

**SOLICITATION/CONTRACT/ORDER FOR COMMERCIAL ITEMS
OFFEROR TO COMPLETE BLOCKS 12, 17, 23, 24, & 30**

1. REQUISITION NO. PAGE 1 OF 125

2. CONTRACT NO. **VA797-P-0193** 3. AWARD/EFFECTIVE DATE **3/9/2010** 4. ORDER NO. 5. SOLICITATION NUMBER **VA-797-09-RP-0006** 6. SOLICITATION ISSUE DATE **07-20-2009**

7. SOLICITATION INFORMATION CALL: a. NAME **Timothy Richards, Contracting Officer** b. TELEPHONE NO. (No Collect Calls) **(708) 786-4959** 8. OFFER DUE DATE/LOCAL TIME **08-19-2009 4:00 PM**

9. ISSUED BY Department of Veterans Affairs
OA&L / National Acquisition Center
Building 37, Attn: Timothy Richards
1st Avenue, One Block North of Cermak
Hines IL 60141

10. THIS ACQUISITION IS UNRESTRICTED OR SET ASIDE: % FOR: Cascaded
 SMALL BUSINESS EMERGING SMALL BUSINESS
 HUBZONE SMALL BUSINESS
 SERVICE-DISABLED VETERAN-OWNED SMALL BUSINESS 8(A)

NAICS: **500** SIZE STANDARD: **Employees**

11. DELIVERY FOR FOB DESTINATION UNLESS BLOCK IS MARKED SEE SCHEDULE

12. DISCOUNT TERMS

13a. THIS CONTRACT IS A RATED ORDER UNDER DPAS (15 CFR 700)

13b. RATING **N/A**

14. METHOD OF SOLICITATION RFQ IFB RFP

15. DELIVER TO National Acquisition Center
1st Avenue, One Block North of Cermak
Building 37
HINES IL 60141

16. ADMINISTERED BY Department of Veterans Affairs
OA&L / National Acquisition Center
Building 37
1st Avenue, One Block North of Cermak
Hines IL 60141

17a. CONTRACTOR/OFFEROR CODE FACILITY CODE

18a. PAYMENT WILL BE MADE BY Department of Veterans Affairs
Medical Facilities
In accordance with Delivery Order Instructions

17b. CHECK IF REMITTANCE IS DIFFERENT AND PUT SUCH ADDRESS IN OFFER

18b. SUBMIT INVOICES TO ADDRESS SHOWN IN BLOCK 18a UNLESS BLOCK BELOW IS CHECKED SEE ADDENDUM

20. SCHEDULE OF SUPPLIES/SERVICES	21. QUANTITY	22. UNIT	23. UNIT PRICE	24. AMOUNT
<p>PRIME VENDOR PROGRAM FOR THE DISTRIBUTION OF MEDICAL AND SURGICAL SUPPLIES AND RELATED SERVICES.</p> <p>PLEASE REFER TO THE "STATEMENT OF WORK" OF THE SOLICITATION.</p> <p>(Use Reverse and/or Attach Additional Sheets as Necessary)</p>				

25. ACCOUNTING AND APPROPRIATION DATA 26. TOTAL AWARD AMOUNT (For Govt. Use Only) **Est. Base Period: \$8,699,360.**

27a. SOLICITATION INCORPORATES BY REFERENCE FAR 52.212-1, 52.212-4, FAR 52.212-3 AND 52.212-5 ARE ATTACHED. ADDENDA ARE ARE NOT ATTACHED.

27b. CONTRACT/PURCHASE ORDER INCORPORATES BY REFERENCE FAR 52.212-4, FAR 52.212-5 IS ATTACHED. ADDENDA ARE ARE NOT ATTACHED.

