

# HYGIENE PRODUCTS

## **HYGIENE PRODUCTS**

American Amenities, Inc.

Americare Products, Inc.

Complete Supply Company

Gulf Coast Paper Co., Inc.

ICS

Offshore Medical Group, Inc.

Pro Pac, Inc.

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COPY

# WILLIAMSON COUNTY BID FORM

## HYGIENE PRODUCTS ANNUAL CONTRACT

BID NUMBER: 01WCA016

BID OPENING DATE &amp; TIME: AUGUST 10, 2000 - 3:00 PM

CONTRACT PERIOD: OCTOBER 1, 2000 THRU SEPTEMBER 30, 2001

The undersigned, by his/her signature, represents that he/she is authorized to bind the bidder to fully comply with the terms and conditions of the attached Invitation for Bid, Specifications, and Special Provisions for the amount(s) shown on the accompanying bid sheet(s). By signing below, you have read the entire document and agreed to the terms therein.

NAME OF BIDDER: AMERICAN AMENITIES, INC.Mailing Address: 19510 144TH AVE. N.E. SUITE B1City: WOODINVILLEState: WA. Zip: 98072Telephone: (425) 487-9631Fax: (425) 487-2939

Date of BID: 8-9-00Name and Title of Signer: LARRY KONG, MANAGER

(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**Prompt Payment Discount: 1 % 10 days. (If no discount is offered, Net 30 will apply.)☐ "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)☒ low item basis. (Will accept award on "any or all" items.)List Additional Limitations if applicable: MINIMUM ORDER AMOUNT \$100.- PER SHIPMENT.

**DO NOT SIGN OR SUBMIT THIS FORM**  
**WITHOUT READING ENTIRE DOCUMENT**

**THIS FORM MUST BE COMPLETED, SIGNED AND RETURNED WITH BID**

BY

AMERICAN AMENITIES, INC.

AMERICAN AMENITIES, INC.

## WILLIAMSON COUNTY

## SPECIFICATIONS AND BID SHEET

## HYGIENE PRODUCTS ANNUAL CONTRACT

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SHIPMENT QUANTITIES WILL BE SPECIFIED ON THE PURCHASE ORDER.

WHERE A BRAND NAME IS SHOWN, BID THE BRAND NAME OR EQUAL. IDENTIFY THE BRAND BEING BID AND THE PRODUCT/ORDER NUMBER.

ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory	"SPRINGFRESH" S-34 1000 BARS/CASE	case	\$0.0375/EACH OR \$ 37.50/CASE	
2	Toothpaste, .085 oz Tubes, Colgate	"SPRINGFRESH" TP-085P, 720 TUBE/CS	case	\$ 0.125/EACH OR \$ 90.00/CASE	
3	Single Blade Razor	RAZ-01 1000 EACH/CASE	case	\$0.045/EACH OR \$ 45.00/CASE	
4	Pocket Comb, 5 inch	C-5 2,160 EACH/CASE	case	\$0.012/EACH OR \$ 25.92/CASE	
5	Sanitary Napkins, 4 inch folded size, 250/case	NO BID	case		

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NAME OF BIDDER: AMERCARE PRODUCTS, INC.Mailing Address: P. O. BOX 25326 SEATTLE, WA 98125-2226City: SEATTLE State: WA Zip: 98125-2226Telephone: 800-556-6322  
( 425 ) 489-9575 Fax: ( 425- ) 486-3875

*Wendy Hemming* Date of BID: 7-28-2000  
Signature of Person Authorized to Sign BID

Name and Title of Signer: WENDY HEMMING - PRESIDENT  
(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**

Prompt Payment Discount: \_\_\_\_\_ % \_\_\_\_\_ days. (If no discount is offered, Net 30 will apply.)

[ ] "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)

[ ☒ ] low item basis. (Will accept award on "any or all" items.)

