

**October 20, 2015**

**ADDENDUM NO. 1  
IFB #Y16-142-PD  
Animal Care Supplies**

The above Invitation for Bids is amended as follows:

1. Change BID DUE DATE to: Thursday October 29, 2015.
2. Replace BID Response Form pages 25 – 40 with new Bid Response Form attached pages 25A – 40A.
3. All other specifications, terms and conditions remain the same.

Perry Davis  
Senior Purchasing Agent

**ACKNOWLEDGEMENT OF ADDENDA**

- a. The bidder shall acknowledge receipt of this addendum by completing the applicable section in the solicitation or by completion of the acknowledgement information on the addendum. Either form of acknowledgement must be completed and returned not later than the date and time for receipt of the bid.
- b. Receipt acknowledged by:

\_\_\_\_\_  
Authorized Signer

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of Bidder

**BID RESPONSE FORM  
IFB #Y16-142-PD**

The Contractor shall provide all labor and other resources necessary to provide the goods and/or equipment in strict accordance with the specifications defined in this solicitation for the amounts specified in this Bid Response Form, inclusive of overhead, profit and any other costs.

<b>ITEM NO.</b>	<b>DESCRIPTION</b>	<b>UNIT</b>	<b>ESTIMATED ANNUAL QUANTITY</b>	<b>X</b>	<b>UNIT PRICE</b>	<b>=</b>	<b>ESTIMATED TOTAL EST. BID</b>
1.	Bandage Surgical Sponges 4x4 200 per box	Box	1,000		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
2.	Drape 38"X100yd	roll	200		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
3.	0.1 cc disposable Pipette tips (96/rack) Equivalent to Abaxis 500-9007	rack	30		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
4.	1.3 Purple Top 30 per box	Box	30		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
5.	Comp. Diagnostic Profile Pkg (pkg of 48) Equivalent to Abaxis 500-0038-48		30		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
6.	Fecal Floatation Solution	Gal	20		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

\_\_\_\_\_  
Company Name

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7.	Fecal Loops 9 1/2"	ea	20		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
8.	Fecal Loops For Puppies	ea	20		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
9.	Heparin Lithium Tubes (1.3ml green top, 100/box) Equivalent to Abaxis 500-9003	box	30		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
10.	HM5 Normal Control 2 ml vial Equivalent to Abaxis 770-9029	ea	30		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
11.	IV Admin set 15 drops	ea	200		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
12.	VetScan HM5 Reagent Pack Equivalent to Abaxis 770-9000	pkg	30		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
13.	Pill Pockets 3.5oz 6 x 30 ct.	pkg	200		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

\_\_\_\_\_  
Company Name

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14.	Pill Pockets 7.6 oz 30 per pkg	pkg	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
15.	Spray Bottles	ea	100		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
16.	Spray Nozzle	ea	100		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
17.	Sterile empty vial 30cc 25 per box	box	350		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
18.	Sundry jar unlabeled plastic	box	100		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
19.	Vials 13 dram Medication	Box	100		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
20.	Nutrical 5 oz.	tube	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
21.	Gloves, Nitrile, small 100 per box	box	200		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

\_\_\_\_\_  
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<b>ITEM NO.</b>	<b>DESCRIPTION</b>	<b>UNIT</b>	<b>ESTIMATED ANNUAL QUANTITY</b>	<b>X</b>	<b>UNIT PRICE</b>	<b>=</b>	<b>ESTIMATED TOTAL EST. BID</b>
22.	Gloves, Nitrile, Med 100 per box	Box	200		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
23.	Gloves, Nitrile, Large 100 per box	Box	800		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
24.	Gloves, Nitrile, XL 100 per box	Box	800		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
25.	Gloves Non Powdered Latex, Small 100 per box	Box	100		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
26.	Gloves Non Powdered Latex, Med 100 per box	Box	100		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
27.	Gloves Non Powdered Latex, Large 100 per box	Box	600		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
28.	Gloves Non Powdered Latex, XL 100 per box	Box	600		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		

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29.	Gloves - Exam Powdered Latex exam, Small 100 per box	Box	100		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
30.	Gloves - Exam Powdered Latex exam, Medium 100 per box	Box	100		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
31.	Gloves - Exam Powdered Latex exam, Large 100 per box	Box	600		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
32.	Gloves - Exam Powdered Latex exam, XL 100 per box	Box	600		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
33.	Gloves - Surgery Powdered, sensi-touch Size 6.5 50 per box	Box	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
34.	Gloves - Surgery Powdered, sensi-touch Size 8.0 50 per box	Box	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
35.	Gloves - Surgery Synthetic Polyisoprene w/aloe Size 7.5 50 per box	Box	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

