

## PRICE

Any quantities shown are estimated only for bid canvassing purposes.

### SECTION 1

NO.	ITEM	UOM	QTY	TERM	PRICE	DAILY RATE	MONTHLY RATE	YEARLY RATE
1	Zyno Pole Mounted Pump Infusion Pump System	MO	12	Lease		\$ 1.81/EA	\$ 55.00/EA	\$ 660.00/EA
2	Zyno Pole Mounted Pump Infusion Pump System	EA	12	Purchase	\$ 2,025.00/EA			
3	Zyno 40" Secondary Administration Set (50/box)	BX	1	Purchase	\$ 55.81/BX			
4	Zyno 105" Primary Administration Set (50/box)	BX	1	Purchase	\$ 209.92/BX			

### SECTION 2

During the contract period, additional product line supplements not specified above may be accepted as additional contracted items. The acceptance of product line supplements or additional items is at the discretion of the Buyer. Acceptable supplement items may include items that become an upgrade of the goods offered under this Quote. The County reserves the right not to award or add items for which prices are deemed high and not in the best interest of the County (cost defined as Direct Product Cost Plus Freight). Provide percentage discount (-) or mark-up (+) for additional items from pricelist or catalog.

DISCOUNT (-) OR MARK-UP (+)	PERCENTAGE
N/A	N/A %

Submit your net price list or catalog with discount of other items you carry that may be purchased from the awarded contract with warranty information with your quote. Items which do not have established and auditable pricing shall not be purchased against this contract.

**QUOTE SIGNATURE PAGE**

**ZYNO PUMP RENTAL 21-048-CARE**

**Signature on File**

X

00

(Signature and Title)

6/11/2021

(Date)

**QUOTATION MUST BE SIGNED FOR CONSIDERATION**

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

Full Business Name of Bidder	NDC Homecare, LLC d/b/a Wolf Medical Supply
Main Business Address	13951 NW 8th Street
City, State, Zip Code	Sunrise, FL 33325
Telephone Number	954-835-2300 ext. 207
Email Address	aschoenberg@wolfmed.com
Bid Contact Person	Ahoova Schoenberg