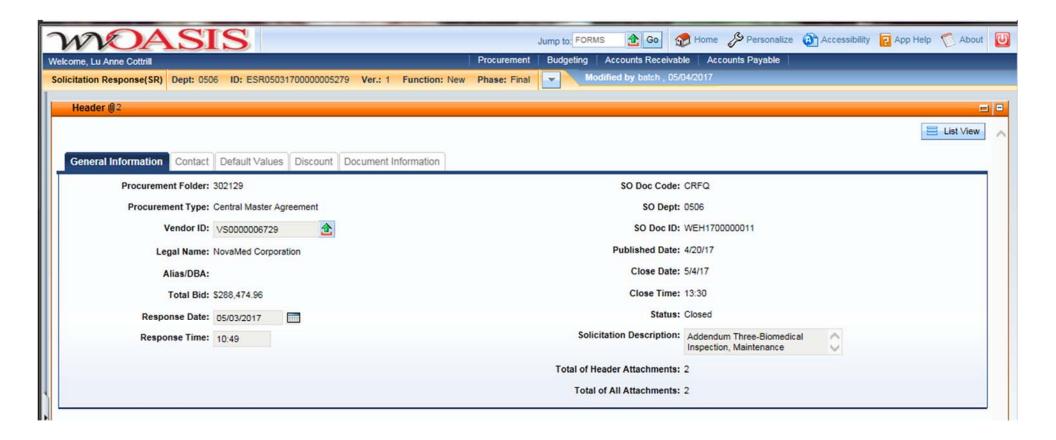
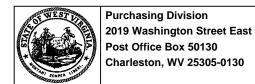


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

Bid Fax: 304-558-3970

The following documentation is an electronically-submitted 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: 302129

Solicitation Description: Addendum Three-Biomedical Inspection, Maintenance

Proc Type: Central Master Agreement

Date issued	Solicitation Closes	Solicitation	n Response	Version
	2017-05-04	SR	0506 ESR05031700000005279	1
	13:30:00			

VENDOR

VS0000006729

**NovaMed Corporation** 

Solicitation Number: CRFQ 0506 WEH1700000011

**Total Bid :** \$288,474.96 **Response Date:** 2017-05-03 **Response Time:** 10:49:14

**Comments:** 

FOR INFORMATION CONTACT THE BUYER

Charles D Barnette (304) 558-2566 charles.d.barnette@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	Monthly Service charge for Biomedical Equipment Services	12.00000	МО	\$24,039.580000	\$288,474.96

Comm Code	Manufacturer	Specification	Model #	
85161504				
Extended Descript	tion: Monthly Service	charge for Biomedical Equipment S	Services	

# CRFQ WEH1700000011 Service Support Agreement for Biomedical Equipment Inspection, Preventative Maintenance, Parts, and Repair Exhibit A Pricing Page

4.1.1 Year 1	Service Support Agreement for Biomedical Equipment Inspection, Preventative Maintenance, Parts, and Repair	Total Pricing per Month	24,039.58	Total Annual Pricing	288,475
4.1.1 Year 2	Service Support Agreement for Biomedical Equipment Inspection, Preventative Maintenance, Parts, and Repair	Total Pricing per Month	24,039.58	Total Annual Pricing	288,475
4.1.1 Year 3	Service Support Agreement for Biomedical Equipment Inspection, Preventative Maintenance, Parts, and Repair	Total Pricing per Month	24,412.42	Total Annual Pricing	292,949
4.1.1 Year 4	Service Support Agreement for Biomedical Equipment Inspection, Preventative Maintenance, Parts, and Repair	Total Pricing per Month	24,787.42		297,449
		Total Annual Cost Y	'ear 1, Year 2, Yea	r 3, and Year 4	1,167,348

Award will be made for the lowest combined Total Annual Cost Year 1, Year 2, Year 3, and Year 4 meeting specifications.

NovaMed Corporation	30 Nutmeg Drive, Trumbull, CT 06611	
Vendor Name (Printed)	Purchase Order Address	×
Robert M. Constantine, President	30 Nutmeg Drive, Trumbull, CT 06611	
Vendor Authroized Representative Printed	Vendor Remit-To Address:	
	5/2/2017	
Vendor Authorized Representative Signature	Date	
(203) 380-6682	(203) 378-2906	
Telephone	Fax	

		Pricing per					Monthly		Annual Pricing
Item #	Item Description	each Year 1		Qı	ıantitiy		Pricing Year 1		Year 1
ltem 1	Aerosol Heater	26.25	х	1	each	=	26.25	x 12 Months	315
Item 2	ANESTHESIA MACHINE	274.58	х	2	each	=	549.17	x 12 Months	6,590
item 3	Anesthesia Vaporizer (desflura	26.25	Х	7	each	=	183.75	x 12 Months	2,205
item 4	ASPIRATOR	26.25	х	4	each	=	105.00	x 12 Months	1,260
Item 5	AUDIOMETER	26.25	х	1	each	=	26.25	x 12 Months	315
Item 6	Baby Wipe Warmer	26.25	Х	1	each	=	26.25	x 12 Months	315
Item 7	BASSINET	26.25	х	1	each	=	26.25	x 12 Months	315
Item 8	BATH, DRY	26.25	Х	1	each	=	26.25	x 12 Months	315
Item 9	BED, ELECTRIC	26.25	Х	108	each	=	2,835.00	x 12 Months	34,020
Item 10	BLADDER SCANNER	26.25	×	1	each	=	26.25	x 12 Months	315
Item 11	BLOOD GAS ANALYZER	26.25	X	2	each	=	52.50	x 12 Months	630
Item 12	BLOOD GLUCOSE ANALYZER	26.25	х	1	each	=	26.25	x 12 Months	315
Item 13	Camera, Video	26.25	Х	1	each	=	26.25	x 12 Months	315
item 14	CART, CRASH	26.25	x	6	each	=	157.50	x 12 Months	1,890
Item 15	CENTRIFUGE	26.25	х	2	each	=	52.50	x 12 Months	630
Item 16	CHARGING CRADLE/TRANPORT BASE	26.25	x	6	each	=		x 12 Months	1,890
item 17	HOOD CERTIFICATION-CHEMICAL EXPOSURE TESTING	83.96	х	2	each	=	167.92	x 12 Months	2,015
item 18	COLPOSCOPE	26.25	X	7	each	=	183.75	x 12 Months	2,205
Item 19	COMPRESSOR UNIT, POWER	26.25	х	2	each	=	52.50	x 12 Months	630
Item 20	COMPRESSOR, AIR	26.25	х	2	each	<u>  =</u>	52.50	x 12 Months	630
Item 21	COMPUTER-TELEMENTRY	26.25	х	1	each	=	26.25	x 12 Months	315
Item 22	Cryosurgical Unit	26.25	х	1	each	=	26.25	x 12 Months	315
Item 23	DEFIBRILLATOR	26.25	Х	6	each	=	157.50	x 12 Months	1,890
Item 24	Doppler Unit	26.25	×	4	each	=	105.00	x 12 Months	1,260
Item 25	DRILL, MEDICAL	26.25	х	1	each	=	26.25	x 12 Months	315
Item 26	DRYER, STERILE	26.25	х	1	each	=	26.25	x 12 Months	315
item 27	ELECTROCARDIOGRAPH	26.25	х	5	each	=	131.25	x 12 Months	1,575
Item 28	ELECTROSURGICAL UNIT	26.25	х	2	each	=		x 12 Months	630
Item 29	ENDOSCOPIC IRRIGATOR	26.25	×	1	each	=	26.25	x 12 Months	315
Item 30	ENDOSCOPIC VIDEO SYSTEM	26.25	×	1	each	=	26.25	x 12 Months	315
Item 31	FETAL MONITOR	26.25	х	1	each	=	26.25	x 12 Months	315
Item 32	FREEZER	26.25	х	2	each	=	52.50	x 12 Months	630