\_\_\_\_\_  
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36.	Gloves – Vinyl All purpose Medium 100 per box	Box	200		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
37.	Gloves – Vinyl All purpose Large 100 per box	Box	600		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
38.	Gloves – Vinyl All purpose XL 100 per box	Box	600		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
39.	Shampoo Flea & Tick	Gal	60		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
40.	Shampoo, Grooming	Gal	60		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
41.	Cautery Kit Replace a tip	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
42.	Clipper Blades Large	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

\_\_\_\_\_  
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43.	Indicator Strips Sterile 250 per box	box	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
44.	Instrument Cleaner	ea	50		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
45.	Instrument Lubricant For surgical utensils	Gal	100		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
46.	Instrument wrapper 24 x 24 1 per pkg	pkg	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
47.	Miltex surgical blades #10 100 per box	box	400		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
48.	Miltex surgical blades #15 100 per box	box	400		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
49.	Pre loaded staplers 12 per box	case	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

\_\_\_\_\_  
Company Name



<b>ITEM NO.</b>	<b>DESCRIPTION</b>	<b>UNIT</b>	<b>ESTIMATED ANNUAL QUANTITY</b>	<b>X UNIT PRICE</b>	<b>= ESTIMATED TOTAL EST. BID</b>
50.	Alcohol 70% 32oz	btl	500	\$_____	\$_____
	_____ Manufacturer Name	_____ Stock Number		_____ Package	
51.	Lactated Ringers 1000 ml 12 per box	box	200	\$_____	\$_____
	_____ Manufacturer Name	_____ Stock Number		_____ Package	
52.	Sodasorb CO2 Absorber (3lb pkg)	ea	100	\$_____	\$_____
	_____ Manufacturer Name	_____ Stock Number		_____ Package	
53.	Spray Clippercide	ea	60	\$_____	\$_____
	_____ Manufacturer Name	_____ Stock Number		_____ Package	
54.	Ziplock bags 1 gallon size 30 per box	box	300	\$_____	\$_____
	_____ Manufacturer Name	_____ Stock Number		_____ Package	
55.	Ziplock bags 1 quart size 30 per box	box	300	\$_____	\$_____
	_____ Manufacturer Name	_____ Stock Number		_____ Package	
56.	Mask Anesthesia Canine large	ea	10	\$_____	\$_____
	_____ Manufacturer Name	_____ Stock Number		_____ Package	

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57.	Mask Anesthesia Canine small	ea	10		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
58.	Mask Anesthesia Feline Medium Pliable soft plastic	ea	100		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
59.	Mask Surgical Tie on 50 per box	box	20		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
60.	Shoe Covers 500 per box	box	20		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
61.	Tubes 15 ml centrifuge Pkg 50 per box		150		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
62.	Tubes plastic Endotracheal w/10 cuffs	ea	500		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
63.	Tubes plastic Endotracheal w/10.5 cuffs	ea	300		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		

\_\_\_\_\_  
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64.	Tubes plastic Endotracheal w/3.0 cuffs	ea	300		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
65.	Tubes plastic Endotracheal w/4.0 cuffs	ea	200		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
66.	Tubes plastic Endotracheal w/5.0 cuffs	ea	700		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
67.	Tubes plastic Endotracheal w/6.0 cuffs	ea	800		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
68.	Tubes plastic Endotracheal w/7.0 cuffs	ea	600		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
69.	Tubes plastic Endotracheal w/8.0 cuffs	ea	600		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
70.	Tubes plastic Endotracheal w/9.0 cuffs	ea	600		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		

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<b>ITEM NO.</b>	<b>DESCRIPTION</b>	<b>UNIT</b>	<b>ESTIMATED ANNUAL QUANTITY</b>	<b>X</b>	<b>UNIT PRICE</b>	<b>=</b>	<b>ESTIMATED TOTAL EST. BID</b>
71.	Cardboard Pet Carrier 12 per case	case	800		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
72.	E-Collars 10cm	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
73.	E-Collars 12.5cm	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
74.	E-Collars 15cm	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
75.	E-Collars 20cm	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
76.	E-Collars 25cm	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
77.	E-Collars 30cm	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

