Date: 07/09/2020

FROM: Kristi Thompson - Procurement OKLAHOMA STATE DEPARTMENT OF HEALTH 1000 NE 10TH ST. OKLAHOMA CITY, OK 73117-1299 Kristi.Thompson@health.ok.gov

RE: Requisition 3400021395

The Oklahoma State Department of Health, a tax-exempt government entity, is seeking price quotes on the item(s) listed below.

If interested, pleases email price quote no later than 3:00 PM, Monday, July 20, 2020.

Any questions pertaining to this solicitation should be emailed to <u>Kristi.Thompson@health.ok.gov</u> before <u>3:00 PM, Thursday, July 16, 2020</u>. Any questions received after this time may not be answered.

Please provide:	
Vendor Name:	
Contact Name:	
Phone Number:	
Fax Number:	
Email:	
Vendor FEI/TIN #:	

The bidder awarded the Contract shall prepay all packaging, handling, shipping and delivery charges and firm prices quoted in this request shall include all such charges.

Item Description and Specification

Description & Catalog Number	Approx # Boxes needed	Unit Price
API 20E 100 PACK		
Biomerieux Cat. No. #20160, or equivalent	4	<u>\$</u>
API NH 10 STRIPS+10 MEDIA		
Biomerieux Cat. No. #10400, or equivalent	4	<u>\$</u>
API 20C AUX 25 STRIPS+25 MEDIA		
Biomerieux Cat. No. #20210, or equivalent	4	<u>Ş</u>
API 50 CH 10 TESTS PER BOX		
Biomerieux Cat. No. #50300, or equivalent	20	<u>\$</u>

API 50 CHL 10 AMPULES PER BOX Biomerieux Cat. No. #50410, or equivalent	4	\$
API 50 CHB/E 10 AMPULES PER BOX Biomerieux Cat. No. #50430, or equivalent	16	\$
VP1 & VP2 REAGENT–2 VP1 AND 2 VP2 Biomerieux Cat. No. #70422, or equivalent	7	\$
ZYM B X2 Biomerieux Cat. No. #70493, or equivalent	6	\$
JAMES 2AMP-2 BOTTLES PER KIT Biomerieux Cat. No. #70542, or equivalent	7	\$
NITRATE A & NITRATE B REAGENT- 2 BOTTLES EA Biomerieux Cat. No. #70442, or equivalent	7	Ş
ZN (Zinc Powder) Biomerieux Cat. No. #70380, or equivalent	1	Ś
Shipping Fee	1	\$\$
Handling Fee	1	<u> </u>

THIS CONTRACT WILL BE FOR AN INDEFINITE QUANTITY AND THE STATE MAY, OR MAY NOT, BUY THE QUANTITY MENTIONED.

Additional terms which provide discounts for earlier payment may be evaluated when making an award. Any such additional terms shall be no less than ten (10) days increasing in five (5) day increments up to thirty (30) days. The date from which the discount time is calculated shall be the date of a proper invoice.

Vendor's Lead Time: _____

THIS RFQ WILL BE AWARDED LOWEST AND BEST, AS AN ALL OR NONE.

This solicitation, along with the bidder response & resultant Purchase Order, constitutes the entire agreement. No additional agreements will be signed.

TERMS AND CONDITIONS: Payment Terms: 45 Days, billed in arrears Shipping Terms: FOB Destination

TO BE BILLED IN ARREARS

PURCHASE ORDER NUMBER SHOULD APPEAR ON ALL DOCUMENTATION, INCLUDING BUT NOT LIMITED TO: PACKING SLIPS, INVOICES, BILLS OF LADING, CORRESPONDENCE, SUBJECT LINE OF EMAILS, ENVELOPE ADDRESSES AND PACKAGES. THE PURCHASE ORDER NUMBER SHOULD BE VISIBLE WITHOUT THE NEED TO OPEN THE PACKAGE. SHIPMENTS, INVOICES AND OTHER DOCUMENTATION NOT PROPERLY IDENTIFIED BY PURCHASE ORDER NUMBER MAY RESULT IN REFUSAL OF DELIVERY, DELAYED PAYMENT OR OTHER DELAYS IN RESPONSE.

VENDOR ACKNOWLEDGES, BY RECEIPT OF THIS INSTRUMENT, DOCUMENT OR COMMUNICATION, THAT ANY AGREEMENT ENTERED INTO OR EXECUTED BY THE PARTIES IS SUBJECT TO THE PROVISIONS OF THE OKLAHOMA CENTRAL PURCHASING ACT, 74 O.S., § 85.1, ET SEQ.

NO ORAL STATEMENT, ONLINE CLICK WRAP AMENDMENTS, FACSIMILE, MAIL OR OTHER NOTIFICATION ISSUED BY VENDOR SHALL MODIFY OR OTHERWISE EFFECT THE TERMS, CONDITIONS, OR SPECIFICATIONS STATED IN THIS PURCHASE ORDER UNLESS ACCEPTED IN WRITING BY THE OKLAHOMA STATE DEPARTMENT OF HEALTH, PROCUREMENT SERVICE.

THIS CONTRACT SHALL BE CONSIDERED TO BE IN FORCE UNTIL THE EXPIRATION DATE OR UNTIL 30 DAYS AFTER NOTICE HAS BEEN GIVEN BY EITHER PARTY OF ITS DESIRE TO TERMINATE THE CONTRACT.