		Pricing per				Monthly	<u> </u>	Annual Pricing
item#	Item Description	each Year 1		Quantitiy		Pricing Year 1		Year 1
Item 33	Gel Warmer	26.25	Х	2 each	=	52.50	x 12 Months	630
ltem 34	GLUCOMETER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 35	HEMATOLOGY ANALYZER	1,126.67	х	2 each	=	2,253.33	x 12 Months	27,040
Item 36	PHARMACY CLEAN ROOM & HOOD	172.36	х	3 each	=	517.08	x 12 Months	6,205
Item 37	OR/Surgery Fume Hood	26.25	х	1 each	=	26.25	x 12 Months	315
Item 38	Humidifier, heated	26.25	Х	6 each	=	157.50	x 12 Months	1,890
Item 39	HYPO/HYPERTHERMIA UNIT	26.25	х	1 each	=	26.25	x 12 Months	315
Item 40	INCUBATOR, LAB	26.25	х	1 each	=	26.25	x 12 Months	315
Item 41	INFANT INCUBATOR	26.25	Х	2 each	=	52.50	x 12 Months	630
Item 42	INSTRUMENT AMPLIFIER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 43	Insufflator	26.25	Х	2 each	=	52.50	x 12 Months	630
item 44	Irrigator, Surgical	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 45	LAPAROSCOPE	26.25	Х	2 each	=	52.50	x 12 Months	630
Item 46	HEADLIGHT	26.25		2 each	=	52.50	x 12 Months	630
Item 47	LIFT, PATIENT, PORTABLE	26.25	х	5 each	=	131.25	x 12 Months	1,575
Item 48	LIGHTS	35.92	x :	20 each	=	718.33	x 12 Months	8,620
Item 49	MEDICAL GAS SYSTEM	1,041.67	х	1 each	=	1,041.67	x 12 Months	12,500
ltem 50	MICROSCOPE, LABORATORY	26.25	Х	3 each	=	78.75	x 12 Months	945
Item 51	MIXER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 52	MIXER, VORTEX	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 53	MONITOR, APNEA	26.25	х	1 each	=	26.25	x 12 Months	315
Item 54	MONITOR, DISPLAY	46.48		9 each	=	418.33	x 12 Months	5,020
Item 55	Monitor, NIBP, SaO2, Temp	26.25	Х	30 each	=	787.50	x 12 Months	9,450
Item 56	MONITOR, PATIENT	26.25	х	2 each	=	52.50	x 12 Months	630
Item 57	MONITOR, PATIENT	26.25	х	7 each	=	183.75	x 12 Months	2,205
Item 58	MONITOR, PHYSIOLOGICAL	26.25	х	7 each	=	183.75	x 12 Months	2,205
Item 59	NEBULIZER	26.25	Х	7 each		183.75	x 12 Months	2,205
Item 60	NEGATIVE PRESSURE WOUND PUMP	26.25	х	2 each	=	52.50	x 12 Months	630
Item 61	NURSE CALL SYSTEM	416.67		2 each	=	833.33	x 12 Months	10,000
Item 62	OXIMETER, PULSE	26.25	Х	13 each	=	341.25	x 12 Months	4,095
Item 63	OXYGEN ANALYZER	26.25	х	2 each	=	52.50	x 12 Months	630
Item 64	PRESSURE INFUSER	26.25	Х	1 each	=	26.25	x 12 Months	315

		Pricing per				Monthly		Annual Pricing
ltem#	Item Description	each Year 1		Quantitiy		Pricing Year 1		Year 1
item 65	Printer, Digital	26.25	х	5 each	=	131.25	x 12 Months	1,575
Item 66	PULMONARY FUNCTION ANALYZER	324.58	х	1 each	=	324.58	x 12 Months	3,895
Item 67	PUMP, ANTI-EMBOLISM	26.25	Х	10 each	=	262.50	x 12 Months	3,150
Item 68	PUMP, ENTERAL FEEDING	26.25	х	4 each	=	105.00	x 12 Months	1,260
Item 69	PUMP, HEATING PAD	26.25	х	4 each	=	105.00	x 12 Months	1,260
Item 70	PUMP, INFUSION	26.25	Х	43 each	=	1,128.75	x 12 Months	13,545
Item 71	PUMP, SUCTION	26.25	Х	6 each	=	157.50	x 12 Months	1,890
Item 72	PURIFIER, WATER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 73	REFRIGERATOR	26.25	х	10 each	=	262.50	x 12 Months	3,150
Item 74	RING CUTTER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 75	ROCKER	26.25	x	1 each	<u>  =</u>	26.25	x 12 Months	315
Item 76	SCALE	26.25	х		=		x 12 Months	3,465
item 77	SCRUB SINK	49.58	Х	2 each	=	99.17	x 12 Months	1,190
Item 78	SHAVER	26.25	X	2 each	=		x 12 Months	630
Item 79	SLIDE WARMER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 80	SPU PROCESSOR	26.25	х	1 each	=	26.25	x 12 Months	315
Item 81	STEAM GENERATOR	199.58	x	1 each	<u> =</u>	199.58	x 12 Months	2,395
Item 82	STERILIZATION PROC. INDICATOR	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 83	STERILIZER, STEAM	441.25	х	1 each	<u>  =</u>	441.25	x 12 Months	5,295
Item 84	STIMULATOR	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 85	STRETCHERS	26.25	х		<u>  =</u>	288.75	x 12 Months	3,465
Item 86	SUCTION, PORTABLE	26.25	х	2 each	=	52.50	x 12 Months	630
item 87	TABLE, EXAM	26.25	х	• • • • • • • • • • • • • • • • • • • •	<u>  = </u>		x 12 Months	5,355
Item 88	TABLE, OR	49.58	х	2 each	<u>  =</u>	99.17	x 12 Months	1,190
Item 89	TELEMETRY TRANSMITTER	26.25	х	8 each	=	210.00	x 12 Months	2,520
Item 90	TEMP CONTROL	26.25	Х	1 each	=	26.25	x 12 Months	315
ltem 91	TENT, OXYGEN	26.25	x	4 each	=	105.00	x 12 Months	1,260
ltem 92	THAWER, PLASMA	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 93	Thermometer	26.25	x	22 each	<u> =</u>	577.50	x 12 Months	6,930
item 94	TISSUE PROCESSOR	524.58	×	1 each	<u>  =</u>	524.58	x 12 Months	6,295
Item 95	Tourniquet	26.25	х	1 each	=	26.25	x 12 Months	315
Item 96	TRANSFORMER, HEADLIGHT	26.25	X	1 each	=	26.25	x 12 Months	315

	Pricing per					Monthly		Annual Pricing
em Description	each Year 1		QL	antitiy		Pricing Year 1		Year 1
ansformer, Wall, Oto/Opthalm	26.25	x	26	each	=	682.50	x 12 Months	8,190
JB, WHIRLPOOL	26.25	х	3	each	=	78.75	x 12 Months	945
LTRASONIC CLEANER	241.25	х	1	each	=	241.25	x 12 Months	2,895
LTRASONIC SURGICAL CUTTER/COA	26.25	х	1	each	=	26.25	x 12 Months	315
RINE ANALYZER	26.25	x	2	each	T	52.50	x 12 Months	630
ng speculum Light Illuminator	26.25	х	1	each	=	26.25	x 12 Months	315
ENTILATOR	188.47	х	6	each	=	1,130.83	x 12 Months	13,570
deo Display Processor	26.25	х	1	each	=	26.25	x 12 Months	315
DEO LARYNGOSCOPE	26.25	x	1	each	=	26.25	x 12 Months	315
EW BOX, XRAY	26.25	×	1	each	=	26.25	x 12 Months	315
armer	26.25	х	2	each	=	52.50	x 12 Months	630
ARMER, FLUID	26.25	х	10	each	=	262.50	x 12 Months	3,150
ARMER, INFANT	26.25	x	3	each	=	78.75	x 12 Months	945
ARMER, PATIENT	26.25	х	4	each	=	105.00	x 12 Months	1,260
ARMING CABINET	26.25	х	4	each	=	105.00	x 12 Months	1,260
ASHER / STERILIZER	441.25	X	2	each	=	882.50	x 12 Months	10,590
HIRLPOOL	26.25	X	2	each	=	52.50	x 12 Months	630
RAY VIEWER	26.25	Х	3	each	=	78.75	x 12 Months	945
ervice Support Agreement for Biomedical Equipment Inspection	Preventative	To	tei!	Pricina			Total Annual	
	,			_		24.039.58		288,475
	g speculum Light Illuminator NTILATOR Ieo Display Processor DEO LARYNGOSCOPE EW BOX, XRAY Inter ARMER, FLUID ARMER, INFANT ARMER, PATIENT ARMING CABINET ASHER / STERILIZER HIRLPOOL RAY VIEWER	Second   S	Second   S	Sepant   S	Sepeculum Light Illuminator   26.25   x   1   each	Sepeculum Light Illuminator   26.25   x   1   each   =     NTILATOR   188.47   x   6   each   =     NTILATOR   26.25   x   1   each   =     NTILATOR   26.25   x   1	Sepeculum Light Illuminator   26.25   x   1   each   =   26.25     NTILATOR   188.47   x   6   each   =   1,130.83     NTILATOR   26.25   x   1   each   =   26.25     NTILA	Sepeculum Light Illuminator   26.25   x   1   each   =   26.25   x   12   Months

