission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and es the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid lired business taxes, provided that such information does not contain the amounts of taxes paid nor any other information by the Tax Commissioner to be confidential.  |
| and if a             | hereby certifies that this certificate is true and accurate in all respects; and that if a contract is issued to Bidder nything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasision in writing immediately.  |
| Bidder:              | PLAY CHINE Y CA   |
| Date:                | 3/7/18 Signed: Vice President   |
|                      |   |

<sup>\*</sup>Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

## ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ 0506 MCH18000000005

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

| Addendum Numbers Received: (Check the box next to each addendum received)                              | ped)   |
|--|--|
| Addendum No. 1 Addendum No. 2 Addendum No. 3 Addendum No. 4 Addendum No. 5                             | Addendum No. 6 Addendum No. 7 Addendum No. 8 Addendum No. 9 Addendum No. 10  |
| I further understand that any verbal representations discussion held between Vendor's representations. | t of addenda may be cause for rejection of this bid<br>ation made or assumed to be made during any oral<br>tives and any state personnel is not binding. Only<br>the specifications by an official addendum is |
| PLAK SMACKER<br>Company,   | <del></del>  |
| Authorized Signature   |  |
| 3/7/18   |  |
| Date   |  |

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

# REQUEST FOR QUOTATION CRFQ 0506 MCH1800000005 Fluoride Mouthrinse Supplies

- 7.2 The following remedies shall be available to Agency upon default.
  - 7.2.1 Immediate cancellation of the Contract.
  - 7.2.2 Immediate cancellation of one or more release orders issued under this Contract.
  - 7.2.3 Any other remedies available in law or equity.

### 8. MISCELLANEOUS:

- 8.1 No Substitutions: Vendor shall supply only Contract Items submitted in response to the Solicitation unless a contract modification is approved in accordance with the provisions contained in this Contract.
- 8.2 Vendor Supply: Vendor must carry sufficient inventory of the Contract Items being offered to fulfill its obligations under this Contract. By signing its bid, Vendor certifies that it can supply the Contract Items contained in its bid response.
- 8.3 Reports: Vendor shall provide quarterly reports and annual summaries to the Agency showing the Agency's items purchased, quantities of items purchased, and total dollar value of the items purchased. Vendor shall also provide reports, upon request, showing the items purchased during the term of this Contract, the quantity purchased for each of those items, and the total value of purchases for each of those items. Failure to supply such reports may be grounds for cancellation of this Contract.
- 8.4 Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: SCOTTLETTE
Telephone Number: 200.758.6684
Fax Number: 864.874.1981
Email Address: SReceeyant. Com

**DESIGNATED CONTACT:** Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

| SCOTT               | LEETE                 | V   | ICE  | PRES  | DENT                                    |       |
|---------------------|-----------------------|-----|------|-------|---|-------|
| (Name, Title)       | MACKER                |     |      | 7.07  |   |       |
|                     | and Title)  VENDT STO | LEE | T AZ | LOONG | MIN, IL                                 | 60102 |
| (Address)           | 4 6684                |     |      | 894.  |   |       |
| (Phone Number S/eec | er) / (Fax Number)    | con | 1    |       |   |       |
| (email address      |                       |     |      |       | *************************************** |       |

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

| PLAK SMACKER  |
|---|
| (Company)   |
|   |
| (Authorized Signature) (Representative Name, Title)   |
| Scott Leece Vice President                            |
| (Printed Name and Title of Authorized Representative) |
| 3/7/18  |
| (Date)  |
| 800, 558. 6684. / 800. 894.198                        |
| (Phone Number) (Fax Number)                           |





2260 Wendt St Algonquin, IL 60102 customerservice@plaksmacker.com

### Valued Customer:

We're reaching out to you today with some very exciting news!

Young Innovations, Inc., recently purchased Varnish America™, Seal America, and other fluoride delivery related product lines, such as NaFrinse™ and FluoriSHIELD™, from Medical Product Laboratories, Inc. These great products will now be managed by Plak Smacker, a subsidiary of Young Innovations, Inc.

