	TABULATION SHEET	88	VENDOR #1		VENDOR #2			VENDOR #3	
	Bid No. 2015-017-6471 Annual Contract for the Purchase of Vaccines	※	CT International		Smith Medical Partners			Regimed Medical	
		~	4349 Old Sante Fe rd		960 Lively blvd			106 Arabian Path	
	Opening Date: Febuary 9, 2015	***	San Luis Obispo, CA. 93401		Wood Dale IL, 60191			St. Peters, Mo 63376	
		88	Tyler Mitchell		Robert Rash			Reginalds V Maclin	
	Initial Contract Period 2/17/15 throught 2/18/16	- 88	805-540-0987		630.773.6256			636-240-1515 ph	
	Charles Price Senior Buyer 214.653.6223	- XX			630.227.9220fax			559-498-6585 fax	
		- 88	tmitchell@ctint.org		bob.rash@hdsmith.com			rmaclin@regimedmedical.	
		8			Withdre	w Bid		Recommended for Award	Ext
		- XX							
	NCTRCA Certified Vendor (M/Wbe) Certified by Another Agency	- 8	Not indicated not indicated		no no			no no	
	EEO1	- XX	yes		no			Yes	
	Dallas County Taxpayer?	- 8	No (Other)		No			No	
	How were you notified?	X	Not indicated		not indicated			Letter from DC	
		8		8			l		₹
Item #	Description	QTY Dosage	Price	Ext	Price		Ext	Price	Ext
		- 88		Š			1		3
1	Japanese Encephalitis Vaccine, inactivated, (Ixiaro)	8		ζ					- 8
	NDC #42515-0001-01 Prefilled syringe.05ml			5					Σ.
	NDC #0001-01	200	\$278.00	\$ 55,600.00	\$241.08	\$	48,216.00	\$258.09	\$ 51,618.00
	Dosage1x.05 Other			5					
	otter			ς					8
	Comments:			5	***Pricing submitted by this				⋧
				۶	vendor is per vial/dosage***				XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
				, S					- 8
2	Pneumococcal Vaccine Polyvalent Pneumovax			Ş.					35
	NDC #4739-00 One 2.5 ml dose vial	××		5					₹:
	NDC #4943-00 Ten single dose vials/box	- XX		Şi					5
		××		Ž.					3
		400	\$423.00	\$ 169,200.00	\$367.33	\$	146,932.00	\$395.19	\$ 158,076.00
	NDC #473900 Dosage:1x2.5ml	× ×		ς					- 8
		8		8	***Pricing submitted by this				
	COMMENTS	•		9	vendor is per vial/dosage***				- 8
		400	\$785.00	\$ 314,000.00	\$73.47	\$	293,880.00	\$790.43	\$ 316,172.00
	NDC #4943-00 Dosage:10x1 dose		•	8					
	COMMENTS			Š	***Pricing submitted by this				8
				5	vendor is per vial/dosage***				Ž.
				S	Sum=\$73.47(10*400)				8
	Objeton Boo Viene Version Vericelle Verices			5	, ,				XXXXXXXX
3	Chicken Pox Virus Vaccine-Varicella Varivax			۶					55
	NDC #0006-4827-00 Single dose/10 vials			5					
	NDC #4827-00 Dosage:10x1dose	1000	\$1,155.85	\$ 1,155,850.00	\$102.17	\$	1,021,700.00	\$1,099.40	\$ 1,099,400.00
	· · · · · · · · · · · · · · · · · · ·		•	ζ					1,099,400.00
	COMMENTS			۶	***Pricing submitted by this				
		88		Š	vendor is per vial/dosage*** Sum=\$102.17(10*1000)				8
		Ю	\	Page 1 of 4	σαιτι-ψτοζ.17(10 1000)		ı		ж