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<b>ITEM NO.</b>	<b>DESCRIPTION</b>	<b>UNIT</b>	<b>ESTIMATED ANNUAL QUANTITY</b>	<b>X</b>	<b>UNIT PRICE</b>	<b>=</b>	<b>ESTIMATED TOTAL EST. BID</b>
78.	E-Collars 8cm	ea	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
79.	Leashes 52" flat (100/bundle)	bundle	200		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
80.	Sutures #0 Monoweb w/tapered needle (Q987) 12 per box	Box	400		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
81.	Sutures #1 Mono Synthetic w/1/2 Tapered needle (Q346) 12 per box	Box	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
82.	Sutures #1 Monofilament 3/8 Curved reverse 12 per box	Box	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
83.	Sutures #2/0 Mono 3/8 Curved reverse 12 per box	Box	350		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
84.	Sutures #3/0 Mono Synthetic 3/8 curved reverse 12 per box	Box	350		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

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Company Name

<b>ITEM NO.</b>	<b>DESCRIPTION</b>	<b>UNIT</b>	<b>ESTIMATED ANNUAL QUANTITY</b>	<b>X</b>	<b>UNIT PRICE</b>	<b>=</b>	<b>ESTIMATED TOTAL EST. BID</b>
85.	Sutures #4/0 Mono 3/8 curved reveres (Q922) 12 per box	Box	150		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
86.	Needles 18 x 1 ½ monoject 100 per box	Box	30		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
87.	Needles 19 x 1 ½ monoject 100 per box	Box	30		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
88.	Needles 20 x 1 ½ Monoject 100 per box	Box	30		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
89.	Needles 20 x 1 monoject 100 per box	Box	150		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
90.	Needles 22 x 1 ½ 100 per box	Box	50		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
91.	Needles 22 x 1 100 per box	Box	150		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		

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Company Name

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92.	Needles 25 x 5/8 100 per box	Box	150		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
93.	Syringe Caps monoject 100 per box	Bags	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
94.	Syringes 12ml luer lock Tip without needle 100 per box	Box	120		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
95.	Syringe 6ml luer lock tip w/21g x 1 needle 50 per box	Box	300		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
96.	Syringes 12 ml luer Lock tip without needle <b>DELETE: DUPLICATE OF LINE 94</b>	<del>box</del>	<del>40</del>		<del>\$_____</del>		<del>\$_____</del>
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
97.	Syringes 1ml regular Tip w/25g needle 100 per box	box	800		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		
98.	Syringes 20 ml luer Lock tip without needle 50 per box	box	60		\$_____		\$_____
	_____ Manufacturer Name	_____ Stock Number			_____ Package		

\_\_\_\_\_  
Company Name

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99.	Syringes 3 ml luer Lock tip without needle 100 per box	Box	300		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
100.	Syringes 3ml luer Lock w.22g needle 100 per box	Box	1000		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		
101.	Indicator Tape Sterile 100 per box	Box	75		\$_____		\$_____
	_____ Manufacturer Name		_____ Stock Number		_____ Package		

**TOTAL ESTIMATED BID ITEMS 1 THROUGH 101**      \$\_\_\_\_\_

*FOB DESTINATION*

Indicate if items are to be delivered via common carrier\* \_\_\_\_\_ or Owned/Hired Vehicle \_\_\_\_\_ \*If delivery will occur via common carrier, insurance requirements are not applicable. If delivery will occur via owned or hired vehicles, insurance requirements are applicable.

\_\_\_\_\_  
Company Name

**IMPORTANT NOTE: When completing your bid, do not attach any forms which may contain terms and conditions that conflict with those listed in the County's bid documents(s). Inclusion of additional terms and conditions such as those which may be on your company's standard forms shall result in your bid being declared non-responsive as these changes will be considered a counteroffer to the County's bid.**

Delivery shall be not later than seven (7) calendar days After Receipt of Order (ARO) per Special Terms and Conditions.

Inquiries regarding this Invitation for Bids may be directed to Perry Davis, Senior Purchasing Agent, at [Perry.Davis@ocfl.net](mailto:Perry.Davis@ocfl.net).



**Bid Response Documents - The following documents constitute your bid:**

- A. Bid Response Form, Authorized Signatories/Negotiators, Drug-Free Workplace, Schedule of Sub-contracting, Conflict/Non-Conflict of Interest Form, E-Verification Certification, and current W9, Relationship Disclosure Form and Orange County Specific Project Expenditure Report. **Please make sure forms are fully executed where required.**
- B. Qualifications of Bidders information, per Special Terms and Conditions.
- C. Completed attached reference documentation.
- D. Descriptive literature or detailed specifications for any equal goods proposed.
- E. Examples: Bid Deposit, Sub-contractor, per Special Terms and Conditions.