		Pricing per				Monthly		Annual Pricing
Item #	Item Description	each Year 2		Quantitiy		Pricing Year 2		Year 2
Item 1	Aerosol Heater	26.25	х	1 each	=	26.25	x 12 Months	315
Item 2	ANESTHESIA MACHINE	274.58	х	2 each	=	549.17	x 12 Months	6,590
Item 3	Anesthesia Vaporizer (desflura	26.25	х	7 each	=	183.75	x 12 Months	2,205
Item 4	ASPIRATOR	26.25	х	4 each	=	105.00	x 12 Months	1,260
Item 5	AUDIOMETER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 6	Baby Wipe Warmer	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 7	BASSINET	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 8	BATH, DRY	26.25	Х	1 each	=		x 12 Months	315
Item 9	BED, ELECTRIC	26.25	X	108 each	=	2,835.00	x 12 Months	34,020
ltem 10	BLADDER SCANNER	26.25	х	1 each	=	26.25	x 12 Months	315
item 11	BLOOD GAS ANALYZER	26.25	x	2 each	=	52.50	x 12 Months	630
ltem 12	BLOOD GLUCOSE ANALYZER	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 13	Camera, Video	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 14	CART, CRASH	26.25	x	6 each	<u>  =</u>	157.50	x 12 Months	1,890
ltem 15	CENTRIFUGE	26.25	Х	2 each	=	52.50	x 12 Months	630
Item 16	CHARGING CRADLE/TRANPORT BASE	26.25	х	6 each	<u> </u> =	157.50	x 12 Months	1,890
Item 17	HOOD CERTIFICATION-CHEMICAL EXPOSURE TESTING	83.96	х	2 each	=	167.92	x 12 Months	2,015
Item 18	COLPOSCOPE	26.25	Х	7 each	=	183.75	x 12 Months	2,205
Item 19	COMPRESSOR UNIT, POWER	26.25	x	2 each	=	52.50	x 12 Months	630
Item 20	COMPRESSOR, AIR	26.25	х	2 each	=	52.50	x 12 Months	630
Item 21	COMPUTER-TELEMENTRY	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 22	Cryosurgical Unit	26.25	х	1 each	<u> </u> =	26.25	x 12 Months	315
Item 23	DEFIBRILLATOR	26.25	Х	6 each	=	157.50	x 12 Months	1,890
Item 24	Doppler Unit	26.25	Х	4 each	=	105.00	x 12 Months	1,260
Item 25	DRILL, MEDICAL	26.25	×	1 each	=		x 12 Months	315
Item 26	DRYER, STERILE	26.25	1	1 each	=	26.25	x 12 Months	315
Item 27	ELECTROCARDIOGRAPH	26.25	х	5 each	=	131.25	x 12 Months	1,575
Item 28	ELECTROSURGICAL UNIT	26.25	х	2 each	=		x 12 Months	630
Item 29	ENDOSCOPIC IRRIGATOR	26.25	x	1 each	L≡	1		315
Item 30	ENDOSCOPIC VIDEO SYSTEM	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 31	FETAL MONITOR	26.25	Х	1 each	=	26.25	x 12 Months	315
Item 32	FREEZER	26.25	х	2 each	=	52.50	x 12 Months	630

		Pricing per					Monthly		Annual Pricing
ltem #	Item Description	each Year 2		Qı	uantitiy		Pricing Year 2		Year 2
Item 33	Gel Warmer	26.25	х	2	each	=		x 12 Months	630
Item 34	GLUCOMETER	26.25	х	1	each	=	26.25	x 12 Months	315
Item 35	HEMATOLOGY ANALYZER	1,126.67	х	2	each	=	2,253.33	x 12 Months	27,040
Item 36	PHARMACY CLEAN ROOM & HOOD	172.36	х	3	each	=	517.08	x 12 Months	6,205
Item 37	Hospital Med Gas	26.25	х	1	each	=	26.25	x 12 Months	315
Item 38	Humidifier, heated	26.25	×	6	each	=	157.50	x 12 Months	1,890
Item 39	HYPO/HYPERTHERMIA UNIT	26.25	x	1	each	=	26.25	x 12 Months	315
Item 40	INCUBATOR, LAB	26.25	х	1	each	=	26.25	x 12 Months	315
ltem 41	INFANT INCUBATOR	26.25	x	2	each	=	52.50	x 12 Months	630
item 42	INSTRUMENT AMPLIFIER	26.25	х	1	each	=	26.25	x 12 Months	315
Item 43	Insufflator	26.25	×	2	each	=		x 12 Months	630
Item 44	Irrigator, Surgical	26.25	×	1	each	=	26.25	x 12 Months	315
Item 45	LAPAROSCOPE	26.25	х		each	<u>  = </u>	52.50	x 12 Months	630
Item 46	HEADLIGHT	26.25	x	2	each	=	52.50	x 12 Months	630
item 47	LIFT, PATIENT, PORTABLE	26.25	х	5	each	=	131.25	x 12 Months	1,575
Item 48	LIGHTS	35.92	x	20	each	=	718.33	x 12 Months	8,620
Item 49	MEDICAL GAS SYSTEM	1,041.67	x	1	each	=	1,041.67	x 12 Months	12,500
Item 50	MICROSCOPE, LABORATORY	26.25	×	3	each	=	78.75	x 12 Months	945
Item 51	MIXER	26.25	х	1	each	=	26.25	x 12 Months	315
Item 52	MIXER, VORTEX	26.25	x	1	each		26.25	x 12 Months	315
item 53	MONITOR, APNEA	26.25	×		each	=	26.25	x 12 Months	315
Item 54	MONITOR, DISPLAY	46.48	x		each		418.33	x 12 Months	5,020
Item 55	Monitor, NIBP, SaO2, Temp	26.25	х	30	each	=	787.50	x 12 Months	9,450
Item 56	MONITOR, PATIENT	26.25	x		each	=	52.50	x 12 Months	630
Item 57	MONITOR, PATIENT	26.25	×	7	each	<u>  =</u>	183.75	x 12 Months	2,205
Item 58	MONITOR, PHYSIOLOGICAL	26.25	×	7	each	=	183.75	x 12 Months	2,205
Item 59	NEBULIZER	26.25	×	7	each	=	183.75	x 12 Months	2,205
item 60	NEGATIVE PRESSURE WOUND PUMP	26.25	х		each	=	52.50	x 12 Months	630
Item 61	NURSE CALL SYSTEM	416.67	x		each	<u> </u> =	833.33	x 12 Months	10,000
Item 62	OXIMETER, PULSE	26.25	Х	13	each	=	341.25	x 12 Months	4,095
Item 63	OXYGEN ANALYZER	26.25	X		each	=	52.50	x 12 Months	630
Item 64	PRESSURE INFUSER	26.25	x	1	each	]=	26.25	x 12 Months	315

		Pricing per				Monthly		Annual Pricing
ltem #	Item Description	each Year 2		Quantitiy	/	Pricing Year 2		Year 2
Item 65	Printer, Digital	26.25	х	5 each	=	131.25	x 12 Months	1,575
Item 66	PULMONARY FUNCTION ANALYZER	324.58	Х	1 each	=	324.58	x 12 Months	3,895
Item 67	PUMP, ANTI-EMBOLISM	26.25	х	10 each	=	262.50	x 12 Months	3,150
Item 68	PUMP, ENTERAL FEEDING	26.25	Х	4 each	=	105.00	x 12 Months	1,260
Item 69	PUMP, HEATING PAD	26.25	х	4 each	=	105.00	x 12 Months	1,260
Item 70	PUMP, INFUSION	26.25	x	43 each	=	1,128.75	x 12 Months	13,545
Item 71	PUMP, SUCTION	26.25	х	6 each	=	157.50	x 12 Months	1,890
Item 72	PURIFIER, WATER	26.25	х	1 each	=	26.25	x 12 Months	315
Item 73	REFRIGERATOR	26.25	х	10 each		262.50	x 12 Months	3,150
Item 74	RING CUTTER	26.25	Х	1 each		26.25	x 12 Months	315
Item 75	ROCKER	26.25	х	1 each	=	26.25	x 12 Months	315
Item 76	SCALE	26.25	Х	11 each	=	288.75	x 12 Months	3,465
Item 77	SCRUB SINK	49.58	x	2 each	=	99.17	x 12 Months	1,190
Item 78	SHAVER	26.25	×	2 each	=	52.50	x 12 Months	630
Item 79	SLIDE WARMER	26.25	х	1 each	=	26.25	x 12 Months	315
Item 80	SPU PROCESSOR	26.25	х	1 each		26.25	x 12 Months	315
Item 81	STEAM GENERATOR	199.58	х	1 each		199.58	x 12 Months	2,395
Item 82	STERILIZATION PROC. INDICATOR	26.25	х	1 each	=	26.25	x 12 Months	315
Item 83	STERILIZER, STEAM	441.25	х	1 each	=	441.25	x 12 Months	5,295
Item 84	STIMULATOR	26.25	х	1 each	=	26.25	x 12 Months	315
Item 85	STRETCHERS	26.25	x	11 each	=	288.75	x 12 Months	3,465
Item 86	SUCTION, PORTABLE	26.25	х	2 each	=	52.50	x 12 Months	630
Item 87	TABLE, EXAM	26.25	x	17 each	=	446.25	x 12 Months	5,355
Item 88	TABLE, OR	49.58	Х	2 each	=	99.17	x 12 Months	1,190
item 89	TELEMETRY TRANSMITTER	26.25	х	8 each	=	210.00	x 12 Months	2,520
Item 90	TEMP CONTROL	26.25	х	1 each	=	26.25	x 12 Months	315
item 91	TENT, OXYGEN	26.25	х	4 each	=	105.00	x 12 Months	1,260
Item 92	THAWER, PLASMA	26.25	х	1 each		26.25	x 12 Months	315
Item 93	Thermometer	26.25	х	22 each	=	577.50	x 12 Months	6,930
Item 94	TISSUE PROCESSOR	524.58	х	1 each	_	524.58	x 12 Months	6,295
Item 95	Tourniquet	26.25	х	1 each	-	26.25	x 12 Months	315
Item 96	TRANSFORMER, HEADLIGHT	26.25	х	1 each	=	26.25	x 12 Months	315