Like Varnish America, Plak Smacker has a long track record in the dental market, providing great customer service and quality products to hygienists, dentists and specialists for over 30 years. We are truly excited to be able to service your needs and carry the Varnish America products to better service our customer base.

We want to share some common questions and answers to help with this transition.

### Will the products I buy today change?

There are NO plans to make changes to any of the products, so you will receive the same great products you did previously.

### How should I order?

Plak Smacker provides easy online ordering at <a href="www.plaksmacker.com">www.plaksmacker.com</a>. You will need to set up an account and we can help you do that if you run into any issues – just call us at 800-558-6684. The website has some great features, such as easy re-ordering, a quick order pad and a loyalty program. While you're there, check out our other great products, such as flavored gloves and giveaway toothbrushes. We've created a special online promotion for all Varnish America customers – see the bottom of this letter for more details!!!

If you prefer to order via the phone, just call us at 800-558-6684.

If you prefer to order via email, email us at <a href="mailto:customerservice@plaksmacker.com">customerservice@plaksmacker.com</a>.

### How do I pay my invoice?

Details are provided on each invoice. If you have any issues, just call us at 800-558-6684.

### When is this change effective?

9/1/17. You should place all orders with Plak Smacker moving forward and call us with any questions.

Thanks in advance for your continued business and we look forward to being your partner in improving oral hygiene.

Best regards,

Scott Leece VP/GM Plak Smacker

To get FREE SHIPPING on your first online order, enter promo code PLAKFREESHIP at check-out.

Good on ground shipping only. Expires 12/31/17.



3/8/2018

To Whom It May Concern,

Please accept this letter as confirmation that Young PS Acquisitions, LLC ("Plak Smacker") is the sole manufacturer and sole distributor of NaFrinse Sodium Fluoride Rinse.

Sincerely,

Scott Leece Vice President

## Exhibit A – Pricing Page CRFQ 0506 MCH1800000005

| DELIVERABLES  | COST      |          |             |  |
|---|-----------|----------|-------------|--|
|   | Unit Cost | Qty      | Total Cost  |  |
| <u>Deliverable 1 –</u> Complete Fluoride Program Kit - grape                      | \$125.00  | 100      | \$12,500    |  |
| <u>Deliverable 2 –</u> Complete Fluoride Program Kit – bubble<br>gum              | \$125.00  | 100      | \$12,500.00 |  |
| <u>Deliverable 3 –</u> Fluoride Powder Packets – 3g – Grape 50 per<br>case        | \$30.00   | 10 cases | \$300.90    |  |
| <u>Deliverable 4 –</u> Fluoride Powder Packets – 3g – Bubble Gum<br>50 per case   | \$30,00   | 10 cases | \$300.00    |  |
| <u>Deliverable 5 – Polyethylene Food-Grade Containers with</u><br>Childproof Caps | \$11.00   | 2 each   | \$22.00     |  |
| Deliverable 6 – Dispenser Pump with Stainless Steel Fitments for 10ml             | \$11.00   | 2 each   | \$22.20     |  |
| <u>Deliverable 7 –</u> Plastic Cups – 3oz – 2400 per case                         | \$75.00   | 1 case   | 875.00      |  |
| <u>Deliverable 8 –</u> 1-ply junior low-fold dispenser napkins – 8000 per case    | \$90.00   | 1 case   | \$90.00     |  |

| <u>Deliverable 9 – Clear poly trash bags with ties – 100 per case</u> | \$15000 | 1 case | \$15.00 |
|---|---------|--------|---------|
| GRAND TOTAL COST:   | L       | \$15,  | 824.00  |

Please provide a Per Unit Cost and Total Cost per Deliverable, and a Grand Total Cost. The contract will be awarded to the Vendor that provides the Deliverables meeting the required specifications for the lowest overall Grand Total Cost.

