

# BID SOLICITATION



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
 CAPITOL HILL  
 PROVIDENCE RI 02908

**BID NUMBER: B06046**  
**TITLE: SANITARY NAPKINS**  
**BID OPENING DATE AND TIME:**  
**03/03/2006 11:00 AM**

BUYER: ALMA MILLER  
 PHONE #: (401) 222 - 2142 ext. 124  
 BLANKET PERIOD: 4/1/2006 - 3/31/2009

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**CORRECTIONS**  
**DOC BUSINESS OFFICE**  
**39 HOWARD AVENUE**  
**CRANSTON RI 02920**

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**CORRECTIONS**  
**DOC CDC WAREHOUSE**  
**ATTN: SEE BELOW ON PO**  
**144 POWER RD**  
**CRANSTON RI 02920**

Requisition Number(s): R77A068021

Item	Class-Item	Quantity	Unit	Unit Price	Total
	<p>BLANKET REQUIREMENTS: 04/01/06-03/31/09</p> <p>BIDDING</p> <p>(a) A single price shall be quoted for each item against which a proposal is submitted. This price will be the maximum in effect during the agreement period. Any price decline at the manufacturer's level shall be reflected in a reduction of the agreement price to the State.</p> <p>(b) Quantities, if any, are estimated only. The agreement shall cover the actual quantities ordering during the period. Deliveries will be billed at the single, firm, awarded unit price quoted regardless of the quantities ordered.</p> <p>(c) Bid price is net F.O.B. destination and shall include inside delivery at no extra cost.</p> <p>(d) Bids for single items and/or a small percentage of total items listed, may, at the State's sole option, be rejected as being non-responsive to the intent of this request.</p> <p>ORDERING</p> <p>(a) The User Agency(s) will submit individual orders for the various items and various quantities as may be required during the agreement period.</p> <p>(b) Exception - Regardless of any agreement resulting from this bid, the State reserves the right to solicit prices separately for any extra large requirements for delivery to specific destinations.</p>				

It is the Vendor's responsibility to check and download any and all addenda from the RIVIP. This offer may not be considered unless a signed RIVIP generated Bidder Certification Cover Form is attached and the Unit Price column is completed. The signed Certification Cover Form must be attached to the front of the offer. When delivering offers in person to One Capitol Hill, vendors are advised to allow at least one hour additional time for clearance through security checkpoints.

DELIVERY: \_\_\_\_\_

RIVIP VENDOR ID#: \_\_\_\_\_

TERMS OF PAYMENT: \_\_\_\_\_

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Item	Class-Item	Quantity	Unit	Unit Price	Total
	<p>THIS IS A MULTI-YEAR BID/CONTRACT. PER RHODE ISLAND STATE LAW 37-2-33, CONTRACT OBLIGATIONS BEYOND THE CURRENT FISCAL YEAR ARE SUBJECT TO AVAILABILITY OF FUNDS. CONTINUATION OF THE CONTRACT BEYOND THE INITIAL FISCAL YEAR WILL BE AT THE DISCRETION OF THE STATE. TERMINATION MAY BE EFFECTED BY THE STATE BASED UPON DETERMINING FACTORS SUCH AS UNSATISFACTORY PERFORMANCE OR THE DETERMINATION BY THE STATE TO DISCONTINUE THE GOODS/SERVICES, OR TO REVISE THE SCOPE AND NEED FOR THE TYPE OF GOODS/SERVICES; ALSO MANAGEMENT OWNER DETERMINATIONS THAT MAY PRECLUDE THE NEED FOR GOODS/SERVICES.</p>				
1.0	<p>652-39                      MAXI PADS YEAR 1 (04/01/06-03/31/07)                      HOSPITAL SPECIALTY 500IM, INDIVIDUALLY WRAPPED, TRI-FOLD THIN MAXI WITH ADHESIVE STRIP (500 EA PER CASE)                       BRAND _____                      CASE COUNT _____</p>	250.00	CS		
2.0	<p>652-39                      MAXI PADS YEAR 2 (04/01/07-03/31/08)                      HOSPITAL SPECIALTY 500IM, INDIVIDUALLY WRAPPED, TRI-FOLD THIN MAXI WITH ADHESIVE STRIP (500 EA PER CASE)                       BRAND _____                      CASE COUNT _____</p>	250.00	CS		

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Requisition Number(s): R77A068021

Item	Class-Item	Quantity	Unit	Unit Price	Total
3.0	652-39 MAXI PADS YEAR 3 (04/01/08-03/31/09) HOSPITAL SPECIALTY 500IM, INDIVIDUALLY WRAPPED, TRI-FOLD THIN MAXI WITH ADHESIVE STRIP (500 EA PER CASE)  BRAND _____  CASE COUNT _____  ATTN: CO K. CAPPELLI WOMENS DIVISION	250.00	CS		
				<b>TOTAL:</b>	

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