		Pricing per	Π				Monthly		Annual Pricing
Item #	Item Description	each Year 2		Qı	uantitiy		Pricing Year 2		Year 2
Item 97	Transformer, Wall, Oto/Opthalm	26.25	Х	26	each	=	682.50	x 12 Months	8,190
Item 98	TUB, WHIRLPOOL	26.25	X	3	each	=	78.75	x 12 Months	945
Item 99	ULTRASONIC CLEANER	241.25	×	1	each	<b> =</b>	241.25	x 12 Months	2,895
Item 100	ULTRASONIC SURGICAL CUTTER/COA	26.25	×	1	each	=	26.25	x 12 Months	315
ltem 101	URINE ANALYZER	26.25	x	2	each	=	52.50	x 12 Months	630
Item 102	Vag speculum Light Illuminator	26.25	x	1	each	=	26.25	x 12 Months	315
Item 103	VENTILATOR	188.47	x	6	each	=	1,130.83	x 12 Months	13,570
Item 104	Video Display Processor	26.25	×	1	each	=	26.25	x 12 Months	315
Item 105	VIDEO LARYNGOSCOPE	26.25	х	1	each	=	26.25	x 12 Months	315
item 106	VIEW BOX, XRAY	26.25	X	1	each	=	26.25	x 12 Months	315
Item 107	Warmer	26.25	x	2	each	=	52.50	x 12 Months	630
Item 108	WARMER, FLUID	26.25	x	10	each	=	262.50	x 12 Months	3,150
Item 109	WARMER, INFANT	26.25	x	3	each	=	78.75	x 12 Months	945
Item 110	WARMER, PATIENT	26.25	х	4	each	=	105.00	x 12 Months	1,260
ltem 111	WARMING CABINET	26.25	х	4	each	=	105.00	x 12 Months	1,260
Item 112	WASHER / STERILIZER	441.25	х	2	each	=	882.50	x 12 Months	10,590
item 113	WHIRLPOOL	26.25	x	2	each	=	52.50	x 12 Months	630
Item 114	X-RAY VIEWER	26.25	х	3	each	=	78.75	x 12 Months	945
4.1.1	Service Support Agreement for Biomedical Equipment Inspection	, Preventative	То	otal	Pricing			Total Annual	
Year 2	Maintenance, Parts, and Repair		ре	r M	onth		24,039.58	Pricing	288,475

		Pricing per				Monthly		Annual Pricing
Item #	Item Description	each Year 3		Quantitiy		Pricing Year 3		Year 3
Item 1	Aerosol Heater	26.67	х	1 each	=	26.67	x 12 Months	320
ltem 2	ANESTHESIA MACHINE	278.71		2 each	=	557.42	x 12 Months	6,689
Item 3	Anesthesia Vaporizer (desflura	26.67	х	7 each	=	186.67	x 12 Months	2,240
Item 4	ASPIRATOR	26.67	х	4 each	=	106.67	x 12 Months	1,280
Item 5	AUDIOMETER	26.67	Х	1 each	=	26.67	x 12 Months	320
Item 6	Baby Wipe Warmer	26.67	х	1 each	=	26.67	x 12 Months	320
Item 7	BASSINET	26.67	x	1 each	=	26.67	x 12 Months	320
Item 8	BATH, DRY	26.67		1 each	=	26.67	x 12 Months	320
Item 9	BED, ELECTRIC	26.67	x 1	08 each	=	2,880.00	x 12 Months	34,560
Item 10	BLADDER SCANNER	26.67	х	1 each	=	26.67	x 12 Months	320
ltem 11	BLOOD GAS ANALYZER	26.67	Х	2 each	=	53.33	x 12 Months	640
Item 12	BLOOD GLUCOSE ANALYZER	26.67	Х	1 each	=	26.67	x 12 Months	320
Item 13	Camera, Video	26.67	Х	1 each	=	26.67	x 12 Months	320
Item 14	CART, CRASH	26.67	Х	6 each	=	160.00	x 12 Months	1,920
Item 15	CENTRIFUGE	26.67	х	2 each	=	53.33	x 12 Months	640
Item 16	CHARGING CRADLE/TRANPORT BASE	26.67	х	6 each	=	160.00	x 12 Months	1,920
ltem 17	HOOD CERTIFICATION-CHEMICAL EXPOSURE TESTING	85.21	х		=	170.42	x 12 Months	2,045
item 18	COLPOSCOPE	26.67	Х	7 each	=	186.67	x 12 Months	2,240
Item 19	COMPRESSOR UNIT, POWER	26.67	х	2 each	=	53.33	x 12 Months	640
Item 20	COMPRESSOR, AIR	26.67	х	2 each	=	53.33	x 12 Months	640
Item 21	COMPUTER-TELEMENTRY	26.67	Х	1 each	=	26.67	x 12 Months	320
Item 22	Cryosurgical Unit	26.67	х	1 each	=	26.67	x 12 Months	320
Item 23	DEFIBRILLATOR	26.67	х	6 each	=	160.00	x 12 Months	1,920
Item 24	Doppler Unit	26.67	х	4 each	=	106.67	x 12 Months	1,280
Item 25	DRILL, MEDICAL	26.67	х	1 each	=	26.67	x 12 Months	320
Item 26	DRYER, STERILE	26.67	×	1 each	=	26.67	x 12 Months	320
Item 27	ELECTROCARDIOGRAPH	26.67	х	5 each	=	133.33	x 12 Months	1,600
Item 28	ELECTROSURGICAL UNIT	26.67	х	2 each	=	53.33	x 12 Months	640
Item 29	ENDOSCOPIC IRRIGATOR	26.67	х	1 each	=	26.67	x 12 Months	320
Item 30	ENDOSCOPIC VIDEO SYSTEM	26.67	х	1 each	=	26.67	x 12 Months	320
Item 31	FETAL MONITOR	26.67	х	1 each	=	26.67	x 12 Months	320
Item 32	FREEZER	26.67	х	2 each	=	53.33	x 12 Months	640

