

**BID RESULTS**

**CK09MERCER2019-11ONE (1) 2019 FORD F550 12' BOX TRUCK WITH LIFT GATE OR EQUIVALENT, FOR THE MERCER COUNTY HIGHWAY DIVISION AND THE MERCER COUNTY COOPERATIVE CONTRACT PURCHASING SYSTEM  
FOR USE BY TRAFFIC DEPARTMENT**

**BID OPENING DATE : MAY 14, 2019**

<b>NO. OF RESPONDENTS:</b>	<b>2</b>	
NAME OF RESPONDENT	MALL CHEVROLET	WINNER FORD
ADDRESS	75 HADDONFIELD ROAD	250 BERLIN ROAD
CITY, STATE, ZIP	CHERRY HILL, NJ 08002	CHERRY HILL, NJ 08034
CONTACT	RICHARD DIRENZO	LINDA HOFFMAN
TELEPHONE	856 662 7000 EXT 183	856 214 0759
FAX	856 504 0108	856 488 1915
E-MAIL	<a href="mailto:FLEETMAN13@GMAIL.COM">FLEETMAN13@GMAIL.COM</a>	<a href="mailto:LHOFFMAN@WINNERFORD.COM">LHOFFMAN@WINNERFORD.COM</a>
INSURANCE INDEMNIFICATION PAGE	SIGNED AND DATED	SIGNED AND DATED
INSURANCE REQUIRED FROM AWARDED VENDOR	REQUIRED IF AWARDED	REQUIRED IF AWARDED
STOCKHOLDER DISCLOSURE CERTIFICATE	SIGNED AND DATED	SIGNED AND DATED
BUSINESS REGISTRATION CERTIFICATE	OK	OK
EIC	2182 EXPIRES 06.15.20	1124 EXPIRES 02.15.22
NON COLLUSION	SIGNED AND DATED	SIGNED AND DATED
IRAN CERTIFICATION	SIGNED AND DATED	SIGNED AND DATED
HOLD PRICING BEYOND 60 DAYS	YES	YES
<b>UNIT COST FOR ONE (1) 2019 FORD F550 12' BOX TRUCK WITH LIFT GATE OR EQUIVALENT</b>	<b>\$ 68,750.00</b>	<b>\$ 71,196.00</b>
<b>MANUFACTURER</b>	<b>CHEVROLET</b>	<b>FORD</b>
<b>MODEL</b>	<b>SILVERADO MD CK56403</b>	<b>F550 CHASSIS CAB</b>
<b>YEAR</b>	<b>2019 OR NEWER</b>	<b>2020</b>
<b>DELIVERY DATE</b>	<b>340 DAYS ARO</b>	<b>90 DAYS AFTER RECEIPT OF ORDER</b>
EXCEPTIONS	SEE EXCEPTIONS PAGE	SEE EXCEPTIONS PAGE
FATAL FLAW	NO	NO

**BID RESULTS**

**AB2019-25 PHARMACY SERVICES FOR THE MERCER COUNTYCORRECTION CENTER**

**BID OPENING DATE: MAY 17,2019**

<b>NUMBER OF RESPONDENTS</b>	<b>4</b>			
NAME OF BIDDER	<b>DIAMOND DRUGS, INC.</b>	<b>CORRECT RX PHARMACY SERVICES, INC.</b>	<b>CONTRACT PHARMACY SERVICES, INC.</b>	<b>MAO PHARMACY INC. DBA WESTWOOD PHARMACY</b>
ADDRESS	645 KOLTER DRIVE	1352 CHARWOOD ROAD, SUITE C	125 TITUS AVENUE	5823 PATTERSON AVENUE
CITY, STATE, ZIP	INDIANA, PA 15701	HANOVER,MA 21076	WARRINGTON, PA 18976	RICHMOND, VA 23226
CONTACT	LOUANN BOWSER	ELLEN H. YANKELLOW, PHARM D	SCOTT D. STERES	HUNTER HOGGATT
TELEPHONE	724-349-1111	800-636-0501 EXT 248	847-395-2787	804-519-3383
FAX	724-599-3509	443-557-0333	800-453-3938	804-288-1707
E-MAIL	<a href="mailto:LBOWSER@DIAMONDPHARMACY.COM">LBOWSER@DIAMONDPHARMACY.COM</a>	<a href="mailto:EYANKELLOW@CORRECTRXPHARMACY.COM">EYANKELLOW@CORRECTRXPHARMACY.COM</a>	<a href="mailto:SSTERES@CONTRACTPHARMACY.COM">SSTERES@CONTRACTPHARMACY.COM</a>	<a href="mailto:HUNTER.HOGGATT@WESTWOODPHARMACY.COM">HUNTER.HOGGATT@WESTWOODPHARMACY.COM</a>
ACTUAL ACQUISITION OR ACTUAL WHOLESALE, REQUIRE DETAILED BACK-UP	YES, ACTUAL ACQUISITION COST + DISPENSING FEE OF \$2.74	YES, WILL PROVIDE ACTUAL ACQUISITION COST + DISPENSING FEE OF \$2.75	YES, ACTUAL ACQUISITION COST + DISPENSING FEE OF \$2.19	YES, WILL PROVIDE ACTUAL ACQUISITION COST + DISPENSING FEE OF \$3.45 AND BRANDED MEDICATIONS AT AAC PLUS A 9% MARK UP
CONSULTANT PHARMACIST, CQI, POLICY DEVELOPMENT, MED ADMIN RECORDS, REPORTING, IN-SERVICE, DISASTER PLAN, NON-FORMULARY REQUEST AND FORMULARY REQUEST	<b>WILL PROVIDE, REGINA TO REVIEW</b>	<b>WILL PROVIDE, REGINA TO REVIEW</b>	<b>WILL PROVIDE, REGINA TO REVIEW</b>	<b>WILL PROVIDE, REGINA TO REVIEW</b>
ADDENDUM NO. ONE & TWO	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED
PHARMACY LICENSE	<b>28RO00043500 EXPIRES 6.30.19 NJ</b>	<b>28RO00048200 EXPIRES 6/30/2019 NJ</b>	<b>28RO00016200 EXPIRES 6/30/2019 NJ</b>	<b>28RO00062500 EXPIRES 6/30/2019 NJ</b>
REFERENCES	<b>REGINA GRIMES TO REVIEW</b>	<b>REGINA GRIMES TO REVIEW</b>	<b>REGINA GRIMES TO REVIEW</b>	<b>REGINA GRIMES TO REVIEW</b>
NEW JERSEY BUSINESS REGISTRATION	OK	OK	OK	OK
STOCKHOLDER DISCLOSURE	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED
EXHIBIT A	INCLUDED	INCLUDED	REQUIRED IF AWARDED	REQUIRED IF AWARDED
EIC	23272 EXPIRES 7.15.21	42018 EXPIRES 6.15.20	27057 EXPIRES 9.15.21	50092 EXPIRES 2.15.22
CERTIFICATE OF INSURANCE	REQUIRED IF AWARDED	REQUIRED IF AWARDED	REQUIRED IF AWARDED	REQUIRED IF AWARDED
INDEMNIFICATION	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED
IRAN CERTIFICATION	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED	SIGNED AND DATED
CONTINUITY OF OPERATION	<b>YES, CC TO REVIEW</b>	<b>YES, CC TO REVIEW</b>	<b>YES, CC TO REVIEW</b>	<b>YES, CC TO REVIEW</b>
EXTEND BEYOND 60 DAYS IN THE EVENT THAT RESOLUTION IS NOT ADOPTED	YES	YES	YES	YES
<b>TOTAL</b>	\$ <b>253,257.70</b>	\$ <b>267,208.24</b>	\$ <b>298,268.56</b>	\$ <b>314,717.06</b>
EXCEPTIONS	NONE	NONE	NONE	NONE
FATAL FLAW	NO	NO	NO	NO