	TABULATION SHEET	82	VENDOR #1		VENDOR #2			VENDOR #3	
	Bid No. 2015-017-6471 Annual Contract for the Purchase of Vaccines	8	CT International		Smith Medical Partners			Regimed Medical	
		- 8	4349 Old Sante Fe rd		960 Lively blvd			106 Arabian Path	
	Opening Date: Febuary 9, 2015	×8	San Luis Obispo, CA. 93401		Wood Dale IL, 60191			St. Peters, Mo 63376	
	Initial Contract Period 2/17/15 throught 2/18/16 Charles Price Senior Buyer 214.653.6223	**	Tyler Mitchell 805-540-0987 tmitchell@ctint.org		Robert Rash 630.773.6256 630.227.9220fax bob.rash@hdsmith.com			Reginalds V Maclin 636-240-1515 ph 559-498-6585 fax rmaclin@regimedmedical.	XXX
		※	(Withdre	w Bid		Recommended for Award	
4	ActHIB NDC #4921-545-05 Five single dose vials with diluent		,	8					§
	NDC #0545-05 Dosage5x1dose	50	\$169.99	\$ 8,499.50	\$28.12	\$	7,030.00	\$150.62	\$ 7,531.00
	COMMENTS			XX	***Pricing submitted by this vendor is per vial/dosage*** sum=\$28.12(5*50)				*****
5	Adacel NDC #49281-400-10 Ten single dose vials NDC #400-15 Five pre-filled syringes	×		88					8
	NDC #0400-10// Dosage10x1dose	600	\$480.80	\$ 288,480.00	\$41.89	\$ 2	51,340.00	\$448.91	\$ 269,346.00
	Comments	*		8	***Pricing submitted by this vendor is per vial/dosage*** sum=\$41.89(10*600)				×
	NDC #0400-15 Dosage:5x1dose	250	\$244.00	\$ 61,000.00	\$41.94	\$	52,425.00	\$224.73	\$ 56,182.50
	Comments			X	***Pricing submitted by this vendor is per vial/dosage*** sum=\$41.94(5*250)				*****
6	Gardasil (HPV) NDC #4045-00 Carton of one 0.5 ml single dose vial NDC #4045-41 Carton of ten 0.5 single dose vials			X X X X X X X X X X X X X X X X X X X					<u> </u>
	NDC #4045-00 Dosage#1x0.5ml	200	\$175.54	\$ 35,108.00	\$149.51 ***Pricing submitted by this	\$	29,902.00	\$168.23	\$ 33,646.00
	Comments			8	vendor is per vial/dosage***				§
	NDC #4045-41 Dosage:10x0.5ml	200	\$1,688.70	\$ 337,740.00	\$149.19	\$ 2	98,380.00	\$1,605.29	\$ 321,058.00
	Comments	8	(X	***Pricing submitted by this vendor is per vial/dosage*** sum=\$149.19(10*200)				<u> </u>
7	Zostavax (ZOSTER) NDC #4963-00 Package of one single dose vial NDC #4963-4110 Single dose vials(10)			88					XXXXXXXX
	NDC #4963-00_ Dosage:1sdv	200	\$216.30	\$ 43,260.00 x ⊬age ∠ or 4	\$185.27	\$	37,054.00	\$199.32	\$ 39,864.00

TABULATION SHEET Bid No. 2015-017-6471 Annual Contract for	}	Š	VENDOR #1			VENDOR #2			VENDOR #3			
the Purchase of Vaccines	}	\$	CT International			Smith Medical Partners			Regimed Medical			
}		&	4349 Old Sante Fe rd			960 Lively blvd	960 Lively blvd			106 Arabian Path		
Opening Date: Febuary 9, 2015		Ž.	San Luis Obispo, CA. 93401			Wood Dale IL, 60191			St. Peters, Mo 63376			
Initial Contract Period 2/17/15 throught 2/18/16 Charles Price Senior Buyer 214.653.6223	5	š	Tyler Mitchell 805-540-0987			Robert Rash 630.773.6256 630.227.9220fax			Reginalds V Maclin 636-240-1515 ph 559-498-6585 fax			
	\$	8	tmitchell@ctint.org			bob.rash@hdsmith.com			rmaclin@regimedmedical.			
	ξ	8				Withdre	Withdrew Bid					
COMMENTS		Š				***Pricing submitted by this vendor is per vial/dosage***					ž	
	200	5.4	\$2,007.72	\$	401,544.00	\$176.59	\$	353,180.00	\$1,899.81	\$	379,962.00 x	
NDC #4963-41 Dosage:10x1dose	200		Ψ2,001.72	Ψ	101,011.00	Я	Ψ	000, 100.00	ψ1,000.01	Ψ	3	
						Pricing submitted by this vendor is per vial/dosage					8	
COMMENTS						sum=\$176.59(10*200)					Ž	
Measles Mumps & Rubella (MMR)	Ş	Š				8					ž	
NDC #0006-4681-00 10 Vial Single Dose .5ml/pk		100				8					Š	
	250	5.4	\$663.00	\$	165,750.00	\$60.78	\$	151,950.00	\$628.56	\$	157,140.00	
NDC #4681-00 Dosage:10x1dose	Ċ	×				X					- 8	
COMMENTS	Š	X				***Pricing submitted by this vendor is per vial/dosage***					- 8	
COMMENTS	\$	Ş.				sum=\$60.78(10*250)					Ŕ	
	}	8				8					ž	
	ξ	Ž.				Я					8	
TOTAL	{	X.		ć 2 0′	26 024 50	. 💢	,	2 604 000 00		,	2 000 005 50	
	۶	Ş.		\$ 3,0	36,031.50	' X	\$	2,691,989.00		\$	2,889,995.50 X	
Should your firm be awarded this contract, describe what (if any) portion of the bid	3	8				8				nor	ne, regimed is already	
requirements will be subcontracted out:	ζ	ß.			na	8		none			a small business	
Product on hand	{	Ž.			yes	X X		yes			yes	
Will you be required to obtain products	۶	Ş.			yes	ğ					8	
Specify any additional comments/cost/etc. included with your bid proposal, if applicable:	}	8			ducts are in stock, require purchase			not indicated			not indicated	
Specify Prompt/Early Payment Discount Terms (if any):	}	8			n/a			not indicated			not indicated	
Cooperative Purchasing: Should other Governmental Entities decide to participate in this contract, would you, the awarded Contractor agree that all terms, conditions, specifications, and pricing would apply to that entity?	}	8			yes	8		not indicated			yes X	
a) Does your company provide health insurance	}	8			yes			yes			yes	
coverage to its employees? Is it 90/65%	ζ	Ŷ										
b) If your company does provide health insurance	{	X			yes/no			no/yes			yes/yes	
overage to its employees, does the company share in the cost a minimum of 75% for employee only coverage and 50% for family coverage?		×			no			yes			yes	
c) If your company provides health insurance coverage to its employees, is the coverage comparable to the services provided by Dallas	}	× ×			yes			yes			yes	

TABULATION SHEET Bid No. 2015-017-6471 Annual Contract for the Purchase of Vaccines

Opening Date: Febuary 9, 2015

Initial Contract Period 2/17/15 throught 2/18/16 Charles Price Senior Buyer 214.653.6223

d) If your company plans to utilize subcontractors in the fulfillment of this bid, does each of the sub provide health insurance

Specify the name, telphone number and email address of account rep who will be handeling

VENDOR #1

CT International

4349 Old Sante Fe rd San Luis Obispo, CA. 93401

> Tyler Mitchell 805-540-0987

tmitchell@ctint.org

yes

Not indicated

VENDOR #2

Smith Medical Partners

960 Lively blvd

Wood Dale IL, 60191

Robert Rash 630.773.6256 630.227.9220fax

bob.rash@hdsmith.com

Withdrew Bid

n/a

not indicated

VENDOR #3

Regimed Medical

106 Arabian Path

St. Peters, Mo 63376

Reginalds V Maclin 636-240-1515 ph 559-498-6585 fax rmaclin@regimedmedical.

Recommended for Award

n/a

Reginald Maclin

rmaclin@regimedmedical.com 636.698.9116