Item 33 Gel W Item 34 GLUC Item 35 HEMA Item 36 PHAR Item 37 Hospi Item 38 Humid Item 39 HYPO Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	Marmer  JCOMETER  MATOLOGY ANALYZER  ARMACY CLEAN ROOM & HOOD  Spital Med Gas  midifier, heated  PO/HYPERTHERMIA UNIT  UBATOR, LAB  ANT INCUBATOR  TRUMENT AMPLIFIER  Jefflator  Jator, Surgical  PAROSCOPE  ADLIGHT	26.67 26.67 26.67 26.67 26.67 26.67	X	2 1 2 3 1 6 1 1 2	each each each each each each each each	= = = = = = = = = = = = = = = = = = = =	26.67 2,287.17 524.83 26.67 160.00 26.67 26.67	x 12 Months	Year 3  640  320  27,446  6,298  320  1,920  320
Item 34 GLUC Item 35 HEMA Item 36 PHAR Item 37 Hospi Item 38 Humin Item 39 HYPO Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	JCOMETER MATOLOGY ANALYZER ARMACY CLEAN ROOM & HOOD spital Med Gas midifier, heated PO/HYPERTHERMIA UNIT UBATOR, LAB ANT INCUBATOR TRUMENT AMPLIFIER ufflator gator, Surgical PAROSCOPE	26.67 1,143.58 174.94 26.67 26.67 26.67 26.67 26.67 26.67 26.67 26.67	X	1 2 3 1 6 1 1 2	each each each each each each each each	= = = =	26.67 2,287.17 524.83 26.67 160.00 26.67 26.67	x 12 Months	320 27,446 6,298 320 1,920
Item 35 HEMA Item 36 PHAR Item 37 Hospi Item 38 Humid Item 39 HYPO Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	MATOLOGY ANALYZER ARMACY CLEAN ROOM & HOOD spital Med Gas midifier, heated PO/HYPERTHERMIA UNIT UBATOR, LAB ANT INCUBATOR TRUMENT AMPLIFIER ufflator gator, Surgical PAROSCOPE	1,143.58 174.94 26.67 26.67 26.67 26.67 26.67 26.67 26.67 26.67	x x x x x x x	3 1 6 1 1 2	each each each each each each	= = = =	2,287.17 524.83 26.67 160.00 26.67 26.67	x 12 Months x 12 Months x 12 Months x 12 Months x 12 Months	27,446 6,298 320 1,920
Item 36 PHAR Item 37 Hospi Item 38 Humin Item 39 HYPO Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	ARMACY CLEAN ROOM & HOOD spital Med Gas midifier, heated PO/HYPERTHERMIA UNIT UBATOR, LAB ANT INCUBATOR TRUMENT AMPLIFIER ufflator gator, Surgical PAROSCOPE	174.94 26.67 26.67 26.67 26.67 26.67 26.67 26.67 26.67	x x x x x x x	3 1 6 1 1 2	each each each each each	= = =	524.83 26.67 160.00 26.67 26.67	x 12 Months x 12 Months x 12 Months x 12 Months	6,298 320 1,920
Item 37 Hospi Item 38 Humid Item 39 HYPO Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	spital Med Gas midifier, heated PO/HYPERTHERMIA UNIT UBATOR, LAB ANT INCUBATOR TRUMENT AMPLIFIER ufflator gator, Surgical PAROSCOPE	26.67 26.67 26.67 26.67 26.67 26.67 26.67 26.67	x x x x x x	1 6 1 1 2	each each each each	= = =	26.67 160.00 26.67 26.67	x 12 Months x 12 Months x 12 Months	320 1,920
Item 38 Humic Item 39 HYPO Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	nidifier, heated PO/HYPERTHERMIA UNIT UBATOR, LAB ANT INCUBATOR TRUMENT AMPLIFIER ufflator gator, Surgical PAROSCOPE	26.67 26.67 26.67 26.67 26.67 26.67 26.67	x x x x x	6 1 1 2	each each each	= =	160.00 26.67 26.67	x 12 Months x 12 Months	1,920
Item 39 HYPO Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 MONI Item 56 MONI Item 57 MONI	PO/HYPERTHERMIA UNIT UBATOR, LAB ANT INCUBATOR TRUMENT AMPLIFIER ufflator pator, Surgical PAROSCOPE	26.67 26.67 26.67 26.67 26.67 26.67	x x x x	1 1 2 1	each each	=	26.67 26.67	x 12 Months	
Item 40 INCUI Item 41 INFAN Item 42 INSTF Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	UBATOR, LAB ANT INCUBATOR TRUMENT AMPLIFIER ufflator gator, Surgical PAROSCOPE	26.67 26.67 26.67 26.67 26.67 26.67	x x x	1 2 1	each each	=	26.67	<del></del>	320
Item 41 INFANITEM 42 INSTERM 43 Insufficem 44 Irrigatem 45 LAPAITEM 46 HEADITEM 47 LIFT, Item 48 LIGHTITEM 49 MEDITEM 50 MICRITEM 51 MIXEITEM 52 MIXEITEM 53 MONITEM 54 MONITEM 55 MONITEM 56 MONITEM 57 MONITEM	ANT INCUBATOR TRUMENT AMPLIFIER ufflator pator, Surgical PAROSCOPE	26.67 26.67 26.67 26.67 26.67	x x x	2	each	Ξ		40.84	
Item 42 INSTR Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	TRUMENT AMPLIFIER  ufflator  pator, Surgical  PAROSCOPE	26.67 26.67 26.67 26.67	x x	1		-		x 12 Months	320
Item 43 Insuff Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	ufflator gator, Surgical PAROSCOPE	26.67 26.67 26.67	x		each		53.33	x 12 Months	640
Item 44 Irrigat Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGH Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	pator, Surgical PAROSCOPE	26.67 26.67	<b></b>	2		=	26.67	x 12 Months	320
Item 45 LAPA Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	PAROSCOPE	26.67	Х	<u></u>	each	=	53.33	x 12 Months	640
Item 46 HEAD Item 47 LIFT, Item 48 LIGHT Item 49 MEDI Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI			1	1	each	=	26.67	x 12 Months	320
Item 47 LIFT, Item 48 LIGHT Item 49 MEDII Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	ADLIGHT		Х	2	each	III	53.33	x 12 Months	640
Item 48 LIGHT Item 49 MEDIITEM 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONIITEM 54 MONIITEM 55 MONIITEM 56 MONIITEM 57 MONI		26.67	х	2	each	=	53.33	x 12 Months	640
Item 49 MEDII Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	T, PATIENT, PORTABLE	26.67	х	5	each	=	133.33	x 12 Months	1,600
Item 50 MICR Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	HTS	36.48	х	20	each	=	729.50	x 12 Months	8,754
Item 51 MIXE Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	DICAL GAS SYSTEM	1,057.33	х	1	each	=	1,057.33	x 12 Months	12,688
Item 52 MIXE Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	CROSCOPE, LABORATORY	26.67	х	3	each	=	80.00	x 12 Months	960
Item 53 MONI Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	ER	26.67	X	1	each	=	26.67	x 12 Months	320
Item 54 MONI Item 55 Monit Item 56 MONI Item 57 MONI	ER, VORTEX	26.67	Х	1	each	=	26.67	x 12 Months	320
Item 55 Monit Item 56 MONI Item 57 MONI	NITOR, APNEA	26.67	х	1	each	=	26.67	x 12 Months	320
Item 56 MONI Item 57 MONI	NITOR, DISPLAY	47.18	х	9	each	=	424.58	x 12 Months	5,095
Item 57 MONI	nitor, NIBP, SaO2, Temp	26.67	x	30	each	=	800.00	x 12 Months	9,600
	NITOR, PATIENT	26.67	х	2	each	=	53.33	x 12 Months	640
	NITOR, PATIENT	26.67	х	7	each	=	186.67	x 12 Months	2,240
Item 58 MONI	NITOR, PHYSIOLOGICAL	26.67	х	7	each	=	186.67	x 12 Months	2,240
Item 59 NEBL		26.67	x	7	each	=	186.67	x 12 Months	2,240
Item 60 NEGA	BULIZER	26.67	x	2	each	=	53.33	x 12 Months	640
Item 61 NURS	BULIZER GATIVE PRESSURE WOUND PUMP	422.92	х	2	each	=	845.83	x 12 Months	10,150
Item 62 OXIM			Х	13	each	=	346.67	x 12 Months	4,160
Item 63 OXYO	GATIVE PRESSURE WOUND PUMP	26.67		7		=	53 33	x 12 Months	640
Item 64 PRES	GATIVE PRESSURE WOUND PUMP RSE CALL SYSTEM	26.67 26.67	x	2	each		30.00	12 MOININ	040

