

WILLIAMSON COUNTY BID FORM

MEDICAL SUPPLIES FOR WILLIAMSON COUNTY JAIL

BID NUMBER: 09WCA026

NAME OF BIDDER: Cuevas Distribution, Inc.

Mailing Address: P.O. Box 164069

City: Fort Worth State: TX. Zip: 76161

Email Address: sales@cuevasdistribution.com

Telephone: (800) 328-3827 Fax: (817) 626-7316

Mobile Phone: (512) 922-5992

ITEM #	ESTIMATED QUANTITY PER YEAR	DESCRIPTION OF PRODUCT	VENDOR CATALOG NUMBER	HOW SUPPLIED (for example 50 per box/each/100 per case, etc.)	UNIT COST	COST PER BOX/CASE
General medical supplies						
1	60,000 EA	4 X 4 NON-STERILE GAUZE	—	NO BID	—	—
2	50 BX	ALCOHOL PREP PADS MEDIUM 200 PACKS PER BOX	—		—	
3	20 PKG	CHEM STRIP - 10 TEST STRIPS	—		—	
4	5 CS	E.R. LACERATION TRAY SINGLE USE WITH TOOLS	—		—	
5	500 EA	INSTANT ICE PACKS 6" X 9"	—		—	
Diabetic supplies						
6	10 EA	GLUCOMETER KIT - TRUE TRACK SMART SYSTEM	—	↓	—	—
7	100 BTL	GLUCOMETER TEST STRIPES - TRUE TRACK SMART SYSTEM	—		—	
8	200 EA	INSTANT GLUCOSE - 15 GRAMS/TUBE	—		—	
9	50 BX	INSULIN SYRINGE W/NEEDLE 1CC 28GA 1/2INCH	—		—	
10	50,000 EA	LANCETS - UNISTICK 2	—		—	
Gloves						
11	15,000 EA	GLOVES MICROFLEX DIAMOND GRIP, POWDER FREE - SMALL	MF300-S	1000/case	60.00	60.00
12	40,000 EA	GLOVES MICROFLEX DIAMOND GRIP, POWDER FREE - MEDIUM	MF300-M	1000/case	60.00	60.00
13	45,000 EA	GLOVES MICROFLEX DIAMOND GRIP, POWDER FREE - LARGE	MF300-L	1000/case	60.00	60.00
14	45,000 EA	GLOVES MICROFLEX DIAMOND GRIP, POWDER FREE - XL	MF300-XL	1000/case	60.00	60.00

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OVER-THE-COUNTER DRUGS/MEDICATION						
15	15 BTL	ACETAMINOPHEN 500 MG	—	No Bid	—	—
16	20 BTL	ASA 325MG	—		—	—
17	5,000 EA	ASPRIN, BABY CHEWABLE TABLETS	—		—	—
18	500 EA	CLOTRIMAZOLE CREAM 1 OZ			—	—
19	10 CS	ENSURE PLUS CHOCOLATE FLAVOR 8-OZ	—		—	—
20	5 BTL	FOLIC ACID 1 MG	—		—	—
21	300 EA	HYDROCORTISONE CREAM - 1 OZ TUBE	—		—	—
22	100 BTL	IBUPROFEN 200 MG	—		—	—
23	30 BTL	ODOFORM MEDICAATED PACKING STRIP 1/4 INCH BY 5 YARDS	—		—	—
24	10 EA	LICTROL SHAMPOO-1 GAL	—		—	—
25	100 BX	IMODIUM AD 2MG	—		—	—
26	45 EA	MICONAZOL NITRATE VAG CREAM - 7 2% 45 GM	—		—	—
27	30 CS	MILK OF MAGNESIA	—		—	—
28	50 BTL	ONE-A-DAY MULTI-VITAMIN	—		—	—
29	5 BX	ONE STEP HCG PREGNANCY TEST	—		—	—
30	200 EA	ORABASE WITH BENZOCAINE 5 MG	—		—	—
31	2,000 EA	ORAJEL MAX .25-OZ TUBE	—		—	—
32	2,000 EA	PRENATAL VITAMIN NATALINS-RX	—		—	—
33	500 EA	TRIPLE ANTIBIOTIC CREAM 1 OZ	—		—	—
34	400 BX	TUMS/ANTACID	—		—	—

☒ low item basis. (Will accept award on "any or all" items.)

☐ "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)

By signing this form:

- The bidder confirms that he/she has read the entire document and agrees to the terms herein.
- The bidder is acknowledging the Conflict of Interest Clause; pg3, paragraph 4 and agrees to follow necessary requirements

The undersigned, by his/her signature, represents that he/she is authorized to bind the bidder to fully comply with the terms and conditions of the attached Invitation for Bid, Specifications, and Special Provisions for the amount(s) shown on the accompanying bid sheet(s).

Signature of Person Authorized to Sign Bid: Kimberly Chapple Date of Bid: 7-12-08

Printed Name and Title of Signer: KIMBERLY CHAPPLE / Inside Sales Manager

**DO NOT SIGN OR SUBMIT WITHOUT READING ENTIRE DOCUMENT
THIS FORM MUST BE COMPLETED, SIGNED, AND RETURNED WITH BID**