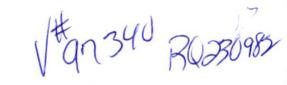
HERNANDO COUNTY VENDOR QUOTE SHEET



NOTE: ALL PURCHASES SHALL BE MADE IN A	CCORDANCE W	ITH HERNANDO (COUNTY PURC	CHASING ORDLA	ANCE AND POLICI	ES AND PROCEDUR	ES OF GOOD	S AND SERVICES
VENDOR'S NAME	A) SOS Care Solutions - B)		B) Prehosp	oital Medical	C) Dr. Sasson,	, Dr Leung, Dr	D)	
	Bennett Co	nsulting LLC -	Consultant	s, LLC - Dr	Booth, Dr LoG	uidice		
			Jameson – Dr Smith					
	Dr. Bermon							
	UNIT_	EXT PRICE	LINIT	FXT	UNIT PRICE	EXT PRICE	UNIT	EXT PRICE
ITEM DESCRIPTION	PRICE	(A. 140-140 (A. 150-140-140)	UNIT PRICE	PRICE	ONTTINIOL		PRICE	
Interim Position of Medical Director with Hernando County Florida Fire Rescue for up Nine (9) months or until Hernando County Bo of County Commissioners approves a new Medical Director through the Request for Proposal process.	Per Month to ard	\$5,416.67	Per Month	\$10,500.00		NO BID		
GRAND TOTAL \$		\$5,416.67		\$10,500.00		NO BID		
CONFIRMING PURCHASE ORDER: YES NO This award is based on "Best Value" to HERNANDO COUNTY, using the following Criteria PROCUREMENT METHOD:								
DIRECT SOLICITATION - \$2,500,00 purchase or less, on	ly one verbal quot	e required.		AVINGS:				
REQUEST FOR QUOTE - Over \$2,501, but less than \$35,000, three or more written quotes required. BLANKET PO- Non-Contractual up to \$10,000 or Contractual up to \$35,000				Lowest Purchase	Price	□ Negotiation		
☐ COMPETATIVE/SEALED BID - In excess of \$35,000 purchase, multiple vendors are invited, a minimum of two or more sealed bids are required.				Skill and Experien	nce	☐ Previous Price \$		
 □ REQUEST FOR PROPOSAL: - In excess of \$35,000 purchase, multiple vendors invited to propose; two or more written proposals are required. □ SINGLE SOURCE - The one source among others in a competitive marketplace that for justifiable reason has predominant qualifications for selection. (Attach -Small Purchase Memo) 				Capacity to Perform	rm	1	□ New Vendor	
				☐ Past Performance			□ New Product	
☐ SOLE SOURCE - The one and only source regardless of the marketplace, possessing a unique and singularly available purpose. (Attach -Sole Source Memo)				☐ Budget Requirements			☐ Quantity Discount	
□ COOPERATIVE PURCHASE – A purchase made under another governmental agency's contract that was obtained using competitive bidding procedures. AGENCY/#				☐ Location and Service Reputation			$\hfill\square$ High vs. Low on Current Bid	
☐ EMERGENCY PURCHASE – A purchase made due to possible health, life, welfare, or safety threat to staff or citizens.				□ Quality Offered			□ Other	
☐ INSURANCE- Required if work being performed for the County (Service or Construction) ☐ FUNDING –Grants, loans, FDOT, Federal or other funding part of this requirement.				Delivery Require	ments			
FUNDING -Grants, loans, FDOT, Federal or other funding part of this requirement. RECOMMEND AWARD TO: SOS COME SIGNATURE:				Local Vendor Pre	eference -5% or 3%	Additional Cost \$	-	
AWARD MADE TO:PURCHASING SIGNATURE:						#	DATE:	