List Additional Limitations if applicable: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**WILLIAMSON COUNTY**  
**SPECIFICATIONS AND BID SHEET**  
**HYGIENE PRODUCTS ANNUAL CONTRACT**

**BID NUMBER: 01WCA016**

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**SHIPMENT QUANTITIES WILL BE SPECIFIED ON THE PURCHASE ORDER.**

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ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory	FINE CHOICE S#3/4 1000/CS	case	\$41.98	\$41.98/CS
2	Toothpaste, .085 oz Tubes, Colgate	FRESHSTART TP-086 OZ.720/CS	case	\$98.64 = (\$0.137 EA)	\$98.64/CS
3	Single Blade Razor	AMERCARE RAZ-1 1200/CS	case	\$62.40 = (\$0.052 EA)	\$62.40/CS
4	Pocket Comb, 5 inch	2160/CS C-5 AMERCARE C-5	case	\$36.72 = (\$0.017 EA)	\$36.72/CS
5	Sanitary Napkins, 4 inch folded size, 250/case	MAXI-PAD 250/CS INDIV. WRAPPED	case	\$22.58	\$22.58/CS

Copy -

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**WILLIAMSON COUNTY BID FORM**  
**HYGIENE PRODUCTS ANNUAL CONTRACT**

**BID NUMBER:** 01WCA016      **BID OPENING DATE & TIME:** AUGUST 10, 2000 - 3:00 PM

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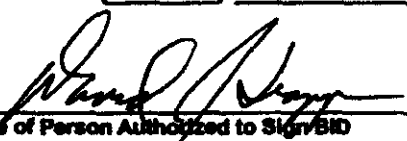
The undersigned, by his/her signature, represents that he/she is authorized to bind the bidder to fully comply with the terms and conditions of the attached Invitation for Bid, Specifications, and Special Provisions for the amount(s) shown on the accompanying bid sheet(s). By signing below, you have read the entire document and agreed to the terms therein.

**NAME OF BIDDER:** Complete Supply Co.

**Mailing Address:** P.O. Box 200039

**City:** AUSTIN      **State:** TX      **Zip:** 78720

**Telephone:** (512) 657-8643      **Fax:** (512) 249-8436

  
Signature of Person Authorized to Sign Bid      **Date of BID:** 8-10-00

**Name and Title of Signer:** DAVID J. TRAPP      BRANCH MGR.  
(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**

**Prompt Payment Discount:** 1 % 10 days. (If no discount is offered, Net 30 will apply.)

☐ "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)

☒ low item basis. (Will accept award on "any or all" items.)

**List Additional Limitations if applicable:**  
Will have minimum order of \$125.00 per order

**DO NOT SIGN OR SUBMIT THIS FORM**  
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copy -

**WILLIAMSON COUNTY**  
**SPECIFICATIONS AND BID SHEET**  
**HYGIENE PRODUCTS ANNUAL CONTRACT**

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ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory	DIAL - DEA00184 Packed 1000/cs	case	\$89.00/cs	
2	Toothpaste, .085 oz Tubes, Colgate	CRIST - PG C 30501 .085oz - 240/cs	case	\$98.00/cs	
3	Single Blade Razor	Bic - Aluminum - 144/cs	case	\$59.80/cs	
4	Pocket Comb, 5 inch	Acc 1000/cs	case	\$1.75/cs	
5	Sanitary Napkins, 4 inch folded size, 250/case	HOSPITAL SPECIALTY HCS 4-147	case	\$42.00/cs	

→ \$42.00/cs 2/1

Copy

**WILLIAMSON COUNTY BID FORM**  
**HYGIENE PRODUCTS ANNUAL CONTRACT**

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**NAME OF BIDDER:** Gulf Coast Paper Co., Inc.

**Mailing Address:** P.O. Box 1375

**City:** Temple **State:** TX **Zip:** 76503-1375

**Telephone:** ( 254 ) 778-6793 **Fax:** ( 254 ) 774-8831

 **Date of BID:** 7-27-00  
Signature of Person Authorized to Sign BID

**Name and Title of Signer:** Jody Przybylski - Branch Manager  
(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**

**Prompt Payment Discount:** --- % ---- days. (If no discount is offered, Net 30 will apply.)

☐ "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)

☐ low item basis. (Will accept award on "any or all" items.)

**List Additional Limitations if applicable:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DO NOT SIGN OR SUBMIT THIS FORM**  
**WITHOUT READING ENTIRE DOCUMENT**

**THIS FORM MUST BE COMPLETED, SIGNED AND RETURNED WITH BID**

GULF COAST PAPER CO INC  
PO BOX 1375  
TEMPLE TX 76503-1375



**WILLIAMSON COUNTY**  
**SPECIFICATIONS AND BID SHEET**  
**HYGIENE PRODUCTS ANNUAL CONTRACT**

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ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory 1M/cs	34DIAL	case	45.06	
2	Toothpaste, .085 oz Tubes, Colgate		case	NB	
3	Single Blade Razor		case	NB	
4	Pocket Comb, 5 inch		case	NB	
5	Sanitary Napkins, 4 inch folded size, 250/case	4SANNAP	case	30.51	

Pricing guaranteed through 9-30-00, after this date pricing will be reviewed.

