



Company Name:

TARRANT COUNTY
PURCHASING DEPARTMENT

MELISSA LEE, C.P.M., A.P.P.
PURCHASING AGENT

CHRIS LAX, CPSM, CPCP
ASSISTANT PURCHASING AGENT

RFB NO. 2023-006

**REQUEST FOR BID
FOR
ANNUAL CONTRACT
FOR
INMATE HYGIENE SUPPLIES**

**BIDS DUE OCTOBER 20, 2022
2:00 P.M. CST**

RFB NO. 2023-006

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRE-BID CONFERENCE

All Bidders are encouraged to attend a Pre-Bid Conference to be held:

DATE: FRIDAY, SEPTEMBER 30, 2022
TIME: 1:00 P.M., CST
**LOCATION: TARRANT COUNTY ADMINISTRATION BUILDING
PURCHASING DEPARTMENT CONFERENCE ROOM
100 E. WEATHERFORD STREET, ROOM 303
FORT WORTH, TEXAS 76196-0104**

OR VIA REMOTE GO TO MEETING VIDEO CONFERENCE

***Join from your computer, tablet or smartphone**

<https://meet.goto.com/777840589>

You can also dial in using your phone.

UNITED STATES: +1 (872) 240-3311

ACCESS CODE: 777-840-589

ONE-TOUCH: TEL: +18722403311, 777840589#

***Get the app now and be ready when your first meeting starts:**

<https://meet.goto.com/install>

Tarrant County will not provide copies of RFB documents. Please download & print prior to meeting.

RSVP: Vendors planning to attend either the In Person or Pre-Bid GoToMeeting Video Conference must RSVP to Niki Jones, Senior Buyer, via fax 817-884-2629 or, if unable to fax, email to BidQuestions-RSVP@tarrantcounty.com by 5:00 p.m. CST, Thursday, September 29, 2022. Confirmed receipt by Tarrant County of this email is required.

A RSVP must be completed by each company representative wishing to participate in the GoToMeeting and an email address must be provided for each.

Questions from Bidders will be addressed at the pre-bid conference. Any vendor who submits a bid without attending the scheduled pre-bid conference does so at his own risk. Such Bidder who submits a bid and does not attend the scheduled pre-bid conference waives any right to assert claims due to undiscovered conditions.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Tarrant County is requesting bids for the **ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES** for the **SHERIFF'S OFFICE and JUVENILE SERVICES**. All bids must be submitted on the attached Price Forms. Tarrant County will not enter into any contract where the cost is provisional upon such clauses as "escalator" or "cost-plus" clauses.

Original and Two (2) Copies
OF
COMPLETED BID PROPOSALS
MUST BE RECEIVED IN THE
TARRANT COUNTY PURCHASING DEPARTMENT
AT 100 E. WEATHERFORD, SUITE 303
FORT WORTH, TEXAS 76196-0104
ON OR BEFORE OCTOBER 20, 2022 AT 2:00 P.M.

All bids are due in the Tarrant County Purchasing Department by the due date in sealed envelopes or boxes. All bids must be clearly marked with the Bid Number, the name of the company submitting the bid, and date and time of opening on the outside of the envelope/box and/or Air Bill/Delivery Receipt. The original bid must be clearly marked "ORIGINAL" and contain all original signatures. "No-Bid" Response to be returned on the form included in the section under Forms.

Any bid received after the date and/or hour set for bid opening will not be accepted. The Bidder will be notified and will advise Tarrant County Purchasing as to the disposition by either pick up, return at Bidder's expense, or destroyed with written authorization of the Bidder. If bids are sent by mail to the Tarrant County Purchasing Department, the Bidder shall be responsible for actual delivery of the bid to the Tarrant County Purchasing Department before the advertised date and hour for opening of bids. If mail is delayed either in the postal service or in the internal mail system of Tarrant County beyond the date and hour set for the bid opening, bids thus delayed will not be considered and will be disposed of as authorized.

Bids may be withdrawn at any time prior to the official opening. Alterations made before opening time must be initialed by Bidder guaranteeing authenticity. After the official opening, bids become the property of Tarrant County and may not be amended, altered or withdrawn without the recommendation of the Tarrant County Purchasing Agent and the approval of Tarrant County Commissioners' Court.

Tarrant County is exempt from Federal Excise and State Sales Tax; therefore, tax must not be included in this bid. Tarrant County is not exempt from Surplus Lines Tax or Texas Stamping Tax.

Tarrant County reserves the right to accept or reject in part or in whole any bids submitted and to waive any technicalities for the best interest of Tarrant County.

No oral explanation or instructions will be given by Tarrant County officials or employees in regard to the meaning of the specifications before the award of the contract unless authorized by the Tarrant County Purchasing Agent or their designee. Requests from interested bidders for additional information or interpretation of the information included in the specifications should be directed in writing, via fax or via email, to:

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

NIKI JONES, SENIOR BUYER

FAX: 817-884-2629

EMAIL: BidQuestions-RSVP@tarrantcounty.com

All documents relating to the RFB, including but not limited to, the RFB document, questions and responses, addenda and special notices will be posted under the RFB number on the Tarrant County website and available for download by Bidders and other interested parties. No documents will be faxed or emailed after the initial Notice of Intent prior to award. It is the Bidder's sole responsibility to review this site and retrieve all related documents up to the RFB due date.

The deadline for receipt of all questions is 12:00 p.m., CST, Thursday, October 6, 2022. After this deadline, all questions and responses will be posted on the website and available for download by interested parties.

All questions **must** be submitted in writing and directed to Niki Jones, Senior Buyer, via fax at **817-884-2629** or, if unable to fax, emailed to BidQuestions-RSVP@tarrantcounty.com.

Faxed Questions: Faxed questions **must** reflect the RFB number **or** include the RFB cover page.

Emailed Questions: The email **must** include the RFB No. in its subject and confirmation of receipt by Tarrant County is **required**.

All bids shall specify terms and conditions of payment, which will be considered as part of, but not control, the award of bid. County review, inspection, and processing procedures ordinarily require thirty (30) days after receipt of invoice, materials, or service. Bids which call for payment before thirty (30) days from receipt of invoice, or cash discounts given on such payment, will be considered only if, in the opinion of the Tarrant County Purchasing Agent, the review, inspection, and processing procedures can be completed as specified.

Invoices shall be sent directly to the Tarrant County Auditor's Office, Attention: Accounts Payable, 100 East Weatherford, Room 506, Fort Worth, Texas 76196, or email to SAP-invoices@tarrantcounty.com. In accordance with the Prompt Payment Act, it is the intention of Tarrant County to make payment on completed orders within thirty (30) days after receipt of invoice or items; whichever is later, unless unusual circumstances arise. **Invoices must be fully documented as to labor, materials, and equipment provided and must reference the Tarrant County Purchase Order Number in order to be processed. No payments shall be made on invoices not listing a Purchase Order Number.**

Continuing non-performance of the Vendor in terms of Specifications shall be a basis for the termination of the contract by Tarrant County. Tarrant County shall not pay for work, equipment, or supplies which are unsatisfactory. The Vendor will be given a reasonable opportunity before termination to correct the deficiencies. This, however, shall in no way be construed as negating the basis for termination for non-performance.

The **contract may be terminated** by either party upon written thirty (30) day notice prior to cancellation.

Bids will be considered non-responsive if they show any omissions, alteration of form, additions or conditions not called for, or inconsistencies of any kind. However, Tarrant County reserves the right to waive any inconsistencies and to make an award in the best interest of Tarrant County.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Bids may be rejected, among other reasons, for any of the following specific reasons:

1. Bids containing any inconsistencies.
2. Unbalanced value of any items.

Bidders may be disqualified and their bids not considered, among other reasons, for any of the following specific reasons:

1. Reason for believing collusion exists among the Bidders.
2. Reasonable grounds for believing that any Bidder is interested in more than one (1) Bid for the work contemplated.
3. Bidder being interested in any litigation against Tarrant County.
4. Bidder being in arrears on any existing contract or having defaulted on a previous contract.
5. Lack of competency as revealed, including but not limited to, by a financial statement, experience and equipment and questionnaires.
6. Uncompleted work, which in the judgment of Tarrant County, will prevent or hinder the prompt completion of additional work, if awarded.
7. Bidders shall not owe delinquent property tax in Tarrant County.
8. Limited competition.

It is the Bidders' sole responsibility to print and review all pages of the bid document, attachments, questions and responses, addenda and special notices. The Signature Form must be signed and returned. Failure to provide a signature on the form renders bid non-responsive. Failure to complete and submit all required forms, including but not limited to References, Compliance With Federal and State Laws Form, Questionnaires (when applicable), Addenda (including revised forms), and any other specified forms or documents will be grounds for rejection of the entire bid.

CONFIDENTIALITY: Any material that is to be considered confidential must be clearly marked as such and shall be treated as confidential to the extent allowable under Section 552.136, Texas Government Code. Notice will be sent to you pursuant to Section 552.305 of the Texas Government Code should Tarrant County receive an open records request to inspect your bid. This notice will allow you to assert any objections to the release of confidential information in response to an open records request. It is your responsibility to assert any objections to the release of your bid in response to an open records request. Tarrant County cannot argue on your behalf that the information contained in your bid is exempt from public release. Trade secrets or confidential information **MUST** be placed in a separate envelope marked **"CONFIDENTIAL INFORMATION."** Note: **PRICING INFORMATION IS NOT CONSIDERED CONFIDENTIAL AND IF MARKED AS SUCH, WILL RESULT IN REJECTION OF YOUR BID.**

Due care and diligence have been used in the preparation of this information, and it is believed to be substantially correct. However, the responsibility for determining the full extent of the exposure and the verification of all information presented herein shall rest solely with the Bidder. Tarrant County and its representatives will not be responsible for any errors or omissions in these specifications, nor for the failure on the part of the Bidder to determine the full extent of the exposures.

Vendor may not assign their rights and duties under an award without the written consent of the Tarrant County Purchasing Agent. Such consent shall not relieve the assignor of liability in the event of default by the assignee.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

TO THE EXTENT PERMITTED BY LAW, VENDOR AGREES TO DEFEND, INDEMNIFY AND HOLD TARRANT COUNTY, ITS OFFICIALS, AGENTS, SERVANTS, AND EMPLOYEES, HARMLESS AGAINST ANY AND ALL CLAIMS, LAWSUITS, ACTIONS, COSTS AND EXPENSES OF ANY KIND, INCLUDING BUT NOT LIMITED TO, THOSE FOR PROPERTY DAMAGE OR LOSS (INCLUDING ALLEGED DAMAGE OR LOSS TO OWNER'S BUSINESS AND ANY RESULTING LOST PROFITS), EMPLOYMENT MATTERS, AND/OR PERSONAL INJURY, INCLUDING DEATH, THAT MAY RELATE TO OR ARISE OUT OF OR BE OCCASIONED BY (I) VENDOR'S BREACH OF ANY OF THE TERMS OF PROVISIONS OF THIS AGREEMENT OR (II) ANY NEGLIGENT ACT OR OMISSION OR INTENTIONAL MISCONDUCT OF VENDORS, ITS OFFICERS, AGENTS, ASSOCIATES, EMPLOYEES, CONTRACTORS OR SUBCONTRACTORS, RELATED TO THE PERFORMANCE OF THIS AGREEMENT.

VENDOR(S) WILL COMPLY WITH ALL STATE, FEDERAL, AND LOCAL LAWS INCLUDING BUT NOT LIMITED TO THE AMERICANS WITH DISABILITIES ACT, TITLE VII OF THE CIVIL RIGHTS OF 1964, AGE DISCRIMINATION IN EMPLOYMENT ACT, CIVIL RIGHTS ACT OF 1991, FEDERAL INSURANCE CONTRIBUTIONS ACT (FICA), FAIR LABOR STANDARDS ACT, EQUAL PAY ACT OF 1963 AND THE AFFORDABLE HEALTH CARE ACT, AS TO TREATMENT AND COMPENSATION OF ITS EMPLOYEES.

VENDOR(S) WILL PREPARE PAYROLL CHECKS, MAKE ALL NECESSARY DEDUCTIONS, AND PAY ALL TAXES, AND MAINTAIN INSURANCE REQUIRED BY FEDERAL, STATE, AND LOCAL LAWS. THE SUCCESSFUL VENDOR ACCEPTS FULL RESPONSIBILITY FOR THE PAYMENT OF WAGES, COMPENSATION, OVERTIME AND BENEFITS TO PERSONNEL. VENDOR ACCEPTS RESPONSIBILITY FOR PAYMENT OF ALL TAXES, ASSESSMENTS, FEES, AND FINES THAT MAY BE DUE AND OWING TO ANY LOCAL, STATE OR FEDERAL GOVERNMENT AGENCIES.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Prices shall include all charges for freight, F.O.B. destination inside delivered to:

**SHERIFF'S WAREHOUSE
RESOURCE CONNECTION
5051 RESOURCE DRIVE
BUILDING 5051
SUITE 200
FORT WORTH, TX 76119
817-531-7638**

AND

**JUVENILE SERVICES
2701 KIMBO ROAD
FORT WORTH, TEXAS 76111
817-838-4600 Ext. 0738
or
817-838-4600 Ext. 0680**

AND

VARIOUS OTHER TARRANT COUNTY LOCATIONS

Hours of operation shall be between 8:00 a.m. and 2:30 p.m., Monday through Friday.

Delivery date is important to Tarrant County and may be part of the bid and a factor in evaluation of each bid. Tarrant County considers delivery time to be that period elapsing from the time the individual order is placed until that order is received by Tarrant County at the specified delivery location. The delivery date indicates a guaranteed delivery to Tarrant County, Texas. Failure of the Vendor to meet guaranteed delivery dates or service performance could affect future Tarrant County orders.

Tarrant County reserves the right to demand bond or penalty to guarantee delivery by the date indicated. If the order is given and the Vendor fails to furnish the materials by the guaranteed date, Tarrant County reserves the right to cancel the order without liability on its part.

A **packing list** must accompany each shipment and must include but is not limited, to the following:

1. Tarrant County Purchase Order Number
2. Name and address of Vendor
3. Name and address of receiving department
4. Description of material shipped, including item numbers, quantity, etc.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

SPECIAL TERMS AND CONDITIONS OF THE CONTRACT

1. **CONTRACT TERMS:** Vendor(s) will be awarded a twelve (12) month contract, effective from the date of award or notice to proceed as determined by the Tarrant County Purchasing Department. At Tarrant County's option and approval by the Vendor, the contract may be renewed for one (1) additional twelve (12) month period, as further explained in Renewal Options. **Prices must remain firm for the entire contract.**

2. **RENEWAL OPTIONS:** Tarrant County reserves the right to exercise an option to renew the contract of the Vendor for one (1) additional twelve (12) month period, provided such option is stipulated and agreed upon by both parties. If Tarrant County exercises the right in writing, the Vendor must update and submit any documents required during the initial solicitation by no later than thirty (30) calendar days prior to the commencement of the option period. Required documents must be in force for the full period of the option. If the updated documents are not submitted by the Vendor in complete form within the time specified, Tarrant County may rescind its option or seek a new solicitation.

3. **SECONDARY/ALTERNATE AWARD:** Secondary or Alternate Vendors serve in a backup capacity only. In the event the Primary is unable to honor the terms and conditions of the contract, the Secondary Vendor(s) may be called. If the Secondary Vendor is unable to honor the terms and conditions of the contract the Alternate Vendor(s) may be called. The Primary Vendor is the first contact. Use of the Secondary or Alternate Vendor(s) must be approved, in writing, by the Tarrant County Purchasing Agent or his designee in compliance with Texas Local Government Code 262.027(g).
 - A. In the event the Secondary or Alternate Vendors are called upon, they will offer the materials and services at their awarded price(s), or better. Any attempt to increase their awarded price(s) may cause the removal of the Vendor from the contract. Calling upon the Secondary or Alternate Vendors does not necessarily affect the status of any awarded Vendor, including the Primary Vendor.
 - B. If a Secondary or Alternate Vendor represents themselves as the Primary Vendor without written authorization from the Tarrant County Purchasing Agent, or his designee, the Secondary or Alternate Vendor may be removed from the contract.
 - C. Would you, as the Vendor, be willing to accept a Secondary or Alternate Award based on the above?

_____Yes _____No

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

SPECIAL TERMS AND CONDITIONS OF THE CONTRACT

4. **COOPERATIVE PURCHASING:** Tarrant County has the lead role in developing and encouraging Cooperative Purchasing efforts among governmental entities that participate in its Cooperative Purchasing Program. Cooperative Purchasing can be a great benefit to Tarrant County vendors by providing an avenue to offer materials and services to participating entities. A current list of participating entities is included in this solicitation and an up-to-date list can be found on the Tarrant County website.

A. Should other Governmental Entities decide to participate in this contract, would you, as the Vendor, agree that all terms, conditions, specifications, and pricing would apply? **A "NO" answer could result in complete rejection of the bid.**

_____Yes _____No

1. If you, the Bidder, checked Yes, the following will apply:

- a. Governmental Entities utilizing Intergovernmental Contracts with Tarrant County will be eligible, but not obligated, to purchase materials and services under the contract(s) awarded because of the solicitation. All purchases by Governmental Entities other than Tarrant County will be billed directly to that Governmental Entity and paid by that Governmental Entity. Tarrant County will not be responsible for another Governmental Entity's debts. Each Governmental Entity will order their own material and services as needed.
- b. Delivery to governmental entities located within Tarrant County will be at no charge or as otherwise provided for in the Award Document. Delivery charges, if any, for governmental entities located outside Tarrant County shall be negotiated between the Vendor and each governmental entity.
- c. Tarrant County utilizes County Purchase Orders as its primary means of encumbering funds and pays for goods and services utilizing Vendor invoices. In the event Governmental Entities utilizing InterGovernmental Contracts use other payment methods, including but not limited to, purchasing cards, debit cards, check requests or other methods which cause the Vendor to incur service, processing, or other fees, these fees are the responsibility of that Governmental Entity, unless otherwise negotiated with the Vendor.
- d. Vendor(s) awarded contract(s) resulting from bid will be responsible for providing to Tarrant County, at no additional charge, a complete list of all governmental entities currently utilizing the contract and their annual expenditures. This information should be provided ninety (90) days prior to the expiration of the contract, or as otherwise requested by Tarrant County.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Entities Currently Participating in Cooperative Purchasing Program with Tarrant County

1. ALAMO COMMUNITY COLL DISTRICT	64. CITY OF BASTROP	127. CITY OF FLORESVILLE
2. ALAMO HEIGHTS ISD	65. CITY OF BAYTOWN	128. CITY OF FLOYDADA
3. ALEDO ISD	66. CITY OF BEDFORD	129. CITY OF FOREST HILL
4. ALLEN ISD	67. CITY OF BELLMEAD	130. CITY OF FORNEY
5. ALVARADO ISD	68. CITY OF BELLS	131. CITY OF FORT WORTH
6. ALVORD ISD	69. CITY OF BENBROOK	132. CITY OF FRISCO
7. ANNA FIRE DEPARTMENT	70. CITY OF BIG SPRING	133. CITY OF FULSHEAR
8. ANDERSON COUNTY	71. CITY OF BLUE MOUND	134. CITY OF GAINESVILLE
9. ANDREWS COUNTY	72. CITY OF BONHAM	135. CITY OF GALENA PARK
10. ARANSAS COUNTY	73. CITY OF BOVINA	136. CITY OF GALVESTON
11. ARGYLE ISD	74. CITY OF BOWIE	137. CITY OF GANADO
12. ARLINGTON ISD	75. CITY OF BOYD	138. CITY OF GARLAND
13. ARMSTRONG COUNTY	76. CITY OF BRADY	139. CITY OF GATESVILLE
14. ASPERMONT ISD	77. CITY OF BRIDGE CITY	140. CITY OF GEORGETOWN
15. ATASCOSA COUNTY	78. CITY OF BRIDGEPORT	141. CITY OF GLEN HEIGHTS
16. AUBREY ISD	79. CITY OF BROWNWOOD	142. CITY OF GODLEY
17. AZLE ISD	80. CITY OF BRYAN	143. CITY OF GRANBURY
18. BAILEY COUNTY	81. CITY OF BUDA	144. CITY OF GRAND PRAIRIE
19. BASTROP COUNTY	82. CITY OF BURKBURNETT	145. CITY OF GRAND SALINE
20. BASTROP ISD	83. CITY OF BURLESON	146. CITY OF GRAPEVINE
21. BEAUMONT ISD	84. CITY OF CADDO MILLS	147. CITY OF GREENVILLE
22. BELL COUNTY	85. CITY OF CANTON	148. CITY OF GUN BARRELL CITY
23. BENBROOK WATER AUTHORITY	86. CITY OF CARROLLTON	149. CITY OF HALTOM CITY
24. BETHANY SPEC UTILITY DIST	87. CITY OF CASTLE HILLS	150. CITY OF HARLINGEN
25. BEXAR COUNTY	88. CITY OF CEDAR HILL	151. CITY OF HASLET
26. BEXAR COUNTY ESD No. 2	89. CITY OF CEDAR PARK	152. CITY OF HEATH
27. BIRDVILLE ISD	90. CITY OF CELESTE	153. CITY OF HEWITT
28. BLUE RIDGE FIRE DEPARTMENT	91. CITY OF CELINA	154. CITY OF HITCHCOCK
29. BOSSIER PARISH SHERIFF'S OFFICE	92. CITY OF CIBOLO	155. CITY OF HORIZON CITY
30. BOSQUE COUNTY	93. CITY OF CLEBURNE	156. CITY OF HUDSON OAKS
31. BRANCH FIRE DEPARTMENT	94. CITY OF COCKRELL HILL	157. CITY OF HUNTSVILLE
32. BRAZORIA COUNTY	95. CITY OF COLLEYVILLE	158. CITY OF HURST
33. BRAZOS COUNTY	96. CITY OF COLUMBUS	159. CITY OF HUTCHINS
34. BREWSTER COUNTY	97. CITY OF COLORADO CITY	160. CITY OF HUTTO
35. BRIAR VOLUNTEER FIRE DEPT.	98. CITY OF COMBINE	161. CITY OF INGLESIDE
36. BROOKS CNTY CNSTBLS. PRECS 1-4	99. CITY OF COMMERCE	162. CITY OF IRVING
37. BROWN COUNTY	100. CITY OF CONVERSE	163. CITY OF ITALY
38. BULVERDE POLICE DEPARTMENT	101. CITY OF COPPELL	164. CITY OF JACKSBORO
39. BURNET COUNTY	102. CITY OF COPPERAS COVE	165. CITY OF JACKSONVILLE
40. BYNUM ISD	103. CITY OF CORINTH	166. CITY OF JONESTOWN
41. CAMERON COUNTY	104. CITY OF CORSICANA	167. CITY OF JEFFERSON
42. CANTON ISD	105. CITY OF CROWLEY	168. CITY OF JUSTIN
43. CANYON ISD	106. CITY OF CUMBY	169. CITY OF KATY
44. CARROLL ISD	107. CITY OF DALWORTHINGTON GRDN	170. CITY OF KEENE
45. CARROLLTON-FARMERS BRANCH ISD	108. CITY OF DE LEON	171. CITY OF KELLER
46. CASTLEBERRY ISD	109. CITY OF DECATUR	172. CITY OF KENNEDALE
47. CEDAR HILL ISD	110. CITY OF DEER PARK	173. CITY OF KERMIT
48. CHAMBERS COUNTY	111. CITY OF DENISON	174. CITY OF KILLEEN
49. CHEROKEE COUNTY	112. CITY OF DENTON	175. CITY OF KINGSVILLE
50. CITY OF ALEDO	113. CITY OF DESOTO	176. CITY OF KRUM
51. CITY OF ALLEN	114. CITY OF DIBOLL	177. CITY OF KYLE
52. CITY OF ALVORD	115. CITY OF DUNCANVILLE	178. CITY OF LAFERIA
53. CITY OF AMARILLO	116. CITY OF EARLY	179. CITY OF LA GRULLA
54. CITY OF ANDREWS	117. CITY OF EASTLAND	180. CITY OF LA VERNIA
55. CITY OF ANGLETON	118. CITY OF EL PASO	181. CITY OF LAKE DALLAS
56. CITY OF ANNA	119. CITY OF ELECTRA	182. CITY OF LAKE WORTH
57. CITY OF ARLINGTON	120. CITY OF EMORY	183. CITY OF LANCASTER
58. CITY OF ATHENS	121. CITY OF ESCOBARES	184. CITY OF LAREDO
59. CITY OF AUBREY	122. CITY OF EULESS	185. CITY OF LEAGUE CITY
60. CITY OF AUSTIN	123. CITY OF EVERMAN	186. CITY OF LEANDER
61. CITY OF AZLE	124. CITY OF FARMERS BRANCH	187. CITY OF LEWISVILLE
62. CITY OF BALCH SPRINGS	125. CITY OF FARMERSVILLE	188. CITY OF LINDALE
63. CITY OF BANGS	126. CITY OF FERRIS	189. CITY OF LITTLE ELM

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Entities Currently Participating in Cooperative Purchasing Program with Tarrant County

190.	CITY OF LITTLEFIELD	252.	CITY OF SOUR LAKE	314.	EASTLAND COUNTY
191.	CITY OF LIVE OAK	253.	CITY OF SOUTHLAKE	315.	ECTOR COUNTY
192.	CITY OF LUBBOCK	254.	CITY OF SOUTHMAYD	316.	ECTOR COUNTY ISD
193.	CITY OF LUCAS	255.	CITY OF SPRING VALLEY VILLAGE	317.	EDDY COUNTY, NM
194.	CITY OF LUFKIN	256.	CITY OF SPRINGTOWN	318.	EL PASO COUNTY
195.	CITY OF LUMBERTON	257.	CITY OF STEPHENVILLE	319.	EL PASO CNTY HOSP DIST DBA...
196.	CITY OF MANSFIELD	258.	CITY OF SULPHUR SPRINGS	320.	ELECTRA ISD
197.	CITY OF MARSHALL	259.	CITY OF TAFT	321.	ELLIS COUNTY
198.	CITY OF McALLEN	260.	CITY OF TAYLOR	322.	ERATH COUNTY
199.	CITY OF MCKINNEY	261.	CITY OF TEMPLE	323.	EVERMAN ISD
200.	CITY OF MELISSA	262.	CITY OF TERRELL	324.	FANNIN COUNTY
201.	CITY OF MERKEL	263.	CITY OF TEXARKANA, AR	325.	FARMERSVILLE ISD
202.	CITY OF MESQUITE	264.	CITY OF TEXARKANA, TX	326.	FLOYD COUNTY
203.	CITY OF MIDLAND	265.	CITY OF THE COLONY	327.	FORNEY ISD
204.	CITY OF MIDLOTHIAN	266.	CITY OF TYLER	328.	FORT BEND COUNTY
205.	CITY OF MINEOLA	267.	CITY OF UNIVERSAL CITY	329.	FORT BEND COUNTY ESD#2 & #7
206.	CITY OF MINERAL WELLS	268.	CITY OF UNIVERSITY PARK	330.	FORT WORTH HOUSING AUTHORITY
207.	CITY OF MORGAN'S POINT RESORT	269.	CITY OF VAN ALSTYNE	331.	FORT WORTH ISD
208.	CITY OF MURPHY	270.	CITY OF VENUS	332.	FORT WORTH TRANSP AUTHORITY
209.	CITY OF NACOGDOCHES	271.	CITY OF VERNON	333.	FRANKLIN COUNTY
210.	CITY OF NEDERLAND	272.	CITY OF WACO	334.	FREESTONE COUNTY
211.	CITY OF NEW BRAUNFELS	273.	CITY OF WATAUGA	335.	FRISCO ISD
212.	CITY OF NORTH RICHLAND HILLS	274.	CITY OF WAXAHACHIE	336.	GLASSCOCK COUNTY
213.	CITY OF ODESSA	275.	CITY OF WEATHERFORD	337.	GOLIAD COUNTY
214.	CITY OF OVILLA	276.	CITY OF WESTWORTH VILLAGE	338.	GONZALES COUNTY
215.	CITY OF PALESTINE	277.	CITY OF WHITE SETTLEMENT	339.	GRAND PRAIRIE ISD
216.	CITY OF PARKER	278.	CITY OF WHITESBORO	340.	GRANDVIEW POLICE DEPT.
217.	CITY OF PASADENA	279.	CITY OF WHITEWRIGHT	341.	GRAPEVINE\COLLEYVILLE ISD
218.	CITY OF PELICAN POINT	280.	CITY OF WILLS POINT	342.	GRAYSON COLLEGE
219.	CITY OF PERRYTON	281.	CITY OF WILMER	343.	GRAYSON COUNTY
220.	CITY OF PHARR	282.	CITY OF WINNSBORO	344.	GREENVILLE ISD
221.	CITY OF PLANO	283.	CITY OF WYLIE	345.	GREGG COUNTY
222.	CITY OF PORT ISABEL	284.	CLAY COUNTY	346.	GRIMES COUNTY
223.	CITY OF POTEET	285.	CLEAR CREEK ISD	347.	GUADALUPE COUNTY
224.	CITY OF POTTSBORO	286.	CLEBURNE ISD	348.	HARDIN COUNTY
225.	CITY OF PRINCETON	287.	COCHRAN COUNTY	349.	HARRIS-FORT BEND EMG SVCS DIST #100
226.	CITY OF QUINLAN	288.	COLLIN COUNTY	350.	HARRIS CTY EMG SVCS DIST. #7, #10, #24, #48
227.	CITY OF RALLS	289.	COLLIN COUNTY COMM COLL DIST.	351.	HARRISON COUNTY
228.	CITY OF RED OAK	290.	COLORADO COUNTY	352.	HAWKINS ISD
229.	CITY OF RHOME	291.	COMAL COUNTY	353.	HAYS COUNTY
230.	CITY OF RICHARDSON	292.	COMMUNITY HEALTHCORE	354.	HEART OF TX REG MHMR CENTER
231.	CITY OF RICHLAND HILLS	293.	COOKE COUNTY	355.	HENDERSON COUNTY
232.	CITY OF RIO GRANDE CITY	294.	COPPELL ISD	356.	HEREFORD ISD
233.	CITY OF RIVER OAKS	295.	CORYELL COUNTY	357.	HIGHLAND PARK ISD
234.	CITY OF ROANOKE	296.	COTTONDALE VOL FIRE DEPT	358.	HILL COUNTY
235.	CITY OF ROBINSON	297.	CROWLEY ISD	359.	HOOD COUNTY
236.	CITY OF ROCKWALL	298.	DALLAS COUNTY	360.	HOPKINS COUNTY
237.	CITY OF ROUND ROCK	299.	DALLAS CNTY UTIL & RECLAM. DIST.	361.	HOUSING AUTH OF CITY OF AUSTIN
238.	CITY OF ROWLETT	300.	DFW INT'L AIRPORT BOARD	362.	HUMBLE ISD
239.	CITY OF ROYSE CITY	301.	DALLAS ISD	363.	HUNT COUNTY
240.	CITY OF RUNAWAY BAY	302.	DAWSON COUNTY	364.	HURST EULESS BEDFORD ISD
241.	CITY OF RUSK	303.	DECATUR ISD	365.	HUTCHINSON COUNTY
242.	CITY OF SACHSE	304.	DENISON ISD	366.	IDEA PUBLIC SCHOOLS
243.	CITY OF SAGINAW	305.	DENTON COUNTY	367.	IRVING ISD
244.	CITY OF SAN ANGELO	306.	DENTON CNTY FWS DIST. # 1-A & #10	368.	JACK COUNTY
245.	CITY OF SAN BENITO	307.	DENTON ISD	369.	JASPER COUNTY
246.	CITY OF SAN MARCOS	308.	DeSOTO ISD	370.	JEFFERSON COUNTY
247.	CITY OF SANGER	309.	DIANA SPECIAL UTILITY DISTRICT	371.	JEFFERSON CNTY DRIN. DIST. #7
248.	CITY OF SANSOM PARK	310.	DUNCANVILLE ISD	372.	JIM WELLS COUNTY
249.	CITY OF SEABROOK	311.	DUVAL COUNTY	373.	JOHNSON COUNTY
250.	CITY OF SEAGOVILLE	312.	EAGLE MOUNTAIN-SAGINAW ISD	374.	JOHNSON COUNTY SUD
251.	CITY OF SHERMAN	313.	EAST TEXAS COUNCIL OF GOVS.		

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Entities Currently Participating in Cooperative Purchasing Program with Tarrant County

375.	JOSHUA ISD	437.	PARKER COUNTY	499.	TOWN OF ARGYLE
376.	KARNES COUNTY	438.	PARKER CNTY EMG SERV DISTRICT 1	500.	TOWN OF BARTONVILLE
377.	KAUFMAN COUNTY	439.	PARMER COUNTY	501.	TOWN OF DOUBLE OAK
378.	KAUFMAN ISD	440.	PASADENA ISD	502.	TOWN OF EDGECLIFF VILLAGE
379.	KELLER ISD	441.	PLANO ISD	503.	TOWN OF FAIRVIEW
380.	KENNEDALE ISD	442.	POTTER COUNTY	504.	TOWN OF FLOWER MOUND
381.	KERENS ISD	443.	PUBLIC TRANSIT SVC OF MIN.WELLS	505.	TOWN OF HICKORY CREEK
382.	KINNEY COUNTY	444.	QUINLAN ISD	506.	TOWN OF HIGHLAND PARK
383.	KRUM ISD	445.	RAINS COUNTY ESD #1	507.	TOWN OF LAKESIDE
384.	LAKE DALLAS ISD	446.	RANCHO VIEJO POLICE DEPT.	508.	TOWN OF LITTLE ELM
385.	LAKE WORTH ISD	447.	RANDALL COUNTY	509.	TOWN OF NORTHLAKE
386.	LAMAR COUNTY	448.	RED OAK ISD	510.	TOWN OF PANTEGO
387.	LAMB COUNTY	449.	RED RIVER COUNTY	511.	TOWN OF PECOS CITY
388.	LAMPASAS COUNTY	450.	REFUGIO COUNTY	512.	TOWN OF PONDER
389.	LAVON POLICE DEPARTMENT	451.	REG 9 ED SVCE CENTER OF WICHITA	513.	TOWN OF PROSPER
390.	LEON COUNTY	452.	REGION 11 EDU SERVICE CENTER	514.	TOWN OF PROVIDENCE VILLAGE
391.	LEONARD ISD	453.	RICHARDSON ISD	515.	TOWN OF SUNNYVALE
392.	LEWISVILLE ISD	454.	ROBERTSON COUNTY	516.	TOWN OF TROPHY CLUB
393.	LIBERTY COUNTY	455.	ROCKWALL COUNTY	517.	TOWN OF WESTLAKE
394.	LIMESTONE COUNTY	456.	ROUND ROCK ISD	518.	TOWN OF WESTOVER HILLS
395.	LITTLE ELM ISD	457.	SAM RAYBURN ISD	519.	TRAVIS COUNTY
396.	LOVEJOY ISD	458.	SAN JACINTO COM COLL DIST.	520.	TRAVIS CNTY EMG SVCS DIST No.6
397.	LOWRY CROSSING VOL FIRE DEPT.	459.	SAN PATRICIO COUNTY	521.	TRAVIS CNTY HEALTHCARE DISTRICT
398.	LUBBOCK COUNTY	460.	SCHLEICHER COUNTY	522.	TRINITY RIVER AUTHORITY
399.	MANSFIELD ISD	461.	SEABROOK VOL FIRE DEPT.	523.	TYLER JUNIOR COLLEGE
400.	MAVERICK COUNTY	462.	SR. CYR RES &PUBLIC...HUNT CNTY	524.	U.S. MARSHALS SERVICE
401.	McKINNEY ISD	463.	SEVEN POINTS FIRE RESCUE	525.	UNIVERSITY OF NORTH TEXAS
402.	McLENNAN COUNTY	464.	SHERMAN ISD	526.	UNIV OF N. TX HEALTH SCIENCE CTR
403.	McLENNAN COMM. COLLEGE	465.	SMITH COUNTY	527.	UNIVERSITY OF TEXAS AT ARLINGTON
404.	MARILEE SPECIAL UTILITY DIST.	466.	SPRINGTOWN ISD	528.	UNIVERSITY OF TEXAS AT DALLAS
405.	MEDINA VALLEY ISD	467.	SOUTH MONTGOMERY FIRE DEPT	529.	UNIV OF TX MD AND. CANCER CTR
406.	MHMR OF TARRANT COUNTY	468.	SOUTH TEXAS COLLEGE	530.	UPPER TRINITY REG WATER DIST.
407.	MIDLAND COUNTY	469.	SPAN, INC.	531.	UPSHUR COUNTY
408.	MIDLAND ISD	470.	STARR COUNTY	532.	UPTON COUNTY
409.	MIDWAY ISD	471.	STEPHENS COUNTY	533.	VAL VERDE COUNTY
410.	MILAM COUNTY	472.	STERLING COUNTY	534.	VAN ALSTYNE ISD
411.	MILLS COUNTY	473.	STONEWALL COUNTY	535.	VAN ZANDT COUNTY
412.	MITCHELL COUNTY	474.	TARLETON STATE UNIVERSITY	536.	VERNON ISD
413.	MONAHANS WICKETT PYOTE ISD	475.	TARRANT APPRAISAL DISTRICT	537.	VICTORIA COUNTY
414.	MONTGOMERY COUNTY	476.	TARRANT CNTY 9-1-1 EMG ASS DIST	538.	WACO ISD
415.	MONTGOMERY CNTY ESC 10	477.	TARRANT COUNTY COLLEGE DIST.	539.	WALKER COUNTY
416.	MONTGOMERY CNTY HOSP DIST.	478.	TARRANT CTY EMG SVCS DISTRICT 1	540.	WALLER COUNTY
417.	MOUNT PLEASANT POLICE DEPT.	479.	TARRANT COUNTY HOSP DIST	541.	WARD COUNTY
418.	MOUNT VERNON POLICE DEPT.	480.	TARRANT CTY WORKFORCE DEV Bd	542.	WAXAHACHIE ISD
419.	NACOGDOCHES COUNTY	481.	TARRANT REGIONAL WATER DIST	543.	WEATHERFORD COLLEGE
420.	NAVARRO COUNTY	482.	TAYLOR COUNTY	544.	WEATHERFORD ISD
421.	NEVADA VOL. FIRE DEPT.	483.	TEMPLE COLLEGE	545.	WEBB CONSOLIDATED ISD
422.	NEW CANEY ISD	484.	TERRELL ISD	546.	WEST TEXAS A&M UNIVERSITY
423.	NOLAN COUNTY	485.	TEXARKANA ISD	547.	WESTMINSTER FIRE DEPT.
424.	NORMANGEE ISD	486.	TEXAS A&M UNIV AT COMMERCE	548.	WESTON VOLUNTEER FIRE DEPT
425.	NORTH CENTRAL TX CNCL OF GOVS	487.	TEXAS A&M UNIVERSITY-KINGSVILLE	549.	WHITE SETTLEMENT ISD
426.	NORTH TX MUNICIPAL WATER DIST	488.	TEXAS A& M UNIV.-TEXARKANA	550.	WILLIAMSON COUNTY
427.	NORTH TEXAS TOLLWAY AUTH	489.	TEXAS ALCOHOLIC BEVERAGE COMM.	551.	WILLIAMSON CNTY EMG SVCS DIST #3
428.	NORTHWEST ISD	490.	TEXAS DEPT. OF PARK/WILDLIFE	552.	WILSON COUNTY
429.	NUECES COUNTY	491.	TEXAS DEPT. OF PUBLIC SAFETY	553.	WINKLER COUNTY
430.	OCHILTREE COUNTY	492.	Tx TECH UNIV HEALTH SCI CTR EL PASO	554.	WINNSBORO HOUSING AUTHORITY
431.	OLTON POLICE DEPARTMENT	493.	TEXAS WOMAN'S UNIVERSITY	555.	WINNSBORO ISD
432.	ORANGE COUNTY	494.	THE WOODLANDS TOWNSHIP	556.	WISE COUNTY
433.	ORANGE CNTY DRAINAGE DIST	495.	TITUS COUNTY	557.	WOOD COUNTY
434.	PALO PINTO COUNTY	496.	TML MULTI/STL. INTERGOV....	558.	YMCA OF METROPOLITAN DALLAS
435.	PANOLA COUNTY	497.	TOM GREEN COUNTY	559.	YOUNG COUNTY
436.	PARADISE ISD	498.	TOWN OF ADDISON	560.	ZAPATA COUNTY

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

SPECIAL TERMS AND CONDITIONS OF THE CONTRACT

5. MINIMUM INSURANCE REQUIREMENTS:

- A. Vendor shall take out, pay for and maintain at all times during the prosecution of the work under the contract, the following forms of insurance, in carriers acceptable to and approved by Tarrant County.
 - 1. Commercial General Liability:
 - a. Bodily Injury/Personal Injury/Property Damage —
\$1,000,000 per occurrence/\$2,000,000 aggregate
- B. Tarrant County reserves the right to review the insurance requirements of this section during the effective period of the contract and to require adjustment of insurance coverage and their limits when deemed necessary and prudent by Tarrant County based upon changes in statutory law, court decisions, or the claims history of the industry as well as the Vendor.
- C. Required Provisions:
 - 1. Proof of Carriage of Insurance – All Certificates of Insurance will be required in duplicate and filed with the Tarrant County Purchasing Agent and the Budget and Risk Management Department at 100 East Weatherford Street, Suite 305, Fort Worth, Texas 76196 prior to work commencing.
 - 2. All Certificates shall provide Tarrant County with an unconditional thirty (30) days written notice in case of cancellation or any major change.
 - 3. As to all applicable coverage, policies shall name Tarrant County and its officers, employees, and elected representatives as an additional insured.
 - 4. All copies of the Certificates of Insurance shall reference the project name and solicitation number for which the insurance is being supplied.
 - 5. Vendor agrees to waive subrogation against Tarrant County, its officers, employees, and elected representatives for injuries, including death, property damage, or any other loss to the extent the loss, if any, is covered by the proceeds of insurance.
 - 6. If applicable, the Vendor is responsible for making sure any subcontractor(s) performing work under this agreement has the required insurance coverage(s) and supplies Tarrant County with the proper documents verifying the coverage.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

SPECIAL TERMS AND CONDITIONS OF THE CONTRACT

6. CRIMINAL BACKGROUND CHECK:

- A. If this contract requires that Vendor personnel access Tarrant County Data (either on-site or remotely) or access secure areas of Tarrant County Facilities, then Vendor personnel may be required to undergo a fingerprint-based Criminal Justice Information Services (CJIS) Background Check, a Human Resources Criminal Background Check, or a Sheriff's Criminal Background Check. Criminal Background Checks will be paid for by Tarrant County.
1. The Vendor must provide information, including, but not limited to, employee name, date of birth, a clear copy of employee's driver's license, and a copy of employee's social security card for each individual required to pass a Criminal Background Check.
 2. Award of a contract could be affected by the Vendor's refusal to agree to these terms.
 3. Failure of the Vendor to supply personnel who pass a Criminal Background Check could affect the award of the contract or could result in the termination of the contract.
 4. The Criminal Background Check applies to the individual and not the Company.
 5. Passing status must be maintained by Vendor personnel for duration of the contract.

7. INFORMATION TECHNOLOGY HOSTED OR CLOUD SOLUTION:

- A. The following is only applicable when Vendor is providing Information Technology hosted or cloud solution:
1. **Confidentiality, Integrity, Availability (CIA)**
Vendor shall protect the Confidentiality, Integrity, and Availability (CIA) of all Tarrant County Data ensuring extra levels of security. All Tarrant County information must remain private and permit redaction of protected information before publication. Audit trails cannot be altered.
 2. **Breach Notification**
Vendor agrees that upon discovery of unauthorized access to Tarrant County Data, Vendor shall notify Tarrant County both orally and in writing. In no event shall the notification be made more than forty-eight (48) hours after Vendor knows or reasonably suspect unauthorized access has or may have occurred. In the event of a suspected unauthorized Access, Vendor agrees to reasonably coordinate with Tarrant County to investigate the occurrence.
 3. **Data**
All Tarrant County data will remain in the 48 contiguous United States at all times.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

SPECIAL TERMS AND CONDITIONS OF THE CONTRACT

4. **Right to Audit**

Tarrant County reserves the right to audit vendor data centers which house Tarrant County Data or receive SSAE 16 SOC Type II audits from a reputable security advisory service firm (e.g. EY, Deloitte, KPMG, PWC, Coalfire, etc.).

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Evaluation Criteria will include, but is not limited to the following:

1. Unit Price
2. Delivery
3. Bidder's past performance record with Tarrant County
4. Tarrant County's evaluation of Bidder's ability to perform
5. Tarrant County's experience with products bid
6. Special needs and requirements of Tarrant County
7. Results of testing samples (if needed)

Quantities indicated on the Price Forms are estimates based upon the best available information. Tarrant County reserves the right to increase or decrease the quantities to meet its actual needs without any adjustments in the bid price.

Any **catalog, brand name or manufacturer's reference** used is considered to be descriptive - not restrictive -- and is indicative of the type and quality Tarrant County desires to purchase. Bids on similar items of like quality may be considered if the bid is noted and fully descriptive brochures are enclosed. If notation of substitution is not made, it is assumed the Vendor is bidding item specified. The Vendor will not be allowed to make unauthorized substitutions after award.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

TECHNICAL SPECIFICATIONS

1. DELIVERIES

- A. All deliveries **shall** be between the hours of 8:00 AM CST and 2:30 PM CST Monday through Friday only.
 - a. Delivery personnel **must** obtain a signature from the department requesting the delivery.
 - b. All deliveries are to be made inside the building; do not stack boxes outside. A delivery must never be dropped-off and left unattended. Any result in damaged boxes or merchandise inside the boxes will be replaced at the expense of the vendor.
 - c. Delivery personnel **shall** call the appropriate department before attempting the delivery for specific instructions and location.
 - i. **Juvenile Services** 817-838-4600 ext. 0738 or 817-838-4600 Ext. 0680. Do not contact anyone in the Court Offices.
 - ii. **Sheriff's Warehouse** 817-531-7638.
- B. Deliveries are not to be made on County observed holidays.
 - a. New Year's Day
 - b. Martin Luther King Day
 - c. President's Day
 - d. Cesar Chavez Day
 - e. Good Friday
 - f. Memorial Day
 - g. Juneteenth
 - h. Independence Day
 - i. Labor Day
 - j. Thanksgiving Day
 - k. Day After Thanksgiving
 - l. Christmas Eve
 - m. Christmas Day

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

2. **SPECIFICATION SHEETS**

- A. Bidders submitting responses with alternate items to those specified must include the following with their bid response:
 - a. Specifications sheet of the alternate product that includes the following information at a minimum:
 - i. Product Dimensions
 - ii. Product Volume (if applicable)
 - iii. Product Brand
 - iv. Product Model Number
 - b. Color image of the product when the originally referenced item calls for a specific color.
3. Pre-Assembled Hygiene Kits are to be assembled by successful bidder and packaged in a clear resealable bag. Labor cost for assembly and packaging is to be included in unit pricing.
4. **Bidders are not to alter estimated quantities on Price Form when calculating extended pricing.**
5. Bidders are to include all Tariffs/Delivery/Freight/Travel/Fuel costs in submitted unit pricing.
6. Tarrant County reserves the right to request samples. Any samples provided by the vendor are the property of Tarrant County.

Note:

BRAND NAME LISTED IS FOR DESCRIPTION PURPOSES ONLY. VENDOR PRODUCT MUST BE EQUAL TO OR EQUIVALENT TO THE BRAND LISTED.

Quantities listed are estimated quantities only.



TARRANT COUNTY

HISTORICALLY UNDERUTILIZED BUSINESSES (HUB) POLICY

I. POLICY STATEMENT

The Tarrant County Commissioners Court, being the policy development and budgetary control unit of county government, will strive to ensure that all businesses, regardless of size, economic, social or ethnic status have an equal opportunity to participate in the County's procurement processes. The County is committed to promote full and equal business opportunity for all businesses to supply the goods and services needed to support the mission and operations of county government, and seeks to encourage the use of certified historically underutilized businesses (HUBs) through the use of race, ethnic and gender neutral means. It is the policy of Tarrant County to involve certified HUBs to the greatest extent feasible in the County's procurement of goods, equipment, services and construction projects while maintaining competition and quality of work standards. The County affirms the good faith efforts of firms who recognize and practice similar business standards.

II. DEFINITIONS

Historically underutilized businesses (HUBs), also known as a disadvantaged business enterprise (DBE), are generally business enterprises at least 51% of which is owned and the management and daily business operations are controlled by one or more persons who is/are socially and economically disadvantaged because of his or her identification as a member of certain groups, including women, Black Americans, Mexican Americans and other Americans of Hispanic origin, Asian Americans and American Indians.

Certified HUBs includes business enterprises that meet the definition of a HUB and who meet the certification requirements of certification agencies recognized by Tarrant County.

Businesses include firms, corporations, sole proprietorships, vendors, suppliers, contractors, subcontractors, professionals and other similar references when referring to a business that provides goods and/or services regardless of the commodity category.

Statutory bid limit refers to the Texas Local Government Code provision that requires competitive bidding for many items valued at greater than \$50,000.

III. POLICY GUIDELINES

- A. Tarrant County, its contractors, their subcontractors and suppliers, as well as all vendors of goods, equipment and services, shall not discriminate on the basis of race, color, creed, gender, age, religion, national origin, citizenship, mental or physical disability, veteran's status or political affiliation in the award and/or performance of contracts. All entities doing business or anticipating doing business with the County shall support, encourage and implement affirmative steps toward a common goal of establishing equal opportunity for all citizens and businesses of the county.
- B. Tarrant County will use and recognize the State of Texas certification process in conjunction with the implementation of this policy. The County does recognize other agencies' certifications. Tarrant County reserves the right to review the certification status of any vendor applying to do business with the County. This review will be accomplished to determine the validity and authenticity of the vendor's certification as a HUB.
- C. The Commissioners Court may establish HUB target goals. Through a systematic approach of soliciting quotes, bids and proposals from certified HUBs and in compliance with applicable state and federal law this policy will strive to meet those goals.
 1. Target goals should consider:
 - the availability of HUB firms within the specific category of goods or services to be procured; and
 - the diversity of the county's population.
 2. The goals should be reviewed and amended periodically.
 3. The program may apply to all County procurements including construction and professional services.
 4. Particular attention will be given to HUB participation on purchases in excess of the statutory bid limit.
 5. The Commissioners Court herein establishes a 20% good faith target goal for Tarrant County.

- D. Tarrant County will actively seek and encourage HUBs to participate in all facets of the procurement process by:
1. Continuing to increase and monitor a database of certified HUB vendors, professionals and contractors. The database will be expanded to include products, areas of expertise and capabilities of each HUB firm.
 2. Continuing to seek new communication links with HUB vendors, professionals and contractors to involve them in the procurement process.
 3. Continuing to advertise bids on the County's website and in newspapers including newspapers that target socially and economically disadvantaged communities.
 4. Continuing to provide bid notifications to minority Chambers of Commerce.
- E. As prescribed by law, the purchase of one or more items costing in excess of the statutory bid limit must comply with the competitive bid process. Where possible, those bids will be structured to include and encourage the participation of HUB firms in the procurement process by:
1. Division of proposed requisitions into reasonable lots in keeping with industry standards and competitive bid requirements.
 2. Where feasible, assessment of bond and insurance requirements and the designing of such requirements to reasonably permit more than one business to perform the work.
 3. Specification of reasonable, realistic delivery schedules consistent with the County's actual requirements.
 4. Specifications, terms and conditions reflecting the County's actual requirements are clearly stated, and do not impose unreasonable or unnecessary contract requirements.
- F. A HUB Policy statement shall be included in all specifications. The County will consider the bidder's responsiveness to the HUB Policy in the evaluation of bids and proposals. Failure to demonstrate a good faith effort to comply with the County's HUB policy may result in a bid or proposal being considered non-responsive to specifications.
- G. The Tarrant County Purchasing Department will actively seek the participation of HUB firms in the quotation process for purchases under the statutory bid limit. HUB firms will be identified on the computerized database and linked to the commodities they represent. Buyers will be encouraged to use available internal and external databases of certified HUB firms.

- H. Nothing in this policy shall be construed to require the County to award a contract other than to the lowest responsive bidder meeting specifications as required by law. This policy is narrowly tailored in accordance with applicable law.

IV. ADMINISTRATIVE GUIDELINES

- A. The Tarrant County Purchasing Department shall serve as the County's HUB Office with responsibility for the implementation, monitoring and general operations of the HUB policy. The Purchasing Agent shall serve as the County HUB Officer.
 - 1. The HUB Officer will establish procedures to implement this policy across the full spectrum of the procurement process. The County HUB Office will periodically review with department head and elected officials regarding procurement opportunities.
 - 2. Managing the policy and training buyers and other County personnel in order to meet County goals will be the responsibility of the HUB Office.
 - 3. The HUB Office will cooperate with other local government entities to increase HUB participation throughout the county and region. The HUB Office is encouraged to participate in educational and other outreach programs to assist HUB firms.
 - 4. The HUB Officer will receive and review complaints and recommendations regarding the implementation of the HUB Policy and the good faith efforts of bidders. Further, the HUB Office will audit for compliance to the HUB Policy on eligible projects after award, during the performance of the contract and after completion, while also making any recommendations to Commissioners Court regarding any irregularities or misrepresentation of facts as they relate to compliance with the policy. The HUB Office will review documentation submitted by HUB firms in compliance with this policy.
 - 5. An annual report along with recommendations shall be provided to the Commissioners Court and Purchasing Board. The annual report will provide statistical data and efforts reflected in the number of purchase orders, value of goods and services purchased, percentages to HUB firms, and outreach and marketing efforts. Other statistics may be required or requested by the Commissioners Court or Purchasing Board.

510 Historically Underutilized Businesses Policy
Adopted: Court Order 64788 (December 17, 1990)
Amended: Court Order 69958 (December 7, 1993)
Amended: Court Order 99651 (December 28, 2006)
Amended: Court Order 127875 (June 19, 2018)

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

FOR DISADVANTAGED BUSINESS ENTERPRISES ONLY

Disadvantaged Business Enterprises (DBE) are encouraged to participate in Tarrant County's bid process. The Purchasing Department will provide additional clarification of specifications, assistance with Price Forms, and further explanation of bidding procedures to those DBEs who request it.

Representatives from DBE companies should identify themselves as such and submit a copy of the Certification.

Tarrant County recognizes the certifications of both the State of Texas General Services Commission HUB Program and the North Central Texas Regional Certification Agency. All companies seeking information concerning DBE certification are urged to contact.

Texas Procurement and Support Services
Statewide HUB Program
1711 Jacinto Blvd.
PO Box 13047
Austin, Texas 78711-3047
(512) 463-5872

OR

North Central Texas
Regional Certification Agency
624 Six Flags Drive, Suite 100
Arlington, Texas 76011
(817) 640-0606

IF YOUR COMPANY IS CERTIFIED, ATTACH A COPY OF THE CERTIFICATION TO THIS FORM AND RETURN WITH BID.

COMPANY NAME: _____

REPRESENTATIVE: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

TELEPHONE NO. _____ FAX NO. _____

Indicate all that apply:

- Minority-Owned Business Enterprise
- Women-Owned Business Enterprise
- Disadvantaged Business Enterprise

NOTE: WITHOUT A VALID CERTIFICATION ON FILE, YOU WILL NOT BE EVALUATED AS A HUB/DBE.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

TVORS REGISTRATION

An important part of doing business with Tarrant County is to sign up in our free Tarrant Vendor Online Registration System (TVORS).

TVORS is a web-based vendor registration program that is designed to be an easy-to-use, self-service application that allows vendors to establish and maintain their own company and certification data for the purpose of bid notification and information.

<https://tvorspublic.tarrantcounty.com/>

TARRANT TVORS
Vendor Online Registration System

The perfect mix of Cowboys and Culture!
TARRANT COUNTY

100 E. Weatherford Street
Ft. Worth, Texas 76116
817-394-1111

Welcome to TVORS!

Vendors that would like to receive bid opportunities from Tarrant County are encouraged to register in TVORS. Vendors are responsible to keep contact information current in TVORS so as to facilitate bid notifications from Tarrant County.

Changes to TVORS contact information DOES NOT affect vendor information pertaining to Purchase Order or Remit To addresses.

Login to TVORS

If you have already registered with TVORS, please go ahead and login.

User ID:

Password:

Keep me signed in on this computer unless I sign out.

VENDOR LOGIN

If you have forgotten your password, enter your email address below and click the Forgot Password button. We will send you an email including your User ID and password.

Email Address:

FORGOT PASSWORD

Register with TVORS

There are four steps to the TVORS registration process. You will have the option to save your work after the completion of each step. You may then login to your TVORS account at anytime to make changes or to complete the registration process.

You must complete all mandatory information in order to be considered for bid opportunities from Tarrant County Purchasing.

To complete your TVORS registration, you will go through the following steps:

STEP 1: Enter company data

STEP 2: Enter commodity/service codes (NIGP)
Failure to select NIGP code(s), could result in improper bid notification or no notification at all.

STEP 3: Enter user data (if applicable)

STEP 4: Enter certifications (if applicable)

If you have any questions during your registration, please call (817) 884-1414 or email TVORS@TarrantCounty.com.

To begin the registration process, please click the button below.

VENDOR REGISTRATION

After registering, be sure to email or fax all copies of your current HUB/MBE certificate(s) to TVORS@Tarrantcounty.com or (817) 884-2629, respectively.

Already Registered? Please log into your profile to make sure all contact information is correct, then check the *Data Verified* box at the bottom of the *Company Data* Section of your profile.

Contact Teresa Lobacz, Tarrant County HUB Coordinator, at the email above or at (817) 884-1414 if you have any registration questions.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

REFERENCES

Please list three (3) references, **other than past or present employees of Tarrant County**, who can verify your performance as a Vendor. Performance includes, but is not limited to, sales and/or service, delivery, invoicing, and other items as may be required for Tarrant County to determine Vendor's ability to provide the intended goods or service of the bid. Tarrant County **PREFERS** references to be from Government customers. References must be able to verify the quality of service Vendor's company provides and that the Bidder has completed a project of similar size and scope of work in this response. Inaccurate, obsolete or negative responses from the listed references could result in rejection of your bid.

Failure to supply the required references will deem the bid as non-responsive and will not be considered for award.

Bidder involvement with reference checks is not permitted. Only Tarrant County or its designee will conduct reference checks. Any deviation to this will result in rejection of your response.

REFERENCE ONE

GOVERNMENT/COMPANY NAME: _____

ADDRESS: _____

CONTACT PERSON AND TITLE: _____

TELEPHONE NUMBER: _____

E-MAIL ADDRESS: _____

SCOPE OF WORK: _____

CONTRACT PERIOD: _____

REFERENCE TWO

GOVERNMENT/COMPANY NAME: _____

ADDRESS: _____

CONTACT PERSON AND TITLE: _____

TELEPHONE NUMBER: _____

E-MAIL ADDRESS: _____

SCOPE OF WORK: _____

CONTRACT PERIOD: _____

REFERENCES MUST BE RETURNED WITH BID!

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

REFERENCES

REFERENCE THREE

GOVERNMENT/COMPANY NAME: _____

ADDRESS: _____

CONTACT PERSON AND TITLE: _____

TELEPHONE NUMBER: _____

E-MAIL ADDRESS: _____

SCOPE OF WORK: _____

CONTRACT PERIOD: _____

REFERENCES MUST BE RETURNED WITH BID!

SIGNATURE FORM

The undersigned, on behalf of and as the authorized representative of Bidder, agrees this bid becomes the property of Tarrant County after the official opening.

The undersigned affirms that the Bidder has familiarized himself with the local conditions under which the work is to be performed; satisfied himself of the conditions of delivery, handling and storage of equipment and all other matters that may be incidental to the work, before submitting a bid.

The undersigned agrees, on behalf of Bidder, that if the bid is accepted, Bidder will furnish all materials and services upon which price(s) are offered, at the price(s) and upon the terms and conditions contained in the specifications. The period for acceptance of this bid will be ninety (90) calendar days.

The undersigned affirms that they are duly authorized to execute this contract, that this bid has not been prepared in collusion with any other Bidder, nor any employee of Tarrant County, and that the contents of this bid have not been communicated to any other Bidder or to any employee of Tarrant County prior to the official opening of this RFB.

Vendor hereby assigns to Tarrant County all claims for overcharges associated with this contract which arise under the antitrust laws of the United States, 15 USCA Section 1 et seq., and which arise under the antitrust laws of the State of Texas, Tex. Bus. & Com. Code, Section 15.01, et seq.

The undersigned affirms that they have read and do understand the specifications and any attachments contained in this solicitation. **Failure to sign and return this form will result in the rejection of the entire bid.**

Signature _____ **X**

Authorized Representative

Legal Name of Company

Date

Street Address

Printed Name of Authorized Representative

City, State and Zip

Title of Authorized Representative

Telephone Number

Fax Number

E-Mail Address

AFTER HOURS EMERGENCY CONTACT:

Name: _____

Tel. No. _____

THIS FORM MUST BE SIGNED.

THE ORIGINAL WITH ORIGINAL SIGNATURE AND TWO (2) COPIES MUST BE RETURNED WITH BID!



Did you sign and submit all
required forms?
**If not, your Bid will be
rejected!**

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

COMPANY IS:

Business included in a Corporate Income Tax Return? _____ YES _____ NO

_____ Corporation organized & existing under the laws of the State of _____

_____ Partnership consisting of _____

_____ Individual trading as _____

_____ Principal offices are in the city of _____

DUNS Number: _____

CAGE Code: _____

COMPLIANCE WITH FEDERAL AND STATE LAWS

CERTIFICATION OF ELIGIBILITY

By submitting a Bid in response to this solicitation, the Bidder certifies that at the time of submission, they are not on the Federal Government's list of suspended, ineligible, or debarred entities.

In the event of placement on the list between the time of Bid submission and time of award, the Bidder will notify the Tarrant County Purchasing Agent. Failure to do so may result in terminating this contract for default.

RELATING TO STATE CONTRACTS WITH AND INVESTMENTS IN COMPANIES THAT BOYCOTT ISRAEL AND INVESTMENTS IN COMPANIES THAT DO BUSINESS WITH IRAN, SUDAN, OR ANY KNOWN FOREIGN TERRORIST ORGANIZATIONS.

Bidder verifies that they do not boycott Israel and will not boycott Israel in accordance with Texas Government Code Section 2270.001(2) during the term of this contract. Bidder further verifies pursuant to Texas Local Government Code Section 2252.152 that they are not engaged in business with Iran, Sudan, or any foreign terrorist organization. The term "foreign terrorist organization" means an organization designated as a foreign terrorist organization by the United States Secretary of State as authorized by 8 U.S.C. Section 1189.

DISCLOSURE OF INTERESTED PARTIES

The law states that a governmental entity may not enter into certain contracts with a nonexempt business entity unless the business entity submits a disclosure of interested parties to the governmental entity. By submitting a Bid in response to this solicitation, the Bidder agrees to comply with HB 1295, Government Code 2252.908. Bidder agrees to provide Tarrant County Purchasing Agent, and/or requesting department, the "Certificate of Interested Parties," Form 1295 as required, within **ten (10)** business days from notification of pending award, renewal, amended or extended contract.

VENDOR IS EXEMPT FROM CERTIFICATION REGARDING ENERGY COMPANIES AND FIREARM ENTITIES OR FIREARM TRADE ASSOCIATIONS:

Vendor is a sole proprietorship OR is a non-profit entity OR Vendor is a company that does NOT have 10 or more full-time employees AND/OR this contract does NOT have a value of \$100,000.00 or more that is to be paid wholly or partly paid from public funds of the governmental entity.

If the Vendor Cannot Certify that it is EXEMPT as Above, Vendor Must Certify as Follows:

Vendor is NOT EXEMPT and Certifies as follows:

Boycott of Energy Companies Prohibited. In compliance with Section 2274.002 of the Texas Government Code (added by 87th Legislature S. B. 13), Vendor verifies that it does not boycott energy companies and will not boycott energy companies during the term of the above-described contract. "Boycott energy company" is defined in Section 809.001(1) (added by 87th Legislature, S. B. 13) and means, without an ordinary business purpose, refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations with a company because the company: (A) engages in the exploration, production, utilization, transportation, sale, or manufacturing of fossil fuel-based energy and does not commit or pledge to meet environmental standards beyond applicable federal and state law; or (B) does business with a company described by subsection (A).

COMPLIANCE WITH FEDERAL AND STATE LAWS

Discrimination against Firearm Entities or Firearm Trade Associations Prohibited. In compliance with Section 2274.002 of the Texas Governmental Code (added by 87th Legislature, S. B. 19), Vendor verifies that it does not have a practice, policy, guidance, or directive that discriminates against a firearm entity or firearm trade association; and will not discriminate during the term of the above-described contract] against a firearm entity or firearm trade association. “Discriminate against a firearm entity or firearm trade association” is defined in Section 2274.001(3) (added by 87th Legislature, S. B. 19) and means, with respect to the entity or association, to (i) refuse to engage in the trade of any goods or services with the entity or association based solely on its status as a firearm entity or firearm trade association; (ii) refrain from continuing an existing business relationship with the entity or association based solely on its status as a firearm entity or firearm trade association; or (iii) terminate an existing business relationship with the entity or association based solely on its status as a firearm entity or firearm trade association; the term *does not include*: (i) the established policies of a merchant, retail seller, or platform that restrict or prohibit the listing or selling of ammunition, firearms, or firearm accessories; and (ii) a company’s refusal to engage in the trade of any goods or services, decision to refrain from continuing an existing business relationship, or decision to terminate an existing business relationship: (aa) to comply with federal, state, or local law, policy, or regulations or a directive by a regulatory agency; or (bb) for any traditional business reason that is specific to the customer or potential customer and not based solely on an entity’s or association’s status as a firearm entity or firearm trade association.

Vendor Hereby Certifies (Mark Applicable Certification):

_____ Vendor is EXEMPT from Certification as set out above.

_____ Vendor is NOT EXEMPT from Certification as set out above, and Vendor Certifies that it does not and will not Boycott Energy Companies and that it does not and will not engage in prohibited Discrimination against Firearm Entities or Firearm Trade Associations.

Signature _____ X

THIS FORM MUST BE SIGNED.

THE ORIGINAL WITH ORIGINAL SIGNATURE AND TWO (2) COPIES MUST BE RETURNED WITH BID!

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

AFFIRMATIONS/FORMS/DOCUMENTS

✓ Check Indicates Completion	
	1. References. Bidder has provided references, other than Tarrant County. References must be able to verify the quality of service the company provides and that the company has completed a project of similar size and scope of work in this RFB.
	2. Signatures. All forms requiring a signature must be signed. Bids not signed will be rejected.
	3. Price Forms. All sections of Price Forms have been completed.
	4. Bidder has acknowledged Secondary/Alternate Award and Cooperative Purchasing opportunities in the Special Terms and Conditions on pages 7 and 8.
	5. Insurance Certificates (If required). Bidders must submit all Insurance Certificates prior to commencement of work. If no insurance requirements specified, mark N/A.
	6. Addenda. When applicable, Bidder acknowledges receipt of all Addenda and any revised Forms. Bidder must sign and submit any required signature forms.
	7. It is the Bidders' sole responsibility to print and review all pages of the RFB document, attachments, questions and responses, addenda and special notices. The Signature Form must be signed and returned. Failure to provide a signature on the form renders bid non-responsive. Failure to complete and submit all required forms, including but not limited to References, Compliance With Federal and State Laws Form, Questionnaires (when applicable), Addenda (including revised forms), and any other specified forms or documents will be grounds for rejection of entire bid.
	8. Bidder has read, understands, and agrees to Tarrant County's Criminal Background Check requirements.
	9. Accuracy for all mathematical and numerical entries is the sole responsibility of the Bidder. Tarrant County will not be responsible for errors made by the Bidder.
	10. Bidder's company is registered on TVORS (Tarrant Vendor On-Line Registration System).
	11. Bidder has sealed and marked the envelope with the Company Name, RFB Number, RFB Title, and due date.

THE ORIGINAL AND TWO (2) COPIES OF THIS FORM SHOULD BE RETURNED WITH BID!

NO-BID RESPONSE

In the event that your organization chooses not to submit a bid/proposal for this solicitation, the Tarrant County Purchasing Department is interested in the reasons why vendors have chosen not to submit bids/proposals in order to better serve the taxpayers of Tarrant County. Please indicate your reason(s) by checking all applicable items below and return this form to the address shown below.

- Could not meet specifications.
- Items or materials requested not manufactured by us or not available to our company.
- Insurance requirements too restricting.
- Bond requirements too restricting.
- The scope of services not clearly understood or applicable (too vague, too rigid, etc.)
- The project not suited to our organization.
- Quantities too small.
- Insufficient time allowed for preparation of bid/proposal.
- Other (please specify).

Vendor Name: _____

Contact Person: _____

Telephone: _____

Email: _____

Please send your response to:

Tarrant County Purchasing Department
100 E. Weatherford, Suite 303
Fort Worth, TX 76196-0104

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
SHERIFF'S OFFICE				
1.	Bath Towel, 20 Inches x 40 Inches, Cotton/Poly Blend (White) Brand/Model: _____ <i>(Acme Supply Co., LTD 53123 or approved equivalent)</i> Minimum Order Quantity: _____/towels Packaging Quantity (ex. 12 per Box): _____/towels per _____	\$ _____ X	18,000 Towels	= \$ _____
2.	Washcloth, 12 Inches x 12 Inches, 100% Cotton (White) Brand/Model: _____ <i>(Victory Supply WCWHECO or approved equivalent)</i> Minimum Order Quantity: _____/washcloths Packaging Quantity (ex. 12 per Box): _____/washcloths per _____	\$ _____ X	24,000 Washcloths	= \$ _____
<p align="center">DETAILED SPECIFICATION SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p align="center">ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p align="center">ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

The Original and Two (2) Copies of this Page Must be Returned with Bid!

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
3.	Shower Mat, 14 Inches x 22.5 Inches, Shower/Tub (Clear or Beige) Brand/Model: _____ <i>(Bob Barker 0405-06 or approved equivalent)</i> Minimum Order Quantity: _____/mats Packaging Quantity (ex. 12 per Box): _____/mats per _____	\$ _____ X	2,400 Mats	= \$ _____
4.	Shower Curtain, 36 Inches x 77 Inches, Vinyl, With Rust-Proof Grommets, Partially Transparent (Clear, Green and Clear) Brand/Model: _____ <i>(Bob Barker SCG36CL or approved equivalent)</i> Minimum Order Quantity: _____/curtains Packaging Quantity (ex. 12 per Box): _____/curtains per _____	\$ _____ X	2,400 Curtains	= \$ _____
			Clear 24 Inches Approximately Green 40 Inches Approximately Clear 13 Inches Approximately	

**DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.
ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.**

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
5.	Slip-On Mattress Cover, 36 Inches x 75 Inches x 6 Inches, 8 oz Twill, Only Green/Brown/Black. (NO RED) (NO BLUE) (NO WHITE)(NO ORANGE) (NO BLACK/WHITE STRIPE) Brand/Model: _____ <i>(CharmTex MC/36756BRTWL or approved equivalent)</i> Minimum Order Quantity: _____/covers Packaging Quantity (ex. 12 per Box): _____/covers per _____	\$ _____ X	5,000 Covers	= \$ _____
6.	Large Mattress Sheet, able to tuck in on all sides Finished Sheet Dimensions requested: 59" (or 60") x 90" Fabric Weight requested: 7.5 ounces minimum Fabric requested: Twill 65/35 Poly Cotton fabric Fabric Color requested: Brown is preferred Unacceptable colors are Blue, Red, Orange, Black/White Stripe, White <p align="center">DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS. ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING. ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>	\$ _____ X	23,000 Sheets	= \$ _____

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
7.	Thermal Blanket, 66 Inches x 90 Inches, 100% Cotton (White) Brand/Model: _____ <i>(Victory Supply LNBLSFWHEC or approved equivalent)</i> Minimum Order Quantity: _____/blankets Packaging Quantity (ex. 12 per Box): _____/blankets per _____	\$ _____ X	63,000 Blankets	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
8.	Self-Protection Blanket, Width 54" x Length 80" Stain Resistant / Fire Resistant / Tear Resistant Made with heavy-duty outside 650 Denier fabric, quilted to Lockstitch to minimum of 9-ounce polyester batting. All hems back tacked & lock-stitched with bonded thread Machine washable and dryer Cannot twist into knots or nooses or tear into strips Blue, Green or Red Brand/Model: _____ <i>(Victory Supply SPBL or approved equivalent)</i> Minimum Order Quantity: _____/blankets Packaging Quantity (ex. 12 per Box): _____/blankets per _____	\$ _____ X	200 blankets	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
9.	Drinking Cup, 7.5 oz, Teal Color must be Teal Break, chip and crack resistant Can withstand temperatures from 0 to 212 degrees Fahrenheit Reusable Dishwasher and microwave safe Stackable Brand/Model: _____ <i>(Jones Zylon Item #SC-7 or approved equivalent)</i> Minimum Order Quantity: _____/cups Packaging Quantity: _____/cups per _____	\$ _____ X	4,320 Cups	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
10.	Soup Spoon, 5 - 6.25 inches, Orange Color must be Orange Lightweight polypropylene plastic stands up to tough treatment Easy to handle Will not chip, shatter, rust, tarnish or corrode Dishwasher and microwave safe Brand/Model: _____ <i>(Bob Barker Item #62SS or approved equivalent)</i> Minimum Order Quantity: _____/spoons Packaging Quantity: _____/spoons per _____	\$ _____ X	17,280 Spoons	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
11.	Folded Paper Scoop (White) Brand/Model: _____ <i>(CharmTex CT/ECONTENSIL or approved equivalent)</i> Minimum Order Quantity: _____/scoops Packaging Quantity (ex. 12 per Box): _____/scoops per _____	\$ _____ X	50,000 Scoops	= \$ _____
12.	Boots, Rubber, No Laces, Pair (Black) Brand/Model: _____ <i>(Mini Wing USA Teng & San or approved equivalent)</i> Minimum Order Quantity: _____/pairs Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Size 5	\$ _____ X	60 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
12.	Boots, Rubber, No Laces, Pair (Black), Continued			
B	Size 6	\$ _____ X	60 Pairs	= \$ _____
C	Size 7	\$ _____ X	60 Pairs	= \$ _____
D	Size 8	\$ _____ X	60 Pairs	= \$ _____
E	Size 9	\$ _____ X	60 Pairs	= \$ _____
F	Size 10	\$ _____ X	60 Pairs	= \$ _____
G	Size 11	\$ _____ X	60 Pairs	= \$ _____
H	Size 12	\$ _____ X	60 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
12.	Boots, Rubber, No Laces, Pair (Black), Continued			
I	Size 13	\$ _____ X	60 Pairs	= \$ _____
J	Size 14	\$ _____ X	60 Pairs	= \$ _____
K	Size 15	\$ _____ X	60 Pairs	= \$ _____
				Total Item 12 (A-K): \$ _____
13.	Canvas Shoes, Velcro, Pair (White)			
	Brand/Model: _____			
	<i>(Victory Supply SHCVLTWH or approved equivalent)</i>			
	Minimum Order Quantity: _____/pairs			
	Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Size 5	\$ _____ X	12 Pairs	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.

ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.

ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
13.	Canvas Shoes, Velcro, Pair (White), Continued			
B	Size 6	\$ _____ X	12 Pairs	= \$ _____
C	Size 7	\$ _____ X	12 Pairs	= \$ _____
D	Size 8	\$ _____ X	144 Pairs	= \$ _____
E	Size 9	\$ _____ X	288 Pairs	= \$ _____
F	Size 10	\$ _____ X	288 Pairs	= \$ _____
G	Size 11	\$ _____ X	288 Pairs	= \$ _____
H	Size 12	\$ _____ X	288 Pairs	= \$ _____
I	Size 13	\$ _____ X	144 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
13.	Canvas Shoes, Velcro, Pair (White), Continued			
J	Size 14	\$ _____ X	12 Pairs	= \$ _____
K	Size 15	\$ _____ X	12 Pairs	= \$ _____
			Total Item 13 (A-K): \$ _____	
14.	Shower Shoes, Translucent, Unifoot, Pair (Orange)			
	Brand/Model: _____			
	<i>(Victory Supply SHSTOR or approved equivalent)</i>			
	Minimum Order Quantity: _____/pairs			
	Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Small	\$ _____ X	2,300 Pairs	= \$ _____
B	Medium	\$ _____ X	2,800 Pairs	= \$ _____
C	Large	\$ _____ X	3,200 Pairs	= \$ _____
DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.				
ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.				
ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
14.	Shower Shoes, Translucent, Unifoot, Pair (Orange), Continued			
D	X-Large	\$ _____ X	2,600 Pairs	= \$ _____
E	2X-Large	\$ _____ X	3,400 Pairs	= \$ _____
F	3X-Large	\$ _____ X	2,000 Pairs	= \$ _____
			Total Item 14 (A-F):	\$ _____
15.	Palm Brush (flexible) Black Pliable Plastic	\$ _____ X	28,000 Brushes	= \$ _____
	Brand/Model: _____			
	<i>(Bob Barker PB2150 or approved equivalent)</i>			
	Total Length of Offered Comb: _____/inches			
	Minimum Order Quantity: _____/combs			
	Packaging Quantity (ex. 12 per Box): _____/combs per _____			
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
16.	Toenail Clippers Brand/Model: _____ <i>(Bob Barker TNC12 or approved equivalent)</i> Minimum Order Quantity: _____/clippers Packaging Quantity (ex. 12 per Box): _____/clippers per _____	\$ _____ X	432 Clippers	= \$ _____
17.	Safety Razor One Blade (Orange/White) Brand/Model: _____ <i>(Bob Barker R600 or approved equivalent)</i> Minimum Order Quantity: _____/razors Packaging Quantity (ex. 12 per Box): _____/razors per _____	\$ _____ X	156,000 Razors	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.
ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
18.	Soap, Anti-Bacterial, Unwrapped, 2.25 oz. Bar Brand/Model: _____ <i>(Amerfresh S-3-6N-AB or approved equivalent)</i> Minimum Order Quantity: _____/bars Packaging Quantity (ex. 12 per Box): _____/bars per _____	\$ _____ X	173,000 Bars	= \$ _____
19.	Toothbrush, 20-30 Tuft, 3 1/8 - 3 1/4 Inches (Prefer Ivory) Any color is acceptable Brand/Model: _____ <i>(Bob Barker BBST25 or approved equivalent)</i> Minimum Order Quantity: _____/brushes Packaging Quantity (ex. 12 per Box): _____/brushes per _____	\$ _____ X	25,000 Brushes	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.
ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
20.	Toothpaste, 2.75 fl. oz. Container Brand/Model: _____ <i>(Amerfresh TP-300 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	28,800 Containers	= \$ _____
21.	Apron, Disposable Brand/Model: _____ <i>(Americare Products APD-1000 or approved equivalent)</i> Minimum Order Quantity: _____/aprons Packaging Quantity (ex. 12 per Box): _____/aprons per _____	\$ _____ X	100,000 Aprons	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
22.	Bouffant Caps Brand/Model: _____ <i>(Victory Supply BCPP2 MC21 or approved equivalent)</i> Minimum Order Quantity: _____/caps Packaging Quantity (ex. 12 per Box): _____/caps per _____	\$ _____ X	200,000 Caps	= \$ _____
23.	Laundry Bag, 24 Inches x 36 Inches, Mesh, with Sliplock (White) Brand/Model: _____ <i>(Victory Supply LB2436-WH or approved equivalent)</i> Minimum Order Quantity: _____/bags Packaging Quantity (ex. 12 per Box): _____/bags per _____	\$ _____ X	1,000 Bags	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.

ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.

ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.

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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
24.	Water Soluble Laundry Bags, 26 Inches x 33 Inches (Clear) Brand/Model: _____ <i>(Bob Barker Z500 or approved equivalent)</i> Minimum Order Quantity: _____/bags Packaging Quantity (ex. 12 per Box): _____/bags per _____	\$ _____ X	1,000 Bags	= \$ _____
25.	Bulk Regular Tampons, individually wrapped, cardboard applicator, 500 per case Brand/Model: _____ <i>(Hospeco MTB500 or approved equivalent)</i> Minimum Order Quantity: _____/tampons Packaging Quantity (ex. 12 per Box): _____/tampons per _____	\$ _____ X	50,000 tampons	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
26.	Bulk Super Tampons, individually wrapped, cardboard applicator, 500 per case Brand/Model: _____ <i>(Hospesco MTB500S or approved equivalent)</i> Minimum Order Quantity: _____/tampons Packaging Quantity (ex. 12 per Box): _____/tampons per _____	\$ _____ X	50,000 tampons	= \$ _____
27.	Regular Maxi Pad, Regular Absorbency with wings, 9", individually wrapped (12 packages = Case of 250) Brand/Model: _____ <i>(Bob Barker SNWR or approved equivalent)</i> Minimum Order Quantity: _____/pads Packaging Quantity (ex. 12 per Box): _____/pads per _____	\$ _____ X	43,000 pads	= \$ _____

Offered product must be thicker than 0.25 inches.

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
28.	Long Maxi Pad, Super Absorbency with wings, 10", individually wrapped Brand/Model: _____ <i>(Bob Barker SN288-C or approved equivalent)</i> Minimum Order Quantity: _____/pads Packaging Quantity (ex. 12 per Box): _____/pads per _____	\$ _____ X	302,000 pads	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
29.	Hygiene Kit Brand/Model: _____ Kit to include the following items prepackaged in a clear resealable bag: - One (1) Palm Brush, Flexible Pliable Plastic (Black) Total Length of Offered Comb: _____/inches - One (1) Toothbrush, 3.25 Inches (White) Total Length of Offered Toothbrush: _____/inches - One (1) 0.5 oz Individually Wrapped Bar of Soap Volume per Bar Offered: _____/ounces per bar - One (1) 0.6 oz Container of Toothpaste Volume per Container Offered: _____/ounces per container Brand/Model: _____ <i>(Amercare Products AMK-4-TAR or approved equivalent)</i> Minimum Order Quantity: _____/kits Labor Cost to Assemble Kits to be Included in Unit Pricing Packaging Quantity (ex. 12 per Box): _____/kits per _____	\$ _____ X	50,000 Kits	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
30.	Boxers, Poly/Cotton Blend, Elastic Waistband, Front Fly, No Buttons (White) Brand/Model: _____ <i>(Victory Supply BXWH or approved equivalent)</i> Minimum Order Quantity: _____/pairs Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Small (28-30)