

**HERNANDO  
COUNTY VENDOR  
QUOTE SHEET**

V# 97340 RQ230985

**NOTE: ALL PURCHASES SHALL BE MADE IN ACCORDANCE WITH HERNANDO COUNTY PURCHASING ORDINANCE AND POLICIES AND PROCEDURES OF GOODS AND SERVICES.**

VENDOR'S NAME	A) SOS Care Solutions - Bennett Consulting LLC - Dr. Bennett		B) Prehospital Medical Consultants, LLC - Dr Jameson - Dr Smith		C) Dr. Sasson, Dr Leung, Dr Booth, Dr LoGuidice		D)	
	UNIT PRICE	EXT PRICE	UNIT PRICE	EXT PRICE	UNIT PRICE	EXT PRICE	UNIT PRICE	EXT PRICE
Interim Position of Medical Director with Hernando County Florida Fire Rescue for up to Nine (9) months or until Hernando County Board of County Commissioners approves a new Medical Director through the Request for Proposal process.	Per Month	\$5,416.67	Per Month	\$10,500.00		NO BID		
<b>GRAND TOTAL \$</b>		\$5,416.67		\$10,500.00		NO BID		

CONFIRMING PURCHASE ORDER:  YES  NO

**PROCUREMENT METHOD:**

- DIRECT SOLICITATION - \$2,500.00 purchase or less, only one verbal quote required.
- 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
- COMPETATIVE/SEALED BID - In excess of \$35,000 purchase, multiple vendors are invited, a minimum of two or more sealed bids are required.
- 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)
- SOLE SOURCE - The one and only source regardless of the marketplace, possessing a unique and singularly available purpose. (Attach -Sole Source Memo)
- COOPERATIVE PURCHASE - A purchase made under another governmental agency's contract that was obtained using competitive bidding procedures. AGENCY# \_\_\_\_\_
- EMERGENCY PURCHASE - A purchase made due to possible health, life, welfare, or safety threat to staff or citizens.
- INSURANCE- Required if work being performed for the County (Service or Construction)
- FUNDING -Grants, loans, FDOT, Federal or other funding part of this requirement.

RECOMMEND AWARD TO: SOS Care Solutions SIGNATURE: [Signature]

This award is based on "Best Value" to HERNANDO COUNTY, using the following Criteria

**SAVINGS:** \_\_\_\_\_

- Lowest Purchase Price
- Skill and Experience
- Capacity to Perform
- Past Performance
- Budget Requirements
- Location and Service Reputation
- Quality Offered
- Delivery Requirements
- Local Vendor Preference -5% or 3% Additional Cost \$ \_\_\_\_\_
- Negotiation
- Previous Price \$ \_\_\_\_\_
- New Vendor
- New Product
- Quantity Discount
- High vs. Low on Current Bid
- Other \_\_\_\_\_

AWARD MADE TO: \_\_\_\_\_ PURCHASING SIGNATURE: \_\_\_\_\_ # \_\_\_\_\_ DATE: \_\_\_\_\_

**PRINT FORM**

**CLEAR FORM**