



B-19/20-02 Addendum 2

Health Supplies

Issue Date: 2/3/2020

Questions Deadline: 2/11/2020 03:00 PM (CT)

Response Deadline: 2/18/2020 03:00 PM (CT)

Contact Information

Contact: Melissa Ross
Address: 702 SE 291 Highway
Lee's Summit, MO 64063-4306
Phone: (816) 986-2213
Email: melissa.ross@lsr7.net

Event Information

Number: B-19/20-02 Addendum 2
Title: Health Supplies
Type: Informal Bid Request
Issue Date: 2/3/2020
Question Deadline: 2/11/2020 03:00 PM (CT)
Response Deadline: 2/18/2020 03:00 PM (CT)
Notes: The Lee's Summit R-VII School District is accepting proposals for a Yearly Contract for Health Supplies. This contract will include but is not limited to: (Scope details). Lee's Summit R-7 School District (or the "District") is requiring proposers to submit their proposals electronically. Electronic submission help eliminate errors, eliminate unnecessary work, and is more friendly to the environment. Lee's Summit R-7 School District will not accept proposals that are submitted via email or fax machine. The District reserves the right to accept or reject any and all proposals and to waive any formalities or technicalities if deemed in the best interest of the District. It is the responsibility of all responders to review the entire proposal, seek clarification of any item or requirement that may not be clear, and check all responses for accuracy before submitting a response.
If you are having difficulty submitting electronically, please contact Missy Ross at (816)986-2213 or email melissa.ross@lsr7.net for instructions.
It is the responsibility of interested firms to check <https://lsr7ebid.ionwave.net> for any addendums or notices of information prior to the opening date and time of this Bid.

Ship To Information

Contact: Purchasing and Distribution Services
Address: 702 SE 291 Highway
Lee's Summit, MO 64063-4306
Phone: (816) 986-2190

Billing Information

Address: 301 NE Tudor Rd
Lee's Summit, MO 64086-5702
Phone: (816) 986 x1000

Bid Attachments

General Terms & Conditions for RFPs, RFQs and Bids.pdf

General Terms and Conditions

[View Online](#)

1_- Sample_Insurance_Certificate.pdf

Certificate of Insurance

[View Online](#)

3_- E-Verify-LSR7_(1) (1).pdf

E-Verify

[View Online](#)

4_- MO_Tax_Exemption_Certificate.pdf

Missouri Tax Exemption Certificate

[View Online](#)

Health Supplies Bid Tab 2017-13.pdf

Attached is the previous bid tab for Health Supplies, Bid 2017-13.

[View Online](#)

Requested Attachments

Certificate of Insurance

(Attachment required)

Please provide a Certificate of Insurance.

E-Verification Affidavit

Please refer to E-Verification Affidavit in "Attachments" tab to complete and upload if your company participates in E-Verify.

Bid Attributes

1 Introduction

The Lee's Summit R7 School District is accepting Bids for Yearly Contract for Health Supplies.

2 Instructions to Respondants

1.1 All questions regarding this Bid shall be submitted online via the "Questions" tab of this bid opportunity. The District reserves the right to reject any and all proposals, to waive technical defects in proposals, and to select the proposal(s) deemed most advantageous to the District.

1.2 It is the responsibility of each respondent before submitting a proposal to examine the documents thoroughly and request written interpretation or clarifications soon after discovering any conflicts, ambiguities, errors, or omissions in the proposal documents. Requests for clarification must be submitted online via the "Questions" tab.

1.3 Changes to the specifications will not be allowed except by written addendum issued by the District through this online procurement system. Oral explanations or instructions given prior to award will not be binding.

1.4 Respondent shall quote net costs of all goods and services requested and all quotes shall include all transportation to destination and inside delivery.

1.5 There will be no public opening of the proposals.

1.6 Acceptance of this proposal or any part thereof, in writing, within ninety (90) days after the closing date, by the District shall constitute a legal and binding agreement; wherein, the vendor shall furnish the services in accordance with the specifications and offeror's proposal on the written order of the District.

1.7 The District reserves the right to award this contract in its entirety or to split the contract among bidders, whichever is in the best interest of the District. The District may accept any item or group of items of the bid unless qualified by specific limitation of the bidder.

1.8 To be considered, a firm must have at least three (3) proven clients of similar size to our district.

I have read and understand.

(Required: Check if applicable)

3 Responding to Attributes

There are attributes, including this one, associated with this proposal. Some are notes and require no response, but most have a required response. ****Please select each page from the bottom right-hand side of this list of attributes in order to view the next page of Bid Attributes.****

4 Attachments Required

Be sure to upload all required documents and forms to the "Response Attachments" Tab.

5 Purchase Agreements

Purchase Agreements shall be awarded in accordance with regulations adopted by the Lee's Summit R7 Board of Education and adhere to all applicable purchasing policies. Purchase Agreements will be negotiated with the lowest responsible bidder who meets the qualifications for quality, price, terms of bid, lead time, and determined to be in the best interest of the District. The bid award will be at the sole discretion of the District. The District reserves the right to reject any and all bids in part or in whole, and to accept the bid that is in the best interest of the District.

I have read and understand.

(Required: Check if applicable)

6 Terms of This Bid

The terms of this bid shall remain in effect for at least one year from date of award. All prices **MUST** remain firm during that time period. The District may make additional purchases at the itemized price listed in the bid packet for a period of one (1) year. The District may, at its option, renew the Contract for up to three (3) additional one-year contract periods by giving written notice to the supplier.

I have read and understand.

(Required: Check if applicable)

7 Bid Pricing

Prices shall be fixed with minimum adjustments allowed. If the bidder is awarded an agreement under this bid solicitation, the prices proposed by the bidder shall remain fixed for a period of one hundred eighty (180) days after the issuance of an initial purchase order or District Visa P-Card purchase, regardless of market conditions. After this period, the vendor may submit a price adjustments to the District based on a Manufacturer's Revised Published Price List. The request **MUST** contain a written notification from the manufacturer to the supplier or vendor of price increases. The Revised Published Price List or manufacturer's notification shall be submitted to the District at least thirty (30) calendar days prior to the effective date of the new price to be charged to the District. It shall be understood that such price adjustments shall not exceed the amount passed onto the supplier or vendor by the manufacturer. It shall be further understood that the District reserves the right to reject any price adjustments submitted by the bidder and/or to terminate the contract with the bidder based on such price adjustments.

The successful bidder(s) must agree to accept the District's Purchase Order or the District's Mastercard P-card for the work order. These purchases are tax exempt.

The Lee's Summit R7 School District will review all bid submissions with regards to pricing, product performance, equipment features, references and experience. The District plans to award the bid within 60 days after the bid opening.

I have read and understand.

(Required: Check if applicable)

8 Quantities are not guaranteed. Actual order quantities and frequencies will vary.

Items are ordered as needed. Quantities are not guarantee and actual order quantities/frequencies will vary.

Checkbox

(Required: Check if applicable)

9 Delivery Instructions
DELIVERY:
All bids shall be quotes F.O.B DESTINATION unless otherwise specified.

PRIMARY SERVICE LOCATION:
Lee's Summit R-7 School District
Purchasing and Distribution Services
702 SE 291 Highway
Lee's Summit, MO 64063
 Checkbox
(Required: Check if applicable)

1 0 Communications Statement
Communications: Contact between vendors and Lee's Summit R7 personnel during the proposal process or evaluation process is prohibited. Any attempt by vendors during the proposal process to contact Lee's Summit R7 personnel may result in disqualification. All communication shall go through the Procurement and Contracts Department during this competitive process. All questions received and the corresponding answers will be distributed to all bidders. No verbal responses will be provided. The deadline for questions about this proposal is stated in the Bid Activities and the district will not respond to questions after this time and date. Response to questions will be posted in the form of an addendum to this proposal. The vendors will be responsible for checking the website for any posted addenda.
 I have read and understand.
(Required: Check if applicable)

1 1 General Terms and Conditions
I have downloaded and read the General Terms and Conditions from the ATTACHMENTS tab. By selecting this box, I agree to to the terms and conditions.
 I have read and agreed to the T&C
(Required: Check if applicable)

1 2 No Deviations or Exceptions
Bidders are expected to bid on the items as listed on the Equipment Specifications List, or Scope of Work. If there are any deviations from the specifications or scope of work listed, the bidder is expected to make note, along with a brief description in the next below. The District reserves the right to determine the successful bidder and will make that decision based on the best interest of the District.

 I have read and agree.
(Required: Check if applicable)

1 3 Deviations and Exceptions
If your company intends to deviate from the Specifications listed in the attached documents, all such deviations and exceptions must be listed here, with complete and detailed conditions and information included. The District will consider any deviations or exceptions in its bid award decisions. The District reserves the right to accept or reject any proposals based upon any deviations indicated below.

If none, please enter N/A (Not Applicable).

(Required: Maximum 4000 characters allowed)

**1
4** Cooperative Procurement with Other Jurisdictions

This section is optional; it will not affect the agreement.

2) Sales will be made in accordance with the prices, terms, and conditions of the Request for Proposals and any subsequent term agreement.

3) There shall, however, be no obligation under the cooperative procurement agreement for any organization represented by MACPP or MARC to utilize the proposal or agreement unless they are specifically named in the Request or Proposals as a joint respondent.

4) All sales to other jurisdictions will be made on purchase orders issued by that jurisdiction. All receiving, inspection, payments and other agreement administration will be the responsibility of the ordering jurisdiction.

5) Each jurisdiction that is a party to the joint proposal has authority to act as Administrative Contracting Officer with responsibility to issue purchase orders, inspect and receive goods, make payments and handle disputes involving shipment to the jurisdiction.

If the District awarded you the proposed agreement, would you sell under the prices and terms of this agreement to any public school district or any other non-profit organization having membership in the Mid-America Council of Public Purchasing (MACPP) or Mid-America Regional Council (MARC) and located within the greater Kansas City metropolitan trade area? (All deliveries shall be F.O.B. Destination and there shall be no obligations on the part of any member of said Council to utilize this agreement).

Yes No

(Optional: Check only one)

**1
5** Sample Requirements

I agree to provide samples for noted line items required. I understand that if samples are not provided for noted items they will not be considered for award.

Checkbox

(Required: Check if applicable)

**1
6** How many years has your company been in business?

(Required: Numbers only)

**1
7** References

List multiple references and prior experience; preferably with other school districts or governmental agencies, in the last 3 – 5 year period; work or services in the same type and size to the project being proposed. Please list the following information for each school district:

**1
8** Reference 1

Reference 1

**1
9** Reference #1 Contact Person's Name

(Required: Maximum 1000 characters allowed)

20 Reference #1 - Contact Person's School District/Business

(Required: Maximum 1000 characters allowed)

21 Reference #1 Address
Enter Street address, city, state, zip code

(Required: Maximum 1000 characters allowed)

22 Reference #1 Phone Number

() - ext:

(Required)

23 Reference #1 Email

(Required: Email address)

24 Reference #1: Description of services performed and completion date
Describe the services performed and completion date of project.

(Required: Maximum 4000 characters allowed)

25 Reference 2
Reference 2

26 Reference #2 - Contact Person's Name

(Required: Maximum 1000 characters allowed)

27 Reference #2 - Contact Person's School District/Business

(Required: Maximum 1000 characters allowed)

28 Reference #2 Address: Street, City, State, Zip Code

(Required: Maximum 1000 characters allowed)

29 Reference #2 Phone Number

(____) ____ - _____ ext: _____

(Required)

30 Reference #2 Email

(Required: Email address)

31 Reference #2: Description of services performed and completion date

Describe the services performed and completion date of project.

(Required: Maximum 4000 characters allowed)

32 Reference #3

Reference #3

33 Reference #3 Contact Person's Name

(Required: Maximum 1000 characters allowed)

34 Reference #3 - Contact Person's School District/Business

(Required: Maximum 1000 characters allowed)

35 Reference #3 Address: Street, City, State, Zip Code

(Required: Maximum 1000 characters allowed)

36 Reference #3 Phone Number

(____) ____ - _____ ext: _____

(Required)

3 7	Reference #3 Email
	<input type="text"/> <i>(Required: Email address)</i>

3 8	Reference #3: Description of services performed and completion date
	Describe the services performed and completion date of project.
	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
	<hr/> <hr/> <hr/> <hr/> <hr/> <hr/>
	<i>(Required: Maximum 4000 characters allowed)</i>

3 9	Additional References
	Additional References
Additional reference information can be submitted as document. The document can be uploaded to the "Response Attachments" tab within the bid event.	
Be sure to include the following information:	
Reference Contact Name	
Reference contact's school district/business	
Reference address (street, city, state, zip)	
Reference phone number	
Reference email address	
Description of services performed and completion date	

Bid Lines

1	A D OINTMENT 1 oz.TUBE, H2000
	Quantity: <u> 1 </u> UOM: <u> Tube </u> Unit Price: <input type="text"/> \$ Total: <input type="text"/> \$
Supplier Notes: <hr/> <hr/>	
<input type="checkbox"/> No bid	
<input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>	

2	ACE WRAP 3"X 5 YD FABRIC ONLY, H0002
	Quantity: <u> 1 </u> UOM: <u> Each </u> Unit Price: <input type="text"/> \$ Total: <input type="text"/> \$
Supplier Notes: <hr/> <hr/>	
<input type="checkbox"/> No bid	
<input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>	

3 ACETAMINOPHEN 325MG 100/BOTTLE, H1013
 Quantity: 1 UOM: Bottle Unit Price: \$ Total: \$
 Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

4 ALCOHOL RUBBING 16 oz., H4000
 Quantity: 1 UOM: Each Unit Price: \$ Total: \$
 Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

5 ALCOHOL WIPES2 PLY, 200/BX, H4001
 Quantity: 1 UOM: Box Unit Price: \$ Total: \$
 Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

6 ANTIBIOTIC OINTMENT POLYSPORIN 1 oz. TUBE, H2001
 Quantity: 1 UOM: Tube Unit Price: \$ Total: \$
 Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

7 APPLICATOR 6" COTTON-TIP, H6003
 Quantity: 1 UOM: Package Unit Price: \$ Total: \$
 Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

8 APPLICATOR 6" WOODEN STICK, H6000
 Quantity: 1 UOM: Box Unit Price: \$ Total: \$
 Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

9	BAG SANDWICH (BAGGIES) - FOLD OVER 150ct, H6014		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		

No bid
 Additional notes
(Attach separate sheet)

10	BAGS ZIPLOC GALLON 38ct, H6021		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		

No bid
 Additional notes
(Attach separate sheet)

11	BAGS ZIPLOC SANDWICH 50ct, H6022		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		

No bid
 Additional notes
(Attach separate sheet)

12	BAKING SODA 16 oz., H1020		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		

No bid
 Additional notes
(Attach separate sheet)

13	BAND AID 2x4" FABRIC, H0005		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		

No bid
 Additional notes
(Attach separate sheet)

14	BAND AID FINGER TIP FLEX 1¾"x 2" FABRIC, H0006		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		

No bid
 Additional notes
(Attach separate sheet)

1 5	BAND AID 3/4" X 3" FABRIC, H0018		
	Quantity: <u> 1 </u>	UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>
	Total: \$ <input type="text"/>		
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

1 6	BAND AID 1" X 3" FABRIC, H0004		
	Quantity: <u> 1 </u>	UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>
	Total: \$ <input type="text"/>		
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

1 7	BAND AID BUTTERFLY CLOSURE 3/8"x13/16" LAYTEX FREE, H0019		
	Quantity: <u> 1 </u>	UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>
	Total: \$ <input type="text"/>		
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

1 8	BAND AID JUNIOR 3/8"x1 1/2" FABRIC ONLY, H0008		
	Quantity: <u> 1 </u>	UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>
	Total: \$ <input type="text"/>		
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

1 9	BAND AID JUNIOR STRIPS 5/8"x 2 1/4" FABRIC ONLY, H0009		
	Quantity: <u> 1 </u>	UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>
	Total: \$ <input type="text"/>		
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

2 0	BANDAGE CO-FLEX 3"X5YD TAN, H0021		
	Quantity: <u> 1 </u>	UOM: <u> Roll </u>	Unit Price: \$ <input type="text"/>
	Total: \$ <input type="text"/>		
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

2 1	BANDAGE KERLIX GAUZE 4½"X4-1/8 YD, H0022		
	Quantity: <u> 1 </u> UOM: <u>Roll</u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

2 2	BANDAGE SCISSORS, H6001		
	Quantity: <u> 1 </u> UOM: <u>Each</u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

2 3	BLANKET COTTON SIZE 66" X 90", H6002		
	Quantity: <u> 1 </u> UOM: <u>Each</u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

2 4	CALADRYL CLEAR 6 oz., H2002		
	Quantity: <u> 1 </u> UOM: <u>Bottle</u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

2 5	CLOROX ANYWHERE WIPES 75/PKG, G1006		
	Quantity: <u> 1 </u> UOM: <u>Package</u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

2 6	CONTACT SALINE SOLUTION 12 oz., H5000		
	Quantity: <u> 1 </u> UOM: <u>Bottle</u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

27	COVER PROBE, THERMOMETER, 250/PKG WELCHALLYN REF05031, H6023		
	Quantity: <u> 1 </u>	UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>
Supplier Notes: _____			Total: \$ <input type="text"/>
_____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

28	COVERLET 2" X 3" ADHESVE PATCH 50/BOX, H0010		
	Quantity: <u> 1 </u>	UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>
Supplier Notes: _____			Total: \$ <input type="text"/>
_____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

29	CPR FACE SHIELD, H1001		
	Quantity: <u> 1 </u>	UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>
Supplier Notes: _____			Total: \$ <input type="text"/>
_____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

30	CRACKERS CHEESE, (8) 6/PK, H1018		
	Quantity: <u> 1 </u>	UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>
Supplier Notes: _____			Total: \$ <input type="text"/>
_____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

31	CRACKERS PEANUT BUTTER (8) 6/PK, H1017		
	Quantity: <u> 1 </u>	UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>
Supplier Notes: _____			Total: \$ <input type="text"/>
_____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

32	CRACKERS SALTINE 16 oz., H1014		
	Quantity: <u> 1 </u>	UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>
Supplier Notes: _____			Total: \$ <input type="text"/>
_____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

3 3	CROSSTEX TOWELS 13"X18" 500/CS, H3003		
	Quantity: <u> 1 </u>	UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>
			Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

3 4	CUPS 5 oz. SWEETHEART, MULTICOLOR, H3004		
	Quantity: <u> 1 </u>	UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>
			Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

3 5	DIAL DISINFECTANT SOAP, GALLON, H4004		
	Quantity: <u> 1 </u>	UOM: <u> Gallon </u>	Unit Price: \$ <input type="text"/>
			Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

3 6	ENADRYL DYE FREE 4 oz., H1000		
	Quantity: <u> 1 </u>	UOM: <u> Bottle </u>	Unit Price: \$ <input type="text"/>
			Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

3 7	EYE PATCH 1-5/8"x2-5/8", H5004		
	Quantity: <u> 1 </u>	UOM: <u> BOX </u>	Unit Price: \$ <input type="text"/>
			Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

3 8	FEMININE PAD ALWAYS ULTRA THIN NO WINGS, H3010		
	Quantity: <u> 1 </u>	UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>
			Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

39 FLUID PROOF PILLOW 20"x26", H6008
 Quantity: 1 UOM: Each Unit Price: \$ Total: \$
 Supplier Notes: _____

 No bid
 Additional notes
(Attach separate sheet)

40 FLUID PROOF PILLOW 20"x26", H6012
 Quantity: 1 UOM: Package Unit Price: \$ Total: \$
 Supplier Notes: _____

 No bid
 Additional notes
(Attach separate sheet)

41 GAUZE 3" X 3" FLATS 200/PKG, H0011
 Quantity: 1 UOM: Package Unit Price: \$ Total: \$
 Supplier Notes: _____

 No bid
 Additional notes
(Attach separate sheet)

Item Attributes

1. Sample Required

I understand a sample of this item is required to be sent to P&D no later than 2/18/2020 to Purchasing and Distribution Services, 702 SE 291 Highway, Lee's Summit, MO 64063.

Checkbox
(Required: Check if applicable)

42 GAUZE 3" X 4.1" YD ROLL, H0013
 Quantity: 1 UOM: Package Unit Price: \$ Total: \$
 Supplier Notes: _____

 No bid
 Additional notes
(Attach separate sheet)

43 GLOVES NITRILE XX-LARGE LATEX FREE, POWDER FREE, .22 mm (8.6mil), H7004
 Quantity: 1 UOM: Box Unit Price: \$ Total: \$
 Supplier Notes: _____

 No bid
 Additional notes
(Attach separate sheet)

Item Attributes

1. Sample Required

I understand a sample of this item is required to be sent to P&D no later than 2/18/2020 to Purchasing and Distribution Services, 702 SE 291 Highway, Lee's Summit, MO 64063.

Checkbox
(Required: Check if applicable)

4 4 GLOVES VINYL LARGE LATEX FREE, POWDER FREE, .11mm, (4.3 mil), H7002

Quantity: 1 UOM: Box Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

Item Attributes

1. Sample Required

I understand a sample of this item is required to be sent to P&D no later than 2/18/2020 to Purchasing and Distribution Services, 702 SE 291 Highway, Lee's Summit, MO 64063.

Checkbox
(Required: Check if applicable)

4 5 GLOVES VINYL MEDIUM - LAYTEX FREE, POWDER FREE, .11mm, (4.3 mil), H7001

Quantity: 1 UOM: Box Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

Item Attributes

1. Sample Required

I understand a sample of this item is required to be sent to P&D no later than 2/18/2020 to Purchasing and Distribution Services, 702 SE 291 Highway, Lee's Summit, MO 64063.

Checkbox
(Required: Check if applicable)

4 6 GLOVES VINYL SMALL - LAYTEX FREE, POWDER FREE, .11mm, (4.3 mil), H7000

Quantity: 1 UOM: Box Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

Item Attributes

1. Sample Required

I understand a sample of this item is required to be sent to P&D no later than 2/18/2020 to Purchasing and Distribution Services, 702 SE 291 Highway, Lee's Summit, MO 64063.

Checkbox
(Required: Check if applicable)

4 7 GLOVES VINYL X-LARGE - LAYTEX FREE, POWDER FREE, .11mm, (4.3 mil), H7003

Quantity: 1 UOM: Box Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

Item Attributes

1. Sample Required

I understand a sample of this item is required to be sent to P&D no later than 2/18/2020 to Purchasing and Distribution Services, 702 SE 291 Highway, Lee's Summit, MO 64063.

Checkbox

(Required: Check if applicable)

4 8 HAND LOTION MAJOR LUBRISOFT 16 oz., H2003

Quantity: 1 UOM: Bottle Unit Price: \$ Total: \$

Supplier Notes: _____

No bid

Additional notes
(Attach separate sheet)

4 9 HAND SANITIZER 4OZ CITRUS II, H4008

Quantity: 1 UOM: Bottle Unit Price: \$ Total: \$

Supplier Notes: _____

No bid

Additional notes
(Attach separate sheet)

5 0 HANDWIPES WASHCLOTHS 6.6"x7.6" 80/PK, H4003

Quantity: 1 UOM: Package Unit Price: \$ Total: \$

Supplier Notes: _____

No bid

Additional notes
(Attach separate sheet)

5 1 HYDROCORTIZONE CREAM 1 oz.TUBE, H2004

Quantity: 1 UOM: Tube Unit Price: \$ Total: \$

Supplier Notes: _____

No bid

Additional notes
(Attach separate sheet)

5 2 HYDROGEN PEROXIDE 16 oz., H4006

Quantity: 1 UOM: Bottle Unit Price: \$ Total: \$

Supplier Notes: _____

No bid

Additional notes
(Attach separate sheet)

53 HYPOALLERGENIC AIR FRESHENER / ROOM DEODORIZER, H4007

Quantity: 1 UOM: Can Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

Item Attributes

1. Sample Required

I understand a sample of this item is required to be sent to P&D no later than 2/18/2020 to Purchasing and Distribution Services, 702 SE 291 Highway, Lee's Summit, MO 64063.

Checkbox
(Required: Check if applicable)

54 IBUPROFEN BOTTLE 200MG 100/BOTTLE, H1005

Quantity: 1 UOM: Bottle Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

55 ICE PACK, REUSABLE, FLEXIBLE WHEN FROZEN, LARGE 7.5"x6", H6006

Quantity: 1 UOM: Each Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

56 ICE PACK, REUSABLE, FLEXIBLE WHEN FROZEN, SMALL 4"x6", H6005

Quantity: 1 UOM: Each Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

57 ICING, WHITE GEL ICING 1.5 OZ, H1019

Quantity: 1 UOM: Tube Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

58 IRRIGATING EYE SOLUTION 118mL 4fl oz., H5001

Quantity: 1 UOM: Bottle Unit Price: \$ Total: \$

Supplier Notes: _____

No bid
 Additional notes
(Attach separate sheet)

59	JUICE APPLE 4 oz.BX 8/PK, H1006		
	Quantity: <u> 1 </u>	UOM: <u>Package</u>	Unit Price: \$ <input type="text"/> Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

60	LIFE SAVERS INDIVIDUAL WRAPPED, FRUIT VARIETY, 13 oz., H1007		
	Quantity: <u> 1 </u>	UOM: <u>Package</u>	Unit Price: \$ <input type="text"/> Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

61	LYSOL DISINFECTANT SPRAY 19 oz., H4010		
	Quantity: <u> 1 </u>	UOM: <u>Can</u>	Unit Price: \$ <input type="text"/> Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

62	MEDICINE CUPS (PLASTIC) 1oz., H3006		
	Quantity: <u> 1 </u>	UOM: <u>Package</u>	Unit Price: \$ <input type="text"/> Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

63	NAIL CLIPPERS, H6007		
	Quantity: <u> 1 </u>	UOM: <u>Each</u>	Unit Price: \$ <input type="text"/> Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

64	OOTH PASTE - CHILDREN FLUORIDE TOOTHPASTE 4.8oz., H1015		
	Quantity: <u> 1 </u>	UOM: <u>Tube</u>	Unit Price: \$ <input type="text"/> Total: \$ <input type="text"/>
	Supplier Notes: _____ _____		<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

6 5	OTOSCOPE TIPS ADULT SIZE -WELCHALLYN 4.25mm, H6025		
	Quantity: <u> 1 </u> UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

6 6	OTOSCOPE TIPS PEDIATRIC SIZE -WELCHALLYN 2.75mm, H6026		
	Quantity: <u> 1 </u> UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

6 7	SALT 1lb 10oz., H6013		
	Quantity: <u> 1 </u> UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

6 8	SANICLOTH PLUS GERM WIPES, H4002		
	Quantity: <u> 1 </u> UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

6 9	SHARPS BOX CONTAINER W/LID 5.4QT, H6015		
	Quantity: <u> 1 </u> UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 0	SPLINT LARGE CARDBOARD PADDED 18", H6017		
	Quantity: <u> 1 </u> UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 1	SPLINT SMALL CARDBOARD PADDED 12", H6016		
	Quantity: <u> 1 </u> UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 2	TAPE 3M TRANSPORE TAPE 1"x10YDS, H3007		
	Quantity: <u> 1 </u> UOM: <u> Roll </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 3	TAPE CURASILK HYPOALLERGENIC 1"x10yds, H3008		
	Quantity: <u> 1 </u> UOM: <u> Roll </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 4	TELFA NONADHESIVE PADS 3" X 4", H0015		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 5	TISSUE - FACIAL TISSUES, H3005		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 6	TONGUE DEPRESSORS 6", H6019		
	Quantity: <u> 1 </u> UOM: <u> Box </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 7	TOOTH TREASURE CHEST 200/PKG, H6024		
	Quantity: <u> 1 </u> UOM: <u> Package </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 8	TOOTHBRUSH - CHILD SIZE ASSORTED COLORS, H1016		
	Quantity: <u> 1 </u> UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

7 9	TRIANGULAR BANDAGE 40"x40"x56", H0016		
	Quantity: <u> 1 </u> UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

8 0	TWEEZER SLANT TIP, H6020		
	Quantity: <u> 1 </u> UOM: <u> Each </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

8 1	VASELINE PETROLEUM, 3.25oz TUBE, H2005		
	Quantity: <u> 1 </u> UOM: <u> Tube </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

8 2	WATER STERILE 100mL, H4011		
	Quantity: <u> 1 </u> UOM: <u> Bottle </u>	Unit Price: \$ <input type="text"/>	Total: \$ <input type="text"/>
Supplier Notes: _____ _____			<input type="checkbox"/> No bid <input type="checkbox"/> Additional notes <i>(Attach separate sheet)</i>

