

MIAMI-DADE COUNTY  
BLANKET PURCHASE ORDER

BPO ID: ABCW1400501 PRINT DATE: 03/03/2014 PAGE: 01

\*\* UPDATED/REVISED BPO \*\*

VENDOR ID: \*\*\*\*\*  
MULTI-VENDOR BPO  
PRIME VENDOR SET ASIDE :  
SUBVENDOR GOAL : 00%  
PRIME VENDOR COMMITMENT: 00%

SHIP TO:  
AS SPECIFIED ON INDIVIDUAL ORDERS  
PLEASE REFER ALL QUESTIONS  
CONCERNING THIS ORDER TO:  
GAROFOLLO MARTHA  
(305) 375-4265

ITB ID EXPR DATE DISCOUNT TERMS CONTRACT AMOUNT  
02/28/2019 16,486,000.00

BID NUMBER

8441-0/19

PRE-QUALIFIED VENDORS FOR MULTI-VENDOR BPO

VENDOR ID	SFX	VENDOR NAME	DISCOUNT TERMS
030538101	01	SZY HOLDINGS LLC	NET30
112659063	01	HEALTH-CARE EQUIPMENT & PARTS CO INC	NET30
113136595	02	HENRY SCHEIN INC	NET30
201399388	01	STEEDE MEDICAL LLC	NET30
232618125	01	KENTRON HEALTHCARE INC	NET30
311739487	01	BOUND TREE MEDICAL LLC	NET30
320217281	01	PANCAR INDUSTRIAL SUPPLY CORP	NET30
351570774	01	FLOTEC INC	NET30
431741196	01	MIDWEST MEDICAL SUPPLY COMPANY LLC	NET30
461109022	01	VETMEDS INC	NET30
521755328	04	DISTRICT HEALTHCARE & JANITORIAL SUPPLY	NET30
593184908	01	QUADMED INC	NET30
830487202	01	SUNCOAST SURGICAL & MEDICAL SUPPLY LLC	NET30

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ITEM COMMODITY ID	U/M	UNIT COST
001 475		

HOSPITAL, SURGICAL, AND RELATED MEDICAL ACCESSORIE  
END OF ITEM LIST

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AUTHORIZED DEPTS/USERS

AUTHORIZED DEPT: CALLER ID	CALLERS NAME	CO*****	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
*****			\$85,000.00	( ) -

AUTHORIZED DEPTS/USERS

AUTHORIZED DEPT: CALLER ID	CALLERS NAME	FR*****	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
*****			\$16,316,000.00	( ) -

AUTHORIZED DEPTS/USERS

AUTHORIZED DEPT: CALLER ID	CALLERS NAME	PD*****	DOLLAR LIMIT	ALLOCATION: PHONE NUMBER
*****			\$85,000.00	( ) -

TERMS:

COSTS OF MANDATORY RANDOM AUDIT BY THE INSPECTOR GENERAL ARE INCORPORATED INTO THIS CONTRACT AS 1/4 OF 1% OF THE CONTRACT PRICE.

THIS CONTRACT IS SUBJECT TO A USER ACCESS FEE UNDER THE COUNTY USER ACCESS PROGRAM (UAP) IN THE AMOUNT OF TWO PERCENT (2%). THE VENDOR PROVIDING GOODS AND SERVICES UNDER THIS CONTRACT SHALL INVOICE THE CONTRACT PRICE AND SHALL ACCEPT AS PAYMENT THEREOF THE CONTRACT PRICE LESS THE 2% UAP AS FULL AND COMPLETE PAYMENT FOR THE GOODS AND/OR SERVICES SPECIFIED ON THE INVOICE. THE COUNTY SHALL RETAIN THE 2% UAP FOR USE BY THE COUNTY TO HELP DEFRAY THE COST OF THE PROCUREMENT PROGRAM. VENDOR PARTICIPATION IN THIS INVOICE REDUCTION PORTION OF THE UAP IS MANDATORY.

THIS IS A BLANKET PURCHASE ORDER COVERING PERIOD FROM 03/01/14 TO 2/28/19 DELIVERIES AGAINST THIS PURCHASE ORDER SHALL BE MADE IN QUANTITIES AND TIMES AS REQUESTED BY THE DEPARTMENT DURING SAID PERIOD. INVOICING SHALL BE ON A PER ORDER (DELIVERY) BASIS OR ON A MONTHLY INVOICE BASIS. ALL ITEMS IN ACCORDANCE WITH THE BID PROVISIONS AND SPECIFICATIONS AND THE VENDOR'S QUOTE OR BID. ESTIMATED QUANTITIES AND/OR DOLLARS ARE FOR RECORD PURPOSES ONLY. NO GUARANTEE IS EXPRESSED OR IMPLIED AS TO QUANTITIES AND/OR DOLLARS THAT WILL ACTUALLY BE PURCHASED. THE VENDOR ACCEPTS ALL RISKS ASSOCIATED WITH CONTINUED, NEXT PAGE

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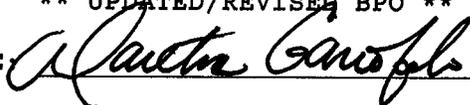
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USING THIS INFORMATION.

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AUTHORIZED SIGNATURE



DATE:

3/3/14

\*\*\*\*\* LAST PAGE \*\*\*\*\*