		Pricing per					Monthly	1	Annual Pricing
ltem #	Item Description	each Year 3		Qua	antitiy		Pricing Year 3		Year 3
Item 65	Printer, Digital	26.67	Х	5	each	=	133.33	x 12 Months	1,600
Item 66	PULMONARY FUNCTION ANALYZER		х		each	=	329.42	x 12 Months	3,953
Item 67	PUMP, ANTI-EMBOLISM	26.67	х	10	each	=	266.67	x 12 Months	3,200
Item 68	PUMP, ENTERAL FEEDING	26.67	х	4	each	=	106.67	x 12 Months	1,280
Item 69	PUMP, HEATING PAD	26.67	х	4	each	=	106.67	x 12 Months	1,280
Item 70	PUMP, INFUSION	26.67	х	43	each	=	1,146.67	x 12 Months	13,760
Item 71	PUMP, SUCTION	26.67	х	6	each	=	160.00	x 12 Months	1,920
Item 72	PURIFIER, WATER	26.67	х	1 .	each	=	26.67	x 12 Months	320
Item 73	REFRIGERATOR	26.67	х	10	each	=	266.67	x 12 Months	3,200
Item 74	RING CUTTER	26.67	х	1 (	each	=	26.67	x 12 Months	320
item 75	ROCKER	26.67	x	1 .	each	=	26.67	x 12 Months	320
Item 76	SCALE	26.67	х	11	each	=	293.33	x 12 Months	3,520
Item 77	SCRUB SINK	50.33	×	2	each	=	100.67	x 12 Months	1,208
Item 78	SHAVER	26.67	х	2	each	=	53.33	x 12 Months	640
Item 79	SLIDE WARMER	26.67	х	1 .	each	=	26.67	x 12 Months	320
Item 80	SPU PROCESSOR	26.67	х	1	each	=	26.67	x 12 Months	320
Item 81	STEAM GENERATOR	202.58	х	1	each	=	202.58	x 12 Months	2,431
Item 82	STERILIZATION PROC. INDICATOR	26.67	х	1	each	=	26.67	x 12 Months	320
Item 83	STERILIZER, STEAM	447.83	х	1	each	=	447.83	x 12 Months	5,374
item 84	STIMULATOR	26.67	x	1	each	=	26.67	x 12 Months	320
Item 85	STRETCHERS	26.67	x		each	=	293.33	x 12 Months	3,520
Item 86	SUCTION, PORTABLE	26.67			each	=	53.33	x 12 Months	640
item 87	TABLE, EXAM	26.67			each	=	453.33	x 12 Months	5,440
Item 88	TABLE, OR	50.33	x	2	each	=	100.67	x 12 Months	1,208
Item 89	TELEMETRY TRANSMITTER	26.67	х	8	each	=	213.33	x 12 Months	2,560
Item 90	TEMP CONTROL	26.67	x	1	each	=	26.67	x 12 Months	320
Item 91	TENT, OXYGEN	26.67	х	4	each	=	106.67	x 12 Months	1,280
Item 92	THAWER, PLASMA	26.67	x	1	each	=	26.67	x 12 Months	320
Item 93	Thermometer	26.67	—		each	=	586.67	x 12 Months	7,040
Item 94	TISSUE PROCESSOR	532.42	х	1	each	=	532.42	x 12 Months	6,389
Item 95	Tourniquet	26.67	1	1	each	=	26.67	x 12 Months	320
Item 96	TRANSFORMER, HEADLIGHT	26.67	x	1	each	=	26.67	x 12 Months	320

		Pricing per					Monthly		Annual Pricing
ltem#	Item Description	each Year 3		Qι	uantitiy	1	Pricing Year 3		Year 3
Item 97	Transformer, Wall, Oto/Opthalm	26.67	х	26	each	=	693.33	x 12 Months	8,320
Item 98	TUB, WHIRLPOOL	26.67	х	3	each	_	80.00	x 12 Months	960
Item 99	ULTRASONIC CLEANER	244.83	X	1	each	=	244.83	x 12 Months	2,938
Item 100	ULTRASONIC SURGICAL CUTTER/COA	26.67	х	1	each	=	26.67	x 12 Months	320
Item 101	URINE ANALYZER	26.67	х	2	each	=	53.33	x 12 Months	640
Item 102	Vag speculum Light Illuminator	26.67	х	1	each	=	26.67	x 12 Months	320
Item 103	VENTILATOR	191.31	х	6	each	=	1,147.83	x 12 Months	13,774
item 104	Video Display Processor	26.67	х	1	each	=	26.67	x 12 Months	320
Item 105	VIDEO LARYNGOSCOPE	26.67	х	1	each	=	26.67	x 12 Months	320
Item 106	VIEW BOX, XRAY	26.67	x	1	each	=	26.67	x 12 Months	320
Item 107	Warmer	26.67	×	2	each	=	53.33	x 12 Months	640
Item 108	WARMER, FLUID	26.67	х	10	each	=	266.67	x 12 Months	3,200
Item 109	WARMER, INFANT	26.67	Х	3	each	=	80.00	x 12 Months	960
ltem 110	WARMER, PATIENT	26.67	х	4	each	=	106.67	x 12 Months	1,280
Item 111	WARMING CABINET	26.67	Х	4	each	=	106.67	x 12 Months	1,280
Item 112	WASHER / STERILIZER	447.88	X	2	each	=	895.75	x 12 Months	10,749
Item 113	WHIRLPOOL	26.67	х	2	each	=	53.33	x 12 Months	640
Item 114	X-RAY VIEWER	26.67	x	3	each	=	80.00	x 12 Months	960
4.1.1	Service Support Agreement for Biomedical Equipment Inspection	, Preventative	To	tal	Pricing			  Total Annual	
Year 3	Maintenance, Parts, and Repair		1		onth		24,412.42	Pricing	292,949

		Pricing per				Monthly		Annual Pricing
ltem#	Item Description	each Year 4		Quantitiy		Pricing Year 4		Year 4
Item 1	Aerosol Heater	27.08	х	1 each	=	27.08	x 12 Months	325
Item 2	ANESTHESIA MACHINE	282.88	х	2 each	=	565.75	x 12 Months	6,789
Item 3	Anesthesia Vaporizer (desflura	27.08	х	7 each	=	189.58	x 12 Months	2,275
Item 4	ASPIRATOR	27.08	Х	4 each	=	108.33	x 12 Months	1,300
ltem 5	AUDIOMETER	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 6	Baby Wipe Warmer	27.08	x	1 each	=	27.08	x 12 Months	325
Item 7	BASSINET	27.08	x	1 each	=	27.08	x 12 Months	325
Item 8	BATH, DRY	27.08	1.,	1 each	=	27.08	x 12 Months	325
Item 9	BED, ELECTRIC	27.08	x :	108 each	=	2,925.00	x 12 Months	35,100
Item 10	BLADDER SCANNER	27.08	х	1 each	=	27.08	x 12 Months	325
item 11	BLOOD GAS ANALYZER	27.08	Х	2 each	=	54.17	x 12 Months	650
Item 12	BLOOD GLUCOSE ANALYZER	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 13	Camera, Video	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 14	CART, CRASH	27.08	Х	6 each	=	162.50	x 12 Months	1,950
Item 15	CENTRIFUGE	27.08	х	2 each	=	54.17	x 12 Months	650
Item 16	CHARGING CRADLE/TRANPORT BASE	27.08	Х	6 each	=	162.50	x 12 Months	1,950
item 17	HOOD CERTIFICATION-CHEMICAL EXPOSURE TESTING	86.50	х		=	173.00	x 12 Months	2,076
Item 18	COLPOSCOPE	27.08	х	7 each	=	189.58	x 12 Months	2,275
Item 19	COMPRESSOR UNIT, POWER	27.08	х	2 each	<u> </u> =	54.17	x 12 Months	650
Item 20	COMPRESSOR, AIR	27.08	X	2 each	=	54.17	x 12 Months	650
Item 21	COMPUTER-TELEMENTRY	27.08	X	1 each	=	27.08	x 12 Months	325
Item 22	Cryosurgical Unit	27.08	Х	1 each	_=	27.08	x 12 Months	325
Item 23	DEFIBRILLATOR	27.08	Х	6 each	=	162.50	x 12 Months	1,950
Item 24	Doppler Unit	27.08	х	4 each	=	108.33	x 12 Months	1,300
Item 25	DRILL, MEDICAL	27.08	х	1 each	=	27.08	x 12 Months	325
Item 26	DRYER, STERILE	27.08	х	1 each	=	27.08	x 12 Months	325
Item 27	ELECTROCARDIOGRAPH	27.08	х	5 each	=	135.42	x 12 Months	1,625
Item 28	ELECTROSURGICAL UNIT	27.08	х	2 each	=	54.17	x 12 Months	650
Item 29	ENDOSCOPIC IRRIGATOR	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 30	ENDOSCOPIC VIDEO SYSTEM	27.08	X	1 each	=	27.08	x 12 Months	325
Item 31	FETAL MONITOR	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 32	FREEZER	27.08	x	2 each	=	54.17	x 12 Months	650

