

#### THE COUNTY OF DUPAGE FINANCE - PROCUREMENT RESPIRATORY EQUIPMENT RENTAL 21-072-CARE **BID TABULATION**

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				Pulmor	nary I	Exchange,	Ltd	
NO.	ITEM	QTY	DAILY RENTAL RATE		I RENIAL		EXTENDED PRICE	
1	BASIC B-PAP RENTAL	1	\$	15.00	\$	450.00	\$	450.00
2	BASIC C-PAP	5	\$	10.00	\$	300.00	\$	1,500.00
3	AUTO TITRATE C-PAP RENTAL	1	\$	10.00	\$	300.00	\$	300.00
4	BI-PAP WITH BACK-UP RATE RENTAL (ST BI-PAP)	2	\$	24.00	\$	720.00	\$	1,440.00
5	AVAP MACHINE	1	\$	24.00	\$	720.00	\$	720.00
							\$	4,410.00

#### NOTES

Advacare Systems and Integra Healthcare declined to bid due to industry shortages of respiratory equipment.

DW,NE	Bid Opening 10/15/2021 @ 2:30 PM
14	Invitations Sent
2	Total Vendors Requesting Documents
1	Total Bid Responses

# SECTION 7 - BID FORM PRICING

ITEM	DESCRIPTION	DAILY COST	MONTHLY
1	BASIC B-PAP RENTAL	\$ 15.00	\$450.00
2	BASIC C-PAP.	\$ 10.00	\$300.00
3	AUTO TITRATE C-PAP RENTAL	\$10.00	\$300.00
4	BI-PAP WITH BACK-UP RATE RENTAL (ST BI-PAP)	\$24.00	\$720.00
5	AVAP MACHINE (Average volume assured pressure support – adjusts to maintain a target average ventilation over several breaths)	\$24.00	\$720.00
	GRAND TOTAL	\$83.00	\$2490.00

#### SECTION 9 - MANDATORY FORM RENTAL OF RESPIRATORY CARE EQUIPMENT 21-072-CARE

(PLEASE TYPE OR PRINT THE FOLLOWING INFORMATION)

	- ultivarile of bloder	Pulmonary Exchange, Ltd					
	Main Business Address 9840 Southwest Highway						
	City, State, Zip Code	Oak Lawn, IL 60453					
	Telephone Number	708-423-8888 Email rayjr@pelvip.com					
	Bid Contact Person	Ray Kalinsky					
	the Owner/Sole Proprietor  rein after called the Biffiler e on File	a Member authorized to an Officer of the a Member of the Join sign on behalf of the Corporation Venture  Partnership  and that the members of the Partnership or Officers of the Corporation are as follows:					
	(President or Par	(Vice-President or Partner)					
	(Secretary or Par	ner) (Treasurer or Partner)					
forn of t	ns of agreement and the content of the procurement Officer, uments referred to or ment	res that the only person or parties interested in this bid as principals are those named herein; offusion with any other person, firm or corporation; that he has fully examined the proposed intract specifications for the above designated purchase, all of which are on file in the office DuPage County, 421 North County Farm Road, Wheaton, Illinois 60187, and all other oned in the contract documents, specifications and attached exhibits, including					
	lenda No,,						
and	other means of constructi	ses and agrees, if this bid is accepted, to provide all necessary machinery, tools, apparatus, on, including transportation services necessary to furnish all the materials and equipment ontract documents in the manner and time therein prescribed.					
me.	pidder and in accordance	es and warrants that he is duly authorized to execute this certification/affidavit on behalf of vith the Partnership Agreement or by-laws of the Corporation, and the laws of the State of is binding upon the Bidder and is true and accurate.					
		es that the Bidder is not barred from bidding on this contract as a result of a violation of					

ILCS 130/1 et seq., the Illinois Prevailing Wage Act.

The undersigned certifies that he has examined and carefully prepared this bid and has checked the same in detail before submitting this bid, and that the statements contained herein are true and correct.

either 720 Illinois Compiled Statutes 5/33 E-3 or 5/33 E-4, bid rigging or bid-rotating, or as a result of a violation of 820

If a Corporation, the undersigned, further certifies that the recitals and resolutions attached hereto and made a part hereof were properly adopted by the Board of Directors of the Corporation at a meeting of said Board of Directors duly called and held and have not been repealed nor modified, and that the same remain in full force and effect. (Bidder may be requested to provide a copy of the corporate resolution granting the individual executing the contract documents authority to do so.)

Further, the Bidder certifies that he has provided equipment, supplies, or services comparable to the items specified in this contract to the parties listed in the reference section below and authorizes the County to verify references of business and credit at its option.

Finally, the Bidder, if awarded the contract, agrees to do all other things required by the contract documents, and that he will take in full payment therefore the sums set forth in the bidding schedule (subject to unit quantity adjustments based upon actual usage).

## CONTRACT ADMINISTRATION INFORMATION:

CORRESPO	ONDENCE TO CONTRACTOR:	REMIT TO CO	ONTRACTOR:		
NAME	Pulmonary Exchange, Ltd	NAME	Pulmonary Exchange, Ltd		
CONTACT	Ray Kalinsky	CONTACT	and the state of t		
ADDRESS	9840 Southwest Highway	ADDRESS	9840 Southwest Highway		
CITY ST ZIP	Oak Lawn, IL 60453	CITY ST ZIP	Oak Lawn, IL 60453		
TX	708-423-8888	TX	708-423-8888		
FX	708-423-9133	FX	708-423-9133		
EMAIL	rayjr@pelvip.com	EMAIL			
COUNTY BIL	L TO INFORMATION:	COUNTY SHI	P TO INFORMATION:		
400 North Co Wheaton, IL 6		DuPage Care Center – Clementine Nelson 400 North County Farm Road Wheaton, IL 60187			
TX: (630) 40		TX: (630) 407-4251			
EMAIL: cleme	entine.nelson@dupageco.org	EMAIL: clementine.nelson@dupageco.org			

ALL MATERIALS MUST BE BID AND SHIPPED F.O.B. DELIVERED (FREIGHT INCLUDED IN PRICE)

### SECTION 8 - BID FORM SIGNATURE PAGE

The Contractor agrees to provide the service, and/or supplies as described in this solicitation and subject, without limitation, to all specifications, terms, and conditions herein contained. Bidder shall acknowledge receipt of each addendum issued in the space provided on the bid form.

the space provided on the bid long.		
Signature on File		
	*	
(Signature and Title	CEO	
		CORPORATE SEAL (If available)
BID MUST BE SIGNI	ED AND NOTARIZED (WITH SEAL)	FOR CONSIDERATION
Subscribed and sworn to before me this _ Signature on File	11th day of October	AD, 20_2(
(Notary Pub/Ic)	OFFICIAL SEAL ROSE A JAY NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES: 12/20/22	12/20/22

SEAL