28. CONTRACTOR IS REQUIRED TO SIGN THIS DOCUMENT AND RETURN One COPIES TO ISSUING OFFICE. CONTRACTOR AGREES TO FURNISH AND DELIVER ALL ITEMS SET FORTH OR OTHERWISE IDENTIFIED ABOVE AND ON ANY ADDITIONAL SHEETS SUBJECT TO THE TERMS AND CONDITIONS SPECIFIED

29. AWARD OF CONTRACT: REF. _____ OFFER DATED _____ YOUR OFFER ON SOLICITATION (BLOCK 5), INCLUDING ANY ADDITIONS OR CHANGES WHICH ARE SET FORTH HEREIN IS ACCEPTED AS TO ITEMS:

30a. SIGNATURE OF OFFEROR/CONTRACTOR *John G. Luyben*

31a. UNITED STATES OF AMERICA (SIGNATURE OF CONTRACTING OFFICER) *Timothy Richards*

30b. NAME AND TITLE OF SIGNER (TYPE OR PRINT) **John G. Luyben, Sr. Vice President**

30c. DATE SIGNED **8/18/09**

31b. NAME OF CONTRACTING OFFICER (TYPE OR PRINT) **Timothy Richards**

31c. DATE SIGNED **3/9/2010**

SUMMARY OF AWARD

Addenda to Standard Form 1449 – Contract VA797-P-0193 **Page 2 of 4**

Contractor: Professional Hospital Supply
41980 Winchester Road
Temecula, CA 02590

Contract Number: VA797-P-0193

Includes Amendments 1-7, 9

Payment Terms: Net 30 Days

Item Awarded: All VA Facilities Within VISN 21, EXCEPT HAWAII

Date of Award: March 9, 2010

Contract Period: August 1, 2010 through December 19, 2011, with two 20-month option periods.

Estimated Value of Award Base Period:

Value of Products: \$8,122,640.

Distribution Fees: \$576,720.

Total Estimated Value of Award: \$8,699,360. (Base Period)

Distribution Fees: Conventional Delivery Method: 3.5%
Just-in-Time Delivery Method: 7.5%

Fill Rates: Conventional: 95%, 5 Deliveries per week
Just-In-Time: 98%, 5 Deliveries per week

Emergency Deliveries: Four monthly deliveries per account at no additional cost.
Thereafter: \$125.00 per Delivery.

SUMMARY OF AWARD
Addenda to SF 1449 – Contract VA797-P-0193
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Conventional Delivery Method – Professional Hospital Supply

VALUE-ADDED SERVICES	Adjustment To Conventional Base Distribution Fee. (Please indicate proposed adjustment as either an increase(+) or decrease (-) to the conventional base distribution fee. Please indicate "No Change" for no adjustment to conventional base distribution fee.)
Deliveries One or Two Days per week	-0.30% 1 delivery/week -0.30% 21 deliveries/week
Deliveries Four or Five Days per week	No Change
Saturdays deliveries (see note 1)	+0.50%
Sunday deliveries (see note 1)	+0.50%
97% fill-rate	No Change
Deliveries on Federal Government Holidays (see note 1)	No Change
Bar Code Labels	\$0.15 per label
Fill/Call	No Change

Note1: Any charges for this service will apply only to the specific day on which the service was provided.

SUMMARY OF AWARD

Addenda to SF 1449 – Contract VA797-P-0193

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Just-In-Time Delivery Method – Professional Hospital Supply

VALUE-ADDED SERVICES	Adjustment To Just-In-Time Base Distribution Fee. (Please indicate proposed adjustment as either an increase or decrease to the Just-in-Time Base Distribution Fee. Please indicate "No Change" for no adjustment to the Just-In-Time Base Distribution Fee.)
Saturday Deliveries (see note 1)	+0.50%
Sunday Deliveries (see note 1)	+0.50%
Deliveries on Federal Government Holidays (see note 1)	No change
Fill/Call	No change

Note1: Any charges for this service will apply only to the specific day on which the service was provided.

6.7. At the discretion of facilities, changes to delivery service levels and/or value-add services may be made by facilities by providing the awarded prime vendor contractor 15 days advance notice.