The School Board of Miami-Dade County, Florida
SCHOOL BOARD ADMINISTRATION BUILDING
Procurement Management
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Procurement Management -
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BID/RFP ADDENDUM

Date: January 11, 2012
Addendum No. 1

RFP TITLE: 018-MM10 – IN-SCHOOL NURSING SERVICES (REGISTERED NURSING AND LICENSED PRACTICAL NURSING SERVICES) RE-BID

This addendum modifies the terms and conditions of the above referenced RFP as follows:

Revises Section V. Description of Program (paragraph 4) as follows:

Estimates of the number of hours of service needed from July 1, 2012, through June 30, 2013, are as follows: RN and LPN services – approximately 300,000 hours.

Revises Section VI. Required Information to be Submitted by Proposer, as follows:

E. (7) One Hourly fee specified for RN and LPN services. The agency's hourly fee must be indicated on Attachment C – Agency's Fee and Certification of Hours. (See **attached** Revised Agency's Fee and Certification of Hours)

THIS ADDENDUM CHANGES THE PROPOSAL OPENING DATE FROM: JANUARY 26, 2012 TO FEBRUARY 9, 2012 and the Evaluation of Proposals from February 13 to February 27, 2012

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

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 Bidder Qualification Form. BY SIGNING THIS ADDENDUM, THE PROPOSER AGREES TO THE TERMS AND CONDITIONS CONTAINED IN THE BIDDER QUALIFICATION FORM AND ALL RELATED BID DOCUMENTS.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 NAME OF BIDDER:_____

MAILING ADDRESS:_____

CITY, STATE ZIP CODE:_____

TELEPHONE NUMBER:_____ E-MAIL I.D._____ FAX #_____

BY: SIGNATURE (Manual):_____

OF AUTHORIZED REPRESENTATIVE

NAME
(Typed):_____TITLE:_____
OF AUTHORIZED REPRESENTATIVE