Purchasing Director, Williamson County Auditor's Office, shall be the contract administrator with designated responsibility to ensure compliance with contract requirements, such as but not limited to, acceptance, inspection and delivery. The contract administrator will serve as liaison between Williamson County Commissioners Court and the successful bidder.

24. Purchase Order: A purchase order(s) shall be generated by Williamson County to the successful bidder as products and/or services are required. The purchase order number must appear on all itemized invoices and/or request for payment.
25. Silence of Specifications: The apparent silence of these specifications as to any detail or to the apparent omission from it of a detailed description concerning any point, shall be regarded as meaning that only the best practices are to prevail. All interpretations of these specifications shall be made on the basis of this statement.
26. BIDS MUST BE: legible and of a quality that can be reproduced.
27. BID forms that are included in the BID package shall be used. **CHANGES to BID forms made by bidders shall DISQUALIFY THE BID.** Exceptions to the BID forms and or specifications shall be made on an **attachment** to the BID package. Call Ginny Atkinson (512) 943-1554 for explanation if exceptions are needed.

## WILLIAMSON COUNTY BID FORM

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NAME OF BIDDER:

ICS

Mailing Address: P.O. Box 21056

Waco, TX 76702-1056

City: Waco State: TX  
Zip: 76702  
Telephone: (800) 524-5427 Fax: (254) 751-0299

  
Date of BID: 08/07/00

  
Signature of Person Authorized to Sign BID

Name and Title of Signer:

James M. Bogan, Jr. President  
(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**

Prompt Payment Discount: 0 % Net 30 days. (If no discount is offered, Net 30 will apply.)

☐ "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)

☒ low item basis. (Will accept award on "any or all" items.)

List Additional Limitations if applicable:

**DO NOT SIGN OR SUBMIT THIS FORM**  
**WITHOUT READING ENTIRE DOCUMENT**

**THIS FORM MUST BE COMPLETED, SIGNED AND RETURNED**  
**WITH BID**

**BID CHECK LIST**

**Please check the following prior to sealing and submitting your**

**WILLIAMSON COUNTY**  
**SPECIFICATIONS AND BID SHEET**  
**HYGIENE PRODUCTS ANNUAL CONTRACT**

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ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory <i>Hypoallergenic</i>	Roe-n-Natural #00155	case	.047 each	47.00 cs/1000
* 2	Toothpaste, .085 oz Tubes, Colgate <i>D.85 oz</i>	Colgate #09782	case	.25 each	60.00 cs/240
3	Single Blade Razor	Generic #D20-3	case	0.055 each	110.00 cs/2000
4	Pocket Comb, 5 inch	Generic #C-5	case	.014 each	30.24 cs/2160
5	Sanitary Napkins, 4 inch folded size, 250/case	Gards #250IM	case	.095 each	23.75 cs/250

\* Alternate Bid

Item #2 Refreshmint Toothpaste, D.85ounce, 144/cs. \$.13 each \$18.72 cs/144

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**NAME OF BIDDER:** OFFSHORE MEDICAL GROUP, INC.

**Mailing Address:** 11501 NW. 2ND SUITE 208

**City:** MIAMI      **State:** FL.      **Zip:** 33172

**Telephone:** (305) 220-0780      **Fax:** (305) 220-0360

Ralf F. Heyer  
Signature of Person Authorized to Sign BID

**Date of BID:** 8/4/00

**Name and Title of Signer:** RALF F. HEYER / PRESIDENT  
(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**

**Prompt Payment Discount:** 1 % 10 days. (If no discount is offered, Net 30 will apply.)

☐ "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)

☒ low item basis. (Will accept award on "any or all" items.)

