



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Solicitation

NUMBER
CME14113

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER 304-558-0067

RFQ COPY

TYPE NAME/ADDRESS HERE

VENDOR

SHIP TO

HEALTH AND HUMAN RESOURCES
 BUREAU FOR PUBLIC HEALTH
 OFFICE CHIEF MEDICAL EXAMINER
 619 VIRGINIA STREET, WEST
 CHARLESTON, WV
 25302 304-558-4865

DATE PRINTED
12/23/2013

BID OPENING DATE: 01/02/2014

BID OPENING TIME 1:30PM

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 1						
ADDENDUM IS ISSUED:						
1. TO PROVIDE RESPONSES TO VENDORS' QUESTIONS REGARDING THE ABOVE SOLICITATION. QUESTION AND ANSWER PAGES ARE ATTACHED.						
2. TO PROVIDE ADDENDUM ACKNOWLEDGMENT. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN THE DISQUALIFICATION OF YOUR BID.						
***** END OF ADDENDUM NO.1 *****						

SIGNATURE	TELEPHONE	DATE
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO SOLICITATION, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

SOLICITATION NUMBER: CME14113

Addendum Number: 1

The purpose of this addendum is to modify the solicitation identified as (“Solicitation”) to reflect the change(s) identified and described below.

Applicable Addendum Category:

- Modify bid opening date and time
- Modify specifications of product or service being sought
- Attachment of vendor questions and responses
- Attachment of pre-bid sign-in sheet
- Correction of error
- Other

Description of Modification to Solicitation:

1. To provide copy of vendor questions and responses.
2. To provide Addendum Acknowledgment form.

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A

ADDENDUM #1 – CME14113

Addendum #1 to CME14113 is to respond to the following Vendor questions.

Vendor Question #1:

Please forward me previous bid tabulation.

Agency Response to Vendor Question #1:

The bid tabulation for the previous body bag contract (CME10094) is attached.

Vendor Question #2:

Which vendor was awarded?

Agency Response to Vendor Question #2:

The previous body bag contract (CME10094) was awarded to Medical Products Limited, Inc.

Vendor Question #3:

What was their price?

Agency Response to Vendor Question #3:

Medical Products Limited, Inc. bid price on the previous body bag contract (CME10094) was \$133,200.00.

Vendor Question #4:

What were the quantities taken of each item?

Agency Response to Vendor Question #4:

Quantities ordered under the previous body bag contract (CME10094) were:

Prenatal – 50

Infant – 200

Child – 130

Adult Large – 7,660

Adult XLarge – 550

Adult Large/Heavy Duty - 220

Vendor Question #5:

What is the minimum ordered per time?

Agency Response to Vendor Question #5:

There was not a required minimum order quantity under the previous body bag contract (CME10094).

ADDENDUM #1 – CME14113**Vendor Question #6:**

If you don't have a minimum quantity per order, can I put down a minimum quantity per order?

Agency Response to Vendor Question #6:

No, you cannot put down a minimum required quantity per order. Section 4.1, Pricing Page, Paragraph Two of the Request for Quotation Specifications explains that the quantities shown on the Pricing Page are estimates only and that no future use of the Contract or any individual item is guaranteed or implied.

Vendor Question #7:

Is the bid going to be awarded to one vendor? As we do not have all the items requested.

Agency Response to Vendor Question #7:

Yes, a contract will be awarded to one vendor that can provide the Contract Items meeting the required specifications for the lowest overall grand total cost as shown on the Request for Quotation Pricing Page.

BID TABULATION

PO/Contract No: CME10094 Bid Opening Date: _____

22-Apr-10

Description: Open End Contract To Provide Body Bags

Bidder Name & Address	Bid	RVP	Amount		Reciprocal	Comments
	Amount	Requested	w/ RVP		Preference	
Alpha Medical Distributor, Inc. 60-B Commerce PL Hicksville, NY 11801 Shelton, CT 06484	\$90,770.00	No	\$0.00 \$0.00 \$0.00	2.5% 3.5% 5.0%		Contact: Frank Lopardo Fax: 516-681-5291
Salam International, Inc. 23082 Terra Drive Laguna Hills, CA 92653	\$113,910.00	No	\$0.00 \$0.00 \$0.00	2.5% 3.5% 5.0%		Contact: Abdul Salam Fax: 949-699-3650
Medical Products PO Box 80685 Conyers, GA 30013	\$133,200.00	No	\$0.00 \$0.00 \$0.00	2.5% 3.5% 5.0%		Contact: Micki Warbington Fax: 770-860-8845
Centennial Products Inc PO Box 23905 Jacksonville, FL 32241	\$136,325.00	No	\$0.00 \$0.00 \$0.00	2.5% 3.5% 5.0%		Contact: Cindy Maguire Fax: 904-332-0406
Midwest Medical Supply Co., LLC 13400 Lakefront Drive Earth City, MO 63045	\$148,200.00		\$0.00 \$0.00 \$0.00	2.5% 3.5% 5.0%		Contact: Jo Ann Kidd Fax: 386-252-9961
Notes:						

I do hereby certify that the above information is true and accurate.

By: Roberta Wagner **Buyer**
Name-File/Title Supervisor

OFFICE OF DATA PROCESSING
2010 APR 26 AM 11:05

RECEIVED
Date: #####
RW/ks

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D TABULATION

PO/Contract No: CME10094 Bid Opening Date: 22-Apr-10
 Description: Open End Contract To Provide Body Bags

Supplier Name & Address	Bid Amount	RVP Requested	Amount w/ RVP		Reciprocal Preference	Comments
DD & S Inc. 16 West Elm Street Chicago, IL 60610 Shelton, CT 06484	\$372,600.00	No	\$0.00 \$0.00 \$0.00	2.5% 3.5% 5.0%		Contact: Donald Dupree Fax: 312-266-9291
Isovac Products LLC 1306 Enterprise LLC Suite C Romeoville, IL 60446-4408	\$2,092,500.00	No	\$0.00 \$0.00 \$0.00	2.5% 3.5% 5.0%		Contact: James Gauger Fax: 630-679-1750
Notes:						

I do hereby certify that the above information is true and accurate.

OFC OF DATA PROCESSING
2010 APR 26 AM 11:05

By: Roberta Wagner Buyer
Name-File/Title Supervisor

Date: #####
RW/ks

RECEIVED

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ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CME14113

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)

- | | |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> 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

Date

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