| Vendor Name:  PLAK SMACKER                                  |
|---|
| Physical Address:<br>2760 West St Algorgain, 11 60102       |
| Remit to Address:<br>25782 Network PLACE CHICAGO, IL 60673  |
| Telephone: 800-558-6684                                     |
| Fax: 866 - 894 - 1981                                       |
| Email:<br>SLEECE @ YDNT. Com                                |
| Authorized Vendor Representative (print name):  SCOTT LEECE |
| Signature: Date: 3/7/18                                     |



**Purchasing Divison** 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

### State of West Virginia **Request for Quotation** 26 - Medical

Proc Folder: 425760 Doc Description: Fluoride Mouthrinse Proc Type: Central Master Agreement Version Solicitation Closes Solicitation No Date Issued 2018-03-02 2018-03-15 **CRFQ** 0506 MCH1800000005 13:30:00

BID RECEIVING LOCATION

**BID CLERK** 

DEPARTMENT OF ADMINISTRATION

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV 25305

US

| ۷E  | AI | n | 2 | р |
|-----|----|---|---|---|
| V E | w  | u | v | ĸ |

Vendor Name, Address and Telephone Number:

Plake Smacleco (6001558-6684) 2260 Wendt Street Algonquin, IL GOLO2

FOR INFORMATION CONTACT THE BUYER

April E Battle (304) 558-0067 april.e.battle@wv.gov

Signature X

FEIN# 33-09/2229

### ADDITIONAL INFORMAITON:

The West Virginia Purchasing Division is soliciting bids on behalf of the West Virginia Department of Health and Human Resources (WVDHHR), Bureau for Public Health, Office of Maternal Child and Family Health to establish an open-end contract for fluoride mouth rinse supplies.

| INVOICE TO  |  | SHIP TO             | SHIP TO   |  |  |
|---|--|---------------------|---|--|--|
| PURCHASING DIRECTOR - 304-356-4095                          |  | PURCHASING DIRECTOR | PURCHASING DIRECTOR - 304-356-4095                          |  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |  |                     | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT |  |  |
| 350 CAPITOL ST, RM 319                                      |  | 900 BULLITT ST      | 900 BULLITT ST  |  |  |
| CHARLESTON WV25301-3715                                     |  | CHARLESTON          | WV 25301  |  |  |
| US  |  | US                  |   |  |  |

| Line | Comm Ln Desc                             | Qty       | Unit Issue | Unit Price | Total Price |
|------|--|-----------|------------|------------|-------------|
| 1    | Complete Fluoride Program Kit -<br>Grape | 100.00000 | KIT        | \$125,00   | \$12.500.00 |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 42151905  |              |               |         |  |
|           |              |               |         |  |

### **Extended Description:**

Complete Fluoride Program Kit - Grape

| INVOICE TO  |              | SHIP TO             |   |  |  |
|---|--------------|---------------------|---|--|--|
| PURCHASING DIRECTOR - 304-356-4095                          |              | PURCHASING DIRECTOR | PURCHASING DIRECTOR - 304-356-4095                          |  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |              |                     | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT |  |  |
| 350 CAPITOL ST, RM 319                                      |              | 900 BULLITT ST      | 900 BULLITT ST  |  |  |
| CHARLESTON  | WV25301-3715 | CHARLESTON          | WV 25301  |  |  |
| US  |              | US                  | us  |  |  |

| Line | Comm Ln Desc                                  | Qty       | Unit Issue | Unit Price | Total Price |
|------|---|-----------|------------|------------|-------------|
| 2    | Complete Fluoride Program Kit -<br>Bubble Gum | 100.00000 | KIT        | \$ 125,00  | \$2,500,00  |

| Manufacturer | Specification | Model #                    |                                    |
|--------------|---------------|----------------------------|------------------------------------|
|              |               |                            |                                    |
|              | Manufacturer  | Manufacturer Specification | Manufacturer Specification Model # |