**List Additional Limitations if applicable:** \_\_\_\_\_

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OFFSHORE MEDICAL GROUP, INC  
11501 N.W. 2ND ST., SUITE 208  
MIAMI, FL, 33172  
offshoremedical@bellsouth.net

**WILLIAMSON COUNTY**  
**SPECIFICATIONS AND BID SHEET**  
**HYGIENE PRODUCTS ANNUAL CONTRACT**

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ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory - 1000 Pcs/Cs	FRESHSCENT / S-3/4	case	48. <sup>00</sup> / <sub>100</sub>	
2	Toothpaste, .085 oz Tubes, Colgate 720 Pcs/Cs	FRESHMINT TP - .85	case	113. <sup>11</sup> / <sub>100</sub>	
3	Single Blade Razor 1000 Pcs/Cs	FRESHSCENT RAZ-1	case	65. <sup>78</sup> / <sub>100</sub>	
4	Pocket Comb, 5 inch 2,160 Pcs/Cs	NEW WORLD C-5	case	35. <sup>50</sup> / <sub>100</sub>	
5	Sanitary Napkins, 4 inch folded size, 250/case	N/B	case	Ø	Ø

**OFFSHORE MEDICAL GROUP, INC**  
**11501 N.W. 2ND ST., SUITE 208**  
**MIAMI, FL 33172**  
**offshoremedical@bellsouth.net**

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**NAME OF BIDDER:** PRO PAC INC

**Mailing Address:** 5601 RIVERS AVE

**City:** CHARLESTON      **State:** SC      **Zip:** 29406-6022

**Telephone:** (800) 345-3036      **Fax:** (888) 877-6722

Bert Benton      **Date of BID:** 08/09/2000  
Signature of Person Authorized to Sign BID

**Name and Title of Signer:** BERT BENTON      Acctg Mgr  
(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**

**Prompt Payment Discount:** \_\_\_\_\_% \_\_\_\_\_days. (If no discount is offered, Net 30 will apply.)

☐ "all or none" basis. (Will accept award of "all" items only. If left blank, low item will apply.)

☒ low item basis. (Will accept award on "any or all" items.)

**List Additional Limitations if applicable:** NONE

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**WILLIAMSON COUNTY**

**SPECIFICATIONS AND BID SHEET**

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ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory	<i>NO BID</i>	case	—	—
2	Toothpaste, .085 oz Tubes, Colgate <i>CASE of 240</i>	<i>COLGATE TOILET - 3500010C</i>	case	<i>72.94</i>	<i>72.94</i>
3	Single Blade Razor <i>CASE of 1000</i>	<i>PRO PAC TOILET - 1900020C</i>	case	<i>59.70</i>	<i>59.70</i>
4	Pocket Comb, 5 inch <i>CASE of 2160</i>	<i>NEW WORLD TOILET - 0100030C</i>	case	<i>28.81</i>	<i>28.81</i>
5	Sanitary Napkins, 4 inch folded size, 250/case	<i>Tenda Soft TOILET - 1500020C</i>	case	<i>19.65</i>	<i>19.65</i>



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**NAME OF BIDDER:** UUM.UNITED UNICEF MEDICAL, INC.

**Mailing Address:** 154 EDISON ROAD

**City:** LAKE HOPATCONG      **State:** NJ      **Zip:** 07849

**Telephone:** ( 973 ) 663-6310      **Fax:** ( 973 ) 663-2980

*Basant Koth*      **Date of BID:** 8/9/00  
Signature of Person Authorized to Sign BID

**Name and Title of Signer:** BASANT KOTB - SALES MANAGER  
(Please Print or Type)

**PLEASE COMPLETE THE FOLLOWING:**

Prompt Payment Discount: \_\_\_\_\_% \_\_\_\_\_days. (If no discount is offered, Net 30 will apply.)

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List Additional Limitations if applicable: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**COPY**

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UUM. United Unicef Medical, Inc. Page 6 of 9  
154 Edison Road  
Lake Hopatcong, N.J. 07849

**WILLIAMSON COUNTY**  
**SPECIFICATIONS AND BID SHEET**  
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ITEM #	DESCRIPTION	BRAND & PRODUCT/ORDER #	UNIT	UNIT PRICE	EXTENSION
1	Bath Soap, .75 oz Bar, Individually wrapped, Ivory	IVORY PG001	case	85.50	85.50
2	Toothpaste, .085 oz Tubes, Colgate	COLGATE ZTP09782	case	89.00	89.00
3	Single Blade Razor	EDGE SEA0303	case	15.15	15.15
4	Pocket Comb, 5 inch	AC00L	case	59.95	59.95
5	Sanitary Napkins, 4 inch folded size, 250/case	STAYFREE NSC889818	case	40.75	40.75

COPY

**MEDICAL  
SUPPLIES  
FOR  
EMS & JAIL**