Philips Healthcare

Customer Care Solution Center (800)722-9377



PM ESMA 890457

PCMS AGREEMENT QUOTATION - Comprehensive Onsite

Customer: Williamson County EMS Agreement Quote Date: 2/7/2018 Prior Agreement #: NB - prev 41966614

Address: 303 Martin Luther King Street

Address:

City, State/Zip: Georgetown, TX 78626

Agreement Contact: John Gonzales Telephone: 512-943-1260

Fax:

System Contact: Telephone:

Field Service Engineer: John Rendon, MS01 (Nutt)

Equipment Location:

Department Name:

Email: jgonzales@wilco.org

Extended Onsite Coverage: Mon-Fri 8am to 5pm Multi -Year Option: 17%

Additional Discount: 10%

Payment Terms: Net 30

Agreement Start Date: 4/1/2018

Agreement End Date: 12/31/2022

Billing Schedule: Yearly

Service Sales VP, or

Valid for 60 davs Service Zone VP Philips Representative: Date: Quote # **Dolores Lezo** 724-696-6232 724-696-6105 2/23/2018 5009143-6 Model # Serial # Qty SAP# Start Annual List \$ Extended Annual List \$ Fnd

The product represented, in red, will be considered End of Life, Philips has no obligation to support this past the end date identified herein.

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Defibrillators M3536A US00558712 861289 HeartStart MRx (PA recommended) 4/1/2018 12/31/2022 \$945.00 \$2,835.00 US00558713

US00558714

6302199907 **Defibrillators**

HeartStart MRx (PA recommended) M3536A US00580843 861289 4/1/2018 12/31/2022 \$945.00 \$21,735.00 US00580844

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US00580845

US00580854 US00580855 US00580856 US00580857 US00580858

US00580859 US00580860 US00580861 US00580862 US00580863

US00580864 US00580865

6302199908 **Defibrillators**

M3536A US00580767 861289 HeartStart MRx (PA recommended) 4/1/2018 12/31/2022 \$945.00 \$2,835.00

US00580768 US00580769

Total Annual Service Charge Year 1 Total Annual Service Charge Year 2 Total Annual Service Charge Year 3

Total Annual Service Charge Year 4 Total Annual Service Charge Year 5 \$27.405.00 \$27,405.00 \$27,405.00 \$20,629.04

\$27,405.00

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				products with (PA) in the description) 1 per unit, per year of agreement						
				por year or agreement						
				Promotional Offering:			-\$10,150.00	-\$50,750.00		
				Promotion Performance Assurance is valued a	at \$50,750.00					
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Net Charge Year 5								\$15,059.20		
Quotation Total								\$95,081.80		
							•			
	Prices excl	ude ta	ixes. Ap	plicable taxes will be added to the invoice	. Subject	to credit app	roval.			
	A signed copy of this agr	eement,	for the services	and prices quoted herein, is Customers acceptance that the						
				attached to this quotation are the sole terms applicable to the services ontract administration. The information contained in this document is						
provided to the entity lists	d as the customer solely	in conne	ction with the e	valuation of the purchase and sale. This information shall not be discipated herein are available via http://www.healthcare.philips.com/main.	losed to any other					
(*Terms and Condition	s"). Health Care provi	ders are	reminded that	It if the transactions herein include or involve a loan or discour	nt (including a re	bate or other price				
program, including but	not limited to Medica	re and M	fedicaid, such	ount on cost reports or other applicable reports or claims for p as may be required by state or federal law, including under a			1			
42 CFR 1001.952(h).	Philips reserves all ric	hts with	regard to this	information. Reserved.						
Customer Agreemen		nina and	1 aa arthada	ed Philips representative	Philips by its s	coontanno boronf	, agrees to provide m	gistonanco		
	accepting, this quot	tation co	onstitutes a c	ontract and Customer is	services for th	e equipment listed	d above in accordance	e with		
I	bound by all terms	and con	iditions hered	n. Ol II	the following to	erms set forth her	^{⊪™} 3102475	Digitally signed by 310247526 DH: dc=com, dc=philips, dc=cmi, dc=code1, ou=CODE,		
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propored by Dob St Yuge										
prepared by: Deb St. Yves FAX Fox (800)947-3299 or Mail Purchase Order & Quote For Philips Healthcare, Business Center, msu400, 3000 Minuteman Road, Andover, MA 01810 (800)934-7372 opt 5										