### **Extended Description:**

Complete Fluoride Program Kit - Bubble Gum

| INVOICE TO  |    | SHIP TO             | MANAGEMENT TO A STATE OF THE PARTY OF THE PA |  |  |
|---|----|---------------------|--|--|--|
| PURCHASING DIRECTOR - 304-356-4095                          |    | PURCHASING DIRECTOR | PURCHASING DIRECTOR - 304-356-4095   |  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |    |                     | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT  |  |  |
| 350 CAPITOL ST, RM 319                                      |    | 900 BULLITT ST      | 900 BULLITT ST   |  |  |
| CHARLESTON WV25301-3715                                     |    | CHARLESTON          | CHARLESTON WV 25301  |  |  |
| us  | us |                     | US   |  |  |

| Line | Comm Ln Desc  | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 3    | Fluoride Powder Packets - 3g -<br>Grape 50 per case | 10.00000 | CASE       | \$30.00    | \$300.00    |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 50501603  |              |               |         |  |
|           |              |               |         |  |

### **Extended Description:**

Fluoride Powder Packets - 3g - Grape 50 per case

| INVOICE TO  |  | SHIP TO             |   |  |  |
|---|--|---------------------|---|--|--|
| PURCHASING DIRECTOR - 304-356-4095                          |  | PURCHASING DIRECTOR | PURCHASING DIRECTOR - 304-356-4095                          |  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |  |                     | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT |  |  |
| 350 CAPITOL ST, RM 319                                      |  | 900 BULLITT ST      | 900 BULLITT ST  |  |  |
| CHARLESTON WV25301-3715                                     |  | CHARLESTON          | CHARLESTON WV 25301   |  |  |
| US  |  | US                  |   |  |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 4    | Fluoride Powder Packets - 3g -<br>Bubble Gum 50 per case | 10.00000 | CASE       | \$30.00    | \$300,00    |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 50501603  |              |               |         |  |

### **Extended Description:**

Fluoride Powder Packets - 3g - Bubble Gum 50 per case

| INVOICE TO  |                  | SHIP TO             | 在世界的大学性。1975年,1975年,1975年,1975年                             |  |
|---|------------------|---------------------|---|--|
| PURCHASING DIRECTOR   | R - 304-356-4095 | PURCHASING DIRECTOR | R - 304-356-4095  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |                  |                     | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT |  |
| 350 CAPITOL ST, RM 319                                      |                  | 900 BULLITT ST      |   |  |
| CHARLESTON  | WV25301-3715     | CHARLESTON          | WV 25301  |  |
| us  |                  | US                  |   |  |

| Line | Comm Ln Desc  | Qty     | Unit Issue | Unit Price | Total Price |
|------|---|---------|------------|------------|-------------|
| 5    | Polyethylene Food-Grade Containers with Childproof Caps | 2.00000 | EA         | \$11.00    | #22.00      |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 42152500  |              |               |         |  |
|           |              |               |         |  |

### **Extended Description:**

Polyethylene Food-Grade Containers with Childproof Caps

| INVOICE TO  |                                    | SHIP TO    |   |  |
|---|------------------------------------|------------|---|--|
| PURCHASING DIRECTOR -                                       | PURCHASING DIRECTOR - 304-356-4095 |            | R - 304-356-4095  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |                                    |            | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT |  |
| 350 CAPITOL ST, RM 319                                      | 350 CAPITOL ST, RM 319             |            | 900 BULLITT ST  |  |
| CHARLESTON  | WV25301-3715                       | CHARLESTON | WV 25301  |  |
| us  |                                    | US         |   |  |

| Line | Comm Ln Desc  | Qty     | Unit Issue | Unit Price | Total Price |
|------|---|---------|------------|------------|-------------|
| 6    | Dispenser Pump with Stainless Steel Fitments for 10ml | 2.00000 | EA         | \$ 11.00   | \$22.00     |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 42152500  |              |               |         |  |
|           |              |               |         |  |

### **Extended Description:**

Dispenser Pump with Stainless Steel Fitments for 10ml

| INVOICE TO  |              | SHIP TO             |   |  |  |
|---|--------------|---------------------|---|--|--|
| PURCHASING DIRECTOR - 304-356-4095                          |              | PURCHASING DIRECTOR | R - 304-356-4095  |  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |              | 1                   | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT |  |  |
| 350 CAPITOL ST, RM 319                                      |              | 900 BULLITT ST      |   |  |  |
| CHARLESTON  | WV25301-3715 | CHARLESTON          | WV 25301  |  |  |
| us  |              | US                  |   |  |  |

| Line | Comm Ln Desc                      | Qty     | Unit Issue | Unit Price | Total Price |
|------|-----------------------------------|---------|------------|------------|-------------|
| 7    | Plastic Cups - 3 oz 2400 per case | 1.00000 | CASE       | \$ 75,00   | \$75,00     |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 42152500  |              |               |         |  |

### Extended Description :

Plastic Cups - 3 oz. - 2400 per case

| INVOICE TO  | nicky state of the leave | SHIP TO             | AND ELECTRICAL PROPERTY OF THE PROPERTY OF THE PARTY OF T |  |  |
|---|--------------------------|---------------------|--|--|--|
| PURCHASING DIRECTOR - 304-356-4095                          |                          | PURCHASING DIRECTOR | R - 304-356-4095   |  |  |
| HEALTH AND HUMAN RESOURCES<br>BPH - PUBLIC HEALTH DENTISTRY |                          |                     | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT  |  |  |
| 350 CAPITOL ST, RM 319                                      |                          | 900 BULLITT ST      |  |  |  |
| CHARLESTON  | WV25301-3715             | CHARLESTON          | WV 25301   |  |  |
| US  |                          | US                  | US   |  |  |

| Line | Comm Ln Desc   | Qty     | Unit Issue | Unit Price | Total Price |
|------|--|---------|------------|------------|-------------|
| 8    | 1-ply Junior Low-Fold Dispenser<br>Napkins - 8000 per case | 1.00000 | CASE       | \$ 10.00   | \$ 90.00    |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 42152500  |              |               |         |  |

### **Extended Description:**

1-ply Junior Low-Fold Dispenser Napkins - 8000 per case

| INVOICE TO                         | <b>则是有理解是人们的。但是在</b> 有一种 | SHIP TO             | receives the health in the second                           |  |  |
|------------------------------------|--------------------------|---------------------|---|--|--|
| PURCHASING DIRECTOR - 304-356-4095 |                          | PURCHASING DIRECTOR | PURCHASING DIRECTOR - 304-356-4095                          |  |  |
| TIE/LETT/ AND TIOWN AT TEEOGRAPS   |                          |                     | HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT |  |  |
| 350 CAPITOL ST, RM 319             |                          | 900 BULLITT ST      | 900 BULLITT ST  |  |  |
| CHARLESTON                         | WV25301-3715             | CHARLESTON          | WV 25301  |  |  |
| US                                 |                          | US                  | US  |  |  |

| Line | Comm Ln Desc                                  | Qty     | Unit Issue | Unit Price | Total Price |
|------|---|---------|------------|------------|-------------|
| 9    | Clear Poly Trash Bags and Ties - 100 per case | 1.00000 | CASE       | \$15.00    | \$15,00     |

| Comm Code | Manufacturer | Specification | Model # |  |
|-----------|--------------|---------------|---------|--|
| 42152500  |              |               |         |  |
|           |              |               |         |  |

### Extended Description:

Clear Poly Trash Bags and Ties - 100 per case

| SCHEDULE OF EVENTS |               |            |
|--------------------|---------------|------------|
| Line               | Event         | Event Date |
| 1                  | Questions Due | 2018-03-08 |

|               | Document Phase | Document Description | Page 6 |  |
|---------------|----------------|----------------------|--------|--|
| MCH1800000005 | Final          | Fluoride Mouthrinse  | of 6   |  |

### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions