

The School Board of Miami-Dade County, Florida SCHOOL BOARD ADMINISTRATION BUILDING Procurement Management Services 1450 N.E. 2 nd Avenue, Room 352 Miami, Fl. 33132

Direct All Inquiries To Procurement Management Services

Buyer Suzanne Lee Yee PHONE: (305) 995-2361 TDD PHONE: (305) 995-2400

Addendum No

BID/RFP ADDENDUM Date: August 24, 2011

BID/RFP No.: 002-MM05
BID/RFP TITLE: LATEX GLOVES

This addendum modifies the conditions of the above referenced BID/RFP as follows:

- 1) Revised Bid Opening date to read September 13, 2011.
- 2. Revised Bid Proposal Form (Format B): Line **Item 1** to include **Ironwear #4610**, and **Impact/Proguard #8620**. Line **Item 2** to include **Ironwear #4610**.

(This Bidder Form-Format B supersedes the one previously posted on August 22, 2011).

Please download the bid package marked ADDENDUM NO.1.

The attached pages containing clarifications, additional information and requirements constitutes an integral part of the referenced bid.

If your bid/proposal has not been mailed, substitute the pages marked REVISED and mail your entire bid/proposal package. **REMEMBER TO SIGN THE BIDDER QUALIFICATION FORM.**

OR

2. If your bid/proposal has been mailed, sign and return this addendum form with the revised pages by the time and date indicated on the revised Bidder Qualification Form. BY SIGNING THIS ADDENDUM, THE VENDOR AGREES TO THE TERMS AND CONDITIONS CONTAINED IN THE BIDDER QUALIFICATION FORM AND ALL RELATED BID DOCUMENTS.

I acknowledge receipt of Addendum Number 1.

PLEASE NOTE: If your firm has mailed a copy of this bid/proposal to another vendor, it is your responsibility to forward them a copy of this addendum.

(PLEASE TYPE OR PRINT BELOW)

LEGAL I	NAME OF BIDDER:			
MAILING	G ADDRESS:			
CITY, S	TATE ZIP CODE:			
TELEPHONE NUMBER:		E-MAIL I.D		_ FAX #
BY:	SIGNATURE (Manual):			
	OF AUTHORIZED REPRESENTATIVE NAME (Typed)		TITLE:	

OF AUTHORIZED REPRESENTATIVE

FM-4354 Rev. (07-98)





THE SCHOOL BOARD OF MIAMI-DADE COUNTY, FLORIDA SCHOOL BOARD ADMINISTRATION BUILDING 1450 Northeast Second Avenue

Miami, FL 33132

	***************************************	and profession of general profession of popularizing designs and walls.	Direct all inquiries to Procurement Management Services,
BIDDEF	R QUALIF	ICATION FORM	BUYER NAME:
BID NO.	002-MM05		S. Lee Yee
BID TITI	E LATEX	GLOVES	E-MAIL ADDRESS: sleeyee@dadeschools.net
	See		PHONE: (305) 995-2361
			FAX NUMBER: 305-523-2219
			TDD PHONE: (305) 995-2400
Avenue, Mi (Refer to In:	ami, FL 33132 structions to B	lidders, para. IV.B.)	in room 351, School Board Administration Building, 1450 NE 2n ned. Bids may not be withdrawn for <u>180</u> days after opening.
subsequent bid docume	purchase ord nts, no other o	id by the vendor, acceptance and awar ers issued against said award shall con contract documents shall be issued. FICATION AND IDENTIFICATION	rd of the bid by The School Board of Miami-Dade County, Florida, an stitute a binding, enforceable contract. Unless otherwise stipulated in th
	A. I certify to submittin agree to	nat this bid is made without prior unders g a bid for the same materials, supplies abide by all conditions of this bid; and I	tanding, agreement, or connection with any corporation, firm, or person, or equipment, and is in all respects fair and without collusion or fraud. certify that I am authorized to sign this bid for the bidder.
}	Vendor c	ertifies that it satisfies all necessary leade County, Florida.	gal requirements as an entity to do business with The School Board o
(C. I certify a Code and	greement with the School Board of Mia dall applicable School Board contracting	mi-Dade County Business Code of Ethics, and agree to comply with thing and procurement policies and procedures. (School Board Policy 6460)
1	D. I certify t any bid, p	hat I, nor my company or its principals, ourchase order or contract with the Scho	or any wholly owned subsidiary are currently debarred or in default cool board or any other private or governmental entity.
i. IN	DEMNIFICAT		,
co the du of	mage, injury, urt costs arising performance e to or caused the indemnity	nability, cost or expense of whatsoevering out of bodily injury to persons, include of this contract (including goods and side in part by the negligence or other culp	the indemnities (as hereinafter defined) against any claim, action, loss kind or nature including, but not by way of limitation, attorney's fees anding death, or damage to tangible property arising out of or incidental to services provided thereto) by or on behalf of the Bidder, whether or no ability of the indemnity, excluding only the sole negligence or culpabilities indemnities: The School Board of Miami-Dade County, Florida, its
II. PE	RFORMANCI	E SECURITY, is required on this bid.	YES NO
Re TY	fer to INSTRU PE TO BE FL	JCTIONS TO BIDDERS, para. VII./IF F JRNISHED: Performance Bond	PERFORMANCE SECURITY IS REQUIRED, PLEASE INDICATE THE Check (Cashier's, Certified, or equal)
			BUSINESS ENTERPRISE, please indicate: YES NO NO
		An original, manual signature is re (Bidder is requested to u	quired on the Bidder Qualification Form. ise blue ink, do not use pencil)
Legal I	Vame of Ve	endor	
Mailinc	Address		
City		Stata	Zip Code
reiepn	one No	Fax No.	
\$	inature (Or		
Of Auth	orized Rep	resentative	Date
· ·	Typed or F	*	
Of Auth	orized Repi	resentative	Date

REVISED

	1	BID PROPOSAL FORM (FORMAT B)	ī			
		Type or print in this box the			PLEASE COMP	
		complete name of the bidder:	Γ		ALL SHADED AREAS	
		Bid #002-MM05			NAME OF BIDDER	:
		Title: Latex Gloves				
l		Buyer: S. Lee Yee	E0711417ED	ı —	22105	
ITEM	DCPS#	DESCRIPTION OF ITEM	ESTIMATED QUANTITY	UNIT	PRICE PER UNIT	MANUFACTURER & MODEL NUMBER
TILIVI	DOI 0 #	DESCRIPTION OF THEM	Q0/111111	ONIT	T ER OITH	MODEL NOMBER
		IMPORTANT BID NOTES: INITIAL BID PRICE SHALL BE EFFECTIVE FOR SIX (6) MONTHS FROM DATE OF AWARD. AFTER THE INITIAL SIX MONTH PERIOD, A REQUEST FOR QUOTE (RFQ) WILL BE ISSUED TO THE AWARDED VENDORS FOR EACH ITEM AS NEEDED. THIS BID WILL BE AWARDED ON A TOTAL LOW BID BASIS. VENDOR MUST BID BOTH ITEMS AND BOTH ITEMS MUST MEET SPECIFICATIONS TO BE CONSIDERED FOR AWARD. THE ESTIMATED QUANTITY IS FOR A TWO (2) YEAR PERIOD. MULTIPLE ORDERS WILL BE PLACED DURING THE TERM OF THE CONTRACT. PLEASE SEE SPECIAL CONDITION #2 FOR ADDITIONAL INFORMATION. VENDOR WILL BE REQUIRED TO SUBMIT SAMPLES WITHIN SEVEN (7) DAYS FOR ALTERNATE BRANDS IF REQUESTED BY THE BUYER. DO NOT SEND SAMPLES WITH BID.				
1		Gloves: All latex disposable, non-sterile, surgical type, minimum of 9" long, ambidextrous, minimum 5 mils thick, multi purpose, powdered, with rolled cuff. Size Large Biotek QRP #685-BP Uniseal Gold (American Healthcare Prod., Inc.) Biotec Qrp 639BPL or Tronex #1210-30 Ansel Inc. Conform Extra ANL 7231 HandSafe XL80010 or Ronco Siltex 749 Alliance CEO120 or Dynarex #2328 Devory, Raz-Berry #2317 or Glovco G104 Matang MFG Med Gluv - M6150L Sempermed Semper Guard # SNU711-103 Tillotson Healthcare Corp/Sensi Grip #6704 SPI/Cashmere #L-001 Omni International/Omni Trust #111-03 Pharmed Group Corp/PMG Gloves #PMIPA001400 or Liberty/Dura Skin #2800W-L Henry Schein/Criterion #102-5427 Medgluv/MG150L or Impact/Proguard #8620 ADI Medical/Dynatough. Seidman/ Safety Zone GRDR-LG-1-T Impact/Proguard #8620 Ironwear #4610 OR Equal Packaging: 100 gloves per box, 10 boxes per case Minimum order: 750 cases Sample required on alternates: 1 box of 100 gloves, large	3,000	Case	\$Per case of 10 boxes.	

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The School Board of Miami-Dade County, Florida Bid# 002-MM05 Latex Gloves

2	2000710	REVISED Gloves: All latex disposable, <u>non-sterile</u> , surgical type, minimum of 9" long, ambidextrous, minimum 5 mils thick, multi purpose, powdered , with rolled cuff. Size Extra Large	1000	Case	\$ Per case of 10 boxes.	
		Biotek QRP #695-BP Uniseal Gold (American Healthcare Prod., Inc.)				
		Ronco, Siltex 759 or Dynarex #2329 Ansel Inc. Conform Extra ANL 7232				ľ
		HandSafe XL80010 or Alliance CEO120 Liberty Gloves, DuraSkin #2800W				İ
		Glovco G105 or Devory, Raz-Berry #2318 Tronex #1210-30				ľ
		Omni International/Omni Trust #111-04				
		Pharmed Group Corp/PMG Gloves PMIPA001500 Liberty Gloves, DuraSkin #2800W-XL Henry Schein/Criterion #102-5428 ADI Medical/Dynatough #10241				
		Impact/Proguard #8620 - XL				
		Seidman/ Safety Zone GRDR-XL-1-T Ironwear #4610				
		OR Equal.				
		Packaging: 100 gloves per box, 10 boxes per case Minimum order: 500 cases				
		Sample required on alternates: 1 box of 100 gloves, X-large				

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