		Pricing per					Monthly		Annual Pricing
ltem #	Item Description	each Year 4		Qı	uantitiy		Pricing Year 4		Year 4
Item 33	Gel Warmer	27.08	Х	2	each	=	54.17	x 12 Months	650
Item 34	GLUCOMETER	27.08	х	1	each	=	27.08	x 12 Months	325
Item 35	HEMATOLOGY ANALYZER	1,160.71	х	2	each	=	2,321.42	x 12 Months	27,857
Item 36	PHARMACY CLEAN ROOM & HOOD	177.58	Х	3	each	=	532.75	x 12 Months	6,393
Item 37	Hospital Med Gas	27.08	х	1	each	=	27.08	x 12 Months	325
Item 38	Humidifier, heated	27.08	X	6	each	=	162.50	x 12 Months	1,950
Item 39	HYPO/HYPERTHERMIA UNIT	27.08	х	1	each	=	1	x 12 Months	325
Item 40	INCUBATOR, LAB	27.08	Х	1	each	=	27.08	x 12 Months	325
Item 41	INFANT INCUBATOR	27.08	x	2	each	=	54.17	x 12 Months	650
Item 42	INSTRUMENT AMPLIFIER	27.08	×	1	each	=	27.08	x 12 Months	325
Item 43	Insufflator	27.08	х	2	each	=	54.17	x 12 Months	650
Item 44	Irrigator, Surgical	27.08	х	1	each	=	27.08	x 12 Months	325
Item 45	LAPAROSCOPE	27.08	х	2	each	=	54.17	x 12 Months	650
Item 46	HEADLIGHT	27.08	х	2	each	<u> </u> =	54.17	x 12 Months	650
Item 47	LIFT, PATIENT, PORTABLE	27.08	х	5	each	=	135.42	x 12 Months	1,625
Item 48	LIGHTS	37.03	х	20	each	=	740.67	x 12 Months	8,888
Item 49	MEDICAL GAS SYSTEM	1,073.17	х	1	each	=	1,073.17	x 12 Months	12,878
Item 50	MICROSCOPE, LABORATORY	27.08	x	3	each	=	81.25	x 12 Months	975
Item 51	MIXER	27.08	×	1	each	=	27.08	x 12 Months	325
Item 52	MIXER, VORTEX	27.08	x	1	each	=	27.08	x 12 Months	325
Item 53	MONITOR, APNEA	27.08		1	each	<u>  =</u>	27.08	x 12 Months	325
Item 54	MONITOR, DISPLAY	47.88	х		each		430.92	x 12 Months	5,171
Item 55	Monitor, NIBP, SaO2, Temp	27.08		30	each	<u> </u> =		x 12 Months	9,750
Item 56	MONITOR, PATIENT	27.08	x	2	each	<u> </u> =	54.17	x 12 Months	650
Item 57	MONITOR, PATIENT	27.08	x	7	each	=	189.58	x 12 Months	2,275
Item 58	MONITOR, PHYSIOLOGICAL	27.08	х	7	each	<u> </u> =	189.58	x 12 Months	2,275
Item 59	NEBULIZER	27.08	x	7	each	=	189.58	x 12 Months	2,275
Item 60	NEGATIVE PRESSURE WOUND PUMP	27.08	X	2	each	=	54.17	x 12 Months	650
Item 61	NURSE CALL SYSTEM	429.25	x		each	=			10,302
Item 62	OXIMETER, PULSE	27.08	х	13	each	=	352.08	x 12 Months	4,225
item 63	OXYGEN ANALYZER	27.08	х	2	each	=	54.17	x 12 Months	650
Item 64	PRESSURE INFUSER	27.08	Х	1	each	=	27.08	x 12 Months	325

		Pricing per			Τ	Monthly		Annual Pricing
Item #	Item Description	each Year 4		Quantitiy		Pricing Year 4		Year 4
Item 65	Printer, Digital	27.08	х	5 each	=	135.42	x 12 Months	1,625
Item 66	PULMONARY FUNCTION ANALYZER	334.42	х	1 each	=	334.42	x 12 Months	4,013
Item 67	PUMP, ANTI-EMBOLISM	27.08	х	10 each	=	270.83	x 12 Months	3,250
Item 68	PUMP, ENTERAL FEEDING	27.08	х	4 each	=	108.33	x 12 Months	1,300
Item 69	PUMP, HEATING PAD	27.08	Х	4 each	=	108.33	x 12 Months	1,300
Item 70	PUMP, INFUSION	27.08	х	43 each	=	1,164.58	x 12 Months	13,975
Item 71	PUMP, SUCTION	27.08	х	6 each	=	162.50	x 12 Months	1,950
Item 72	PURIFIER, WATER	27.08	х	1 each	=	27.08	x 12 Months	325
Item 73	REFRIGERATOR	27.08	Х	10 each	=	270.83	x 12 Months	3,250
Item 74	RING CUTTER	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 75	ROCKER	27.08	х	1 each	=	27.08	x 12 Months	325
Item 76	SCALE	27.08	Х	11 each	=	297.92	x 12 Months	3,575
Item 77	SCRUB SINK	51.08	х	2 each	=	102.17	x 12 Months	1,226
Item 78	SHAVER	27.08	Х	2 each	=	54.17	x 12 Months	650
Item 79	SLIDE WARMER	27.08	х	1 each	=	27.08	x 12 Months	325
Item 80	SPU PROCESSOR	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 81	STEAM GENERATOR	205.58	х	1 each	=	205.58	x 12 Months	2,467
Item 82	STERILIZATION PROC. INDICATOR	27.08	х	1 each	=	27.08	x 12 Months	325
Item 83	STERILIZER, STEAM	454.58	х	1 each	=	454.58	x 12 Months	5,455
item 84	STIMULATOR	27.08	х	1 each	=	27.08	x 12 Months	325
Item 85	STRETCHERS	27.08	X	11 each	=	297.92	x 12 Months	3,575
Item 86	SUCTION, PORTABLE	27.08	х	2 each	=	54.17	x 12 Months	650
Item 87	TABLE, EXAM	27.08	х		=	460.42	x 12 Months	5,525
Item 88	TABLE, OR	51.08	х	2 each	=	102.17	x 12 Months	1,226
Item 89	TELEMETRY TRANSMITTER	27.08	х	8 each	=	216.67	x 12 Months	2,600
Item 90	TEMP CONTROL	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 91	TENT, OXYGEN	27.08	Х	4 each	=	108.33	x 12 Months	1,300
Item 92	THAWER, PLASMA	27.08	х	<sup>1</sup> each	=	27.08	x 12 Months	325
Item 93	Thermometer	27.08	х	22 each	=	595.83	x 12 Months	7,150
Item 94	TISSUE PROCESSOR	540.42	х	1 each	=	540.42	x 12 Months	6,485
item 95	Tourniquet	27.08	Х	1 each	=	27.08	x 12 Months	325
Item 96	TRANSFORMER, HEADLIGHT	27.08	Х	1 each	=	27.08	x 12 Months	325

		Pricing per					Monthly		Annual Pricing
Item#	Item Description	each Year 4		Qı	uantitiy		PricingYear 4		Year 4
Item 97	Transformer, Wall, Oto/Opthalm	27.08	х	26	each	=	704.17	x 12 Months	8,450
Item 98	TUB, WHIRLPOOL	27.08	×	3	each	=	81.25	x 12 Months	975
Item 99	ULTRASONIC CLEANER	248.58	х	1	each	=	248.58	x 12 Months	2,983
Item 100	ULTRASONIC SURGICAL CUTTER/COA	27.08	х	1	each	=	27.08	x 12 Months	325
Item 101	URINE ANALYZER	27.08	х	2	each	=	54.17	x 12 Months	650
Item 102	Vag speculum Light Illuminator	27.08	х	1	each	=	27.08	x 12 Months	325
Item 103	VENTILATOR	194.17	х	6	each	=	1,165.00	x 12 Months	13,980
item 104	Video Display Processor	27.08	X	1	each	=	27.08	x 12 Months	325
Item 105	VIDEO LARYNGOSCOPE	27.08	х	1	each	=	27.08	x 12 Months	325
Item 106	VIEW BOX, XRAY	27.08	х	1	each	=	27.08	x 12 Months	325
ltem 107	Warmer	27.08	×	2	each	=	54.17	x 12 Months	650
Item 108	WARMER, FLUID	27.08	х	10	each	=	270.83	x 12 Months	3,250
Item 109	WARMER, INFANT	27.08	Х	3	each	T=	81.25	x 12 Months	975
item 110	WARMER, PATIENT	27.08	×	4	each	=	108.33	x 12 Months	1,300
Item 111	WARMING CABINET	27.08	x	4	each	=	108.33	x 12 Months	1,300
Item 112	WASHER / STERILIZER	454.58	x	2	each	=	909.17	x 12 Months	10,910
Item 113	WHIRLPOOL	27.08	×	2	each	=	54.17	x 12 Months	650
Item 114	X-RAY VIEWER	27.08	Х	3	each	=	81.25	x 12 Months	975
4.1.1	Service Support Agreement for Biomedical Equipment Inspection	, Preventative	To	otal	Pricing			Total Annual	
Year 4	Maintenance, Parts, and Repair				onth		24,787.42	Pricing	297,449



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: 302129

Doc Description: Addendum Three-Biomedical Inspection, Maintenance

--- --- Maderia in Thice-biomedical inspection, Mainte

Proc Type: Central Master Agreement

 
 Date Issued
 Solicitation Closes
 Solicitation No
 Version

 2017-04-20
 2017-05-04 13:30:00
 CRFQ
 0506 WEH1700000011
 4

BID RECEIVING LOCATION

**BID CLERK** 

**DEPARTMENT OF ADMINISTRATION** 

PURCHASING DIVISION

2019 WASHINGTON ST E

CHARLESTON

WV

25305

US

VENDOR

Vendor Name, Address and Telephone Number:

NOVAMED CORPORTTION

30 NUTHEG DRIVE

TRUMBULL, CT 06611

203-380-6682

FOR INFORMATION CONTACT THE BUYER

Charles D Barnette (304) 558-2566

charles.d.barnette@wv.gov

Signature X

FEIN#

06-1080324

DATE 5/1/201

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

Page: 1

FORM ID: WV-PRC-CRFQ-001

#### ADDITIONAL INFORMAITON:

#### Addendum Three:

1 - To provide an electronic version of Exhibit A and Exhibit B, per the updates as described by Addendum Two.

No other changes.

INVOICE TO	<b>在17月</b> 以時間以及19月1日	SHIP TO	[2] A. Carrista, A.
PROCUREMENT OFFI	CER - 304-436-8708	PROCUREMENT OFF	FICER - 304-436-8708
HEALTH AND HUMAN	RESOURCES	HEALTH AND HUMAN	RESOURCES
WELCH COMMUNITY	HOSPITAL	WELCH COMMUNITY	HOSPITAL
454 MCDOWELL ST		454 MCDOWELL ST	
WELCH	WV24801	WELCH	WV 24801
US		us	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Monthly Service charge for Biomedical Equipment Services	12.00000	МО	924,039.58	\$288,475.00

Comm Code	Manufacturer	Specification	Model #	
85161504	X. A. S.			
(45)				

#### **Extended Description:**

Monthly Service charge for Biomedical Equipment Services

#### SCHEDULE OF EVENTS

Line	<u>Event</u>	Event Date	
1	Mandatory Pre-bid Meeting-1:00 PM	2017-03-30	
2	Technical Question Deadline-4:00 PM	2017-04-06	

	Document Phase	Document Description	Page 3
WEH1700000011	Draft	Addendum Three-Blomedical Inspection,	of 3
		Maintenance	

#### ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

**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.

ROBERT M CONSTANTINE PRESIDENT	
(Name, Title) ROBERT M CONSTANTINE PRESIDENT	100
(Printed Name and Title) 30 NUTMEG DRIVE, TRUMBUL, CT 06611	
(Address) 103-380-6682 103-378-2906	
(Phone Number) / (Fax Number)  RCONSTANTINE ONOVAMED CORP. COM	
(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.

NOVAMED CORPORT	4)10N
(Company)	5
(Authorized Signature) (Repre	sentative Name, Title)
ROBERT M CONSTAN	TINE PRESIDENT
Printed Name and Title of Au	thorized Representative)
5/1/2017 (Date)	
203-380-6682	203-378-2906
(Phone Number) (Fax Number	)

#### REQUEST FOR QUOTATION - CRFQ WEH1700000011 Biomedical Equipment Inspection, Maintenance, Parts, and Repair Services

#### 11. MISCELLANEOUS:

11.1. 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: JOHN B4KER
Telephone Number: 434-924-9011

Fax Number: 434 -243 -5785

Email Address: JBAKENO NOVAMEDCORP. COM

Name of Associate: NOVAMED CORPORATION
Signature:
Title: ROBERT M CONSTANTINE MESIDENT
Date: 5/2/2017

Form - WVBAA-012004 Amended 06.26,2013

APPROVED AS TO FORM THIS 21 DAY OF SATA 20 11

Retrick Morrisey
Astomey General

#### Appendix A

(To be completed by the Agency's Procurement Officer prior to the execution of the Addendum, and shall be made a part of the Addendum. PHI not identified prior to execution of the Addendum may only be added by amending Appendix A and the Addendum, via Change Order.)

Name of Associate: NOVAMED CORPORATION

Name of Agency: WVDHHR/BHHFF/Welch Community Hospital

Describe the PHI (do not include any actual PHI). If not applicable, please indicate the same.

Any and all personally identifiable information including but not limited to patient name, address, date of birth, Social Security Number, telephone number, and insurance information.

Any and all protected health information including but not limited to patient diagnosis, lab test, radiological exams, physical health exams, and/or treatment procedures.

#### STATE OF WEST VIRGINIA Purchasing Division

#### **PURCHASING AFFIDAVIT**

**MANDATE:** 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 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:

1/200	- ·
Vendor's Name: NOVAMED CORPOR	47/0N
Authorized Signature: ROBERT M CONSTANTIN	NE, PRESIDENT Date: 5/2/2017
State of Connecticut	
County of <u>Fairfield</u> , to-wit: TA	Inbull
Taken, subscribed, and sworn to before me this $2^{n^{\alpha}}$	day of May , 2017.
My Commission expires 10/31	, 20 <u>17</u> .
AFFIX SEAL HERE 7	NOTARY PUBLIC MOUSSASTEPANDUM
	Purchasing Affidavit (Revised 08/01/2015)

MELISSA STEPANKIW
NOTARY PUBLIC OF CONNECTICUT

My Commission Expires 10/31/2018

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.

	ing the date of this certification; or,	ence for the reason checked: resided continuously in West Virginia for four (4) years immediately preced- on 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;
		ciation, or corporation with at least eighty percent of ownership interest applicable four year residency requirement; <b>or</b> ,
		iate or subsidiary which employs a minimum of one hundred state residents rincipal place of business within West Virginia continuously for the four (4) ortification; <b>or</b> ,
2.		during the life of the contract, on average at least 75% of the employees West Virginia who have resided in the state continuously for the two years
3	has an affiliate or subsidiary which maintains i employs a minimum of one hundred state resi- completing the project which is the subject of t average at least seventy-five percent of the bid	ence for the reason checked: minimum of one hundred state residents, or a nonresident vendor which ts headquarters or principal place of business within West Virginia and dents, and for purposes of producing or distributing the commodities or the bidder's bid and continuously over the entire term of the project, on der's employees or the bidder's affiliate's or subsidiary's employees are the state continuously for the two immediately preceding years and the
4.	Application is made for 5% vendor preferen Bidder meets either the requirement of both sub-	ce for the reason checked: divisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5.	Bidder is an individual resident vendor who is a ve	ence who is a veteran for the reason checked: teran of the United States armed forces, the reserves or the National Guard for the four years immediately preceding the date on which the bid is
6.	Bidder is a resident vendor who is a veteran of the purposes of producing or distributing the commo continuously over the entire term of the project,	ence who is a veteran for the reason checked: he United States armed forces, the reserves or the National Guard, if, for dities or completing the project which is the subject of the vendor's bid and on average at least seventy-five percent of the vendor's employees are he state continuously for the two immediately preceding years.
7.	dance with West Virginia Code §5A-3-59 and	n-resident small, women- and minority-owned business, in accor- it West Virginia Code of State Rules. to contract award by the Purchasing Division as a certified small, women-
requiren or (b) as	nents for such preference, the Secretary may orde	nes that a Bidder receiving preference has failed to continue to meet the er the Director of Purchasing to: (a) rescind the contract or purchase order; not to exceed 5% of the bid amount and that such penalty will be paid to nce on the contract or purchase order.
authorize the requ	es the Department of Revenue to disclose to the D	se any reasonably requested information to the Purchasing Division and irector of Purchasing appropriate information verifying that Bidder has paid on does not contain the amounts of taxes paid nor any other information
and if a		d accurate in all respects; and that if a contract is issued to Bidder ges during the term of the contract, Bidder will notify the Purchas-
Bidder:	NOVAMED CORPORATION	Signed:
Date:	5/2/2017	Title: NOSELT M CONSTANTINE PRESIDENT
*Check ar	ny combination of preference consideration(s) indicated a	bove, which you are entitled to receive.

#### ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: WEH1700000011

**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 addended)	um received)
[ ] Addendum No. 1	[ ] Addendum No. 6
[ ] Addendum No. 2	[ ] Addendum No. 7
[ ] Addendum No. 3	[ ] Addendum No. 8
[ ] Addendum No. 4	[ ] Addendum No. 9
[ ] Addendum No. 5	[ ] Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Company

Authorized Signature

ROBERT M CONSTANTINE PRESIDENT

STYTOTT

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing. Revised 6/8/2012