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Prices exclude taxes. Applicable taxes will be added to the invoice. Subject to credit approval. MPORTANT NOTICE: A signed copy of this agreement, for the services and prices quoted herein, is Oustomers acceptance that the Terms and Conditions and information in the Exhibit and the Data Sheet attached to this quotation are the sole terms applicable to the services quoted. The acceptance of his quotation is not brinding upon Philips until further review by Philips contract administration. The information contained in this document is confidential and is provided to the entity listed as the customer solely in correction with the evaluation of the purchase and say. This information shall not be disclosed to any other particular between an conditions of side applicable to the service quoted with purchase and say. The Philips services are not modified to side applicable to the service quoted with purchase and say. The Philips services of side applicable to the service quoted in the services of the services and conditions? Health Care provides are reminded that if the transactions herein include or involve a loan of scount (including a rebate or other price reduction), they must tuilly and accurately report such into an ordiscount on cost reports or other applicable terports or claim for prayment submitted health care program, including but not limited to Medicare and Medicaid, such as may be required by state or federal law, including under any federal or state but not limited to 42 CFR 1001.952(h). Philips reserves all rights with regard to this information. Reserved. Customer Agreement as Quoted Upon customer signing and an authorized Philips representative accepting, this quotation constitutes a contract and Customer is bound by all terms and conditions hereof. Authorized Signature Printed Name Title/Date Customer PO # (Please attach copy of original PO)	Net Charge Year 2 Net Charge Year 3 Net Charge Year 4	! 							\$20,005.65 \$20,005.65 \$20,005.65		
MPORTANT NOTICE: A signed copy of this agreement, for the services and prices quoted herein, is Customers acceptance that the Terms and Conditions and information in the Exhibit and the Data Sheet etlatched to this quotation are the sole terms applicable to the services quoted. The acceptance of this quotation is not brinding upon Philips until further review by Philips contract administration. The information contained in this document is confidential and is provided to the entity listed as the customer solely in connection with the evaluation of the purchase and sale. This information shall not be disclosed to any other parts. The Philips commainterms, conditions! ("Terms and Conditions"), Health Care providers are reminded that if the transactions herein include or involve a loan or discount (including a rebate or other price reduction), they must fully and accurately report such loan or discount on cost reports or other applicable reports or claims for payment submitted health care program, including but not limited to Medicare and Medicaid, such as may be required by state or tederal law, including under any federal or state but not limited to 42 CFR 1001.952(h). Philips reserves all rights with regard to this information. Reserved. Customer Agreement as Quoted Upon customer signing and an authorized Philips representative accepting, this quotation constitutes a contract and Customer is bound by all terms and conditions hereof. Authorized Signature Printed Name Title / Date Title / Date Customer PO # (Please attach copy of original PO)	Quotation Total								\$95,081.80		
Upon customer signing and an authorized Philips representative accepting, this quotation constitutes a contract and Customer is bound by all terms and conditions hereof. Authorized Signature Authorized Signature Philips by its acceptance hereof, agrees to provide maintenance services for the equipment listed above in accordance with the following terms set forth herein. Authorized Signature Authorized Signature Printed Name Title / Date Customer PO # (Please attach copy of original PO) Printed Name	IMPORTANT NOTICE: A signed copy of this agreement, for the services and prices quoted herein, is Customers acceptance that the Terms and Conditions and information in the Exhibit and the Data Sheet attached to this quotation are the sole terms applicable to the services quoted. The acceptance of this quotation is not binding upon Philips until further review by Philips contract administration. The information contained in this document is confidential and is provided to the entity listed as the customer solely in connection with the evaluation of the purchase and sale. This information shall not be disclosed to any other party. The Philips terms and conditions of sale applicable to the service quoted herein are available via http://www.healthcare.philips.com/main/terms_conditions/ ("Terms and Conditions"). Health Care providers are reminded that if the transactions herein include or involve a loan or discount (including a rebate or other price reduction), they must fully and accurately report such loan or discount on cost reports or other applicable reports or claims for payment submitted health care program, including but not limited to Medicare and Medicaid, such as may be required by state or federal law, including under any federal or state but not limited to										
Printed Name Sr. Manager, Contracts 3/13/2018 Title / Date		Upon customer sig accepting, this quo bound by all terms	tation co and cor	onstitutes a c nditions herec	ontract and Customer is of. Authorized	services for the equipment listed above in accordance with the following terms set forth herein. Digitally signed by 310247526 Dik de-com, de-philips, de-emi, de-codel, ou-cODD, ou-LISDAMMMD, ou-Users, ou-LISDAMMMD, ou-LISDAMMDD, o					
Title / Date Customer PO # (Please attach copy of original PO)	B24.10					Sr. Mai	nager, Contra	cts 3/1	13/2018		
Customer PO #(Please attach copy of original PO)	Printed Name				Title/Date						
(Please attach copy of original PO)	Title / Date					-					
prepared by: Deb St.Yves			riginal P	O)		-					
FAX To: (800)947-329 or Mail Purchase Order & Quote To: Philips Healthcare, Business Center, ms0400, 3000 Minuteman Road, Andover, MA 01810 (800)934-7372 opt 5	prepared by:	Deb St.Yves	& Ouete	To: Philips Usa	theara Rusinges Cantar melliffly 3/1/1/1 Minutamon Dood Andrews	ΜΔ ()1910 /000 0	334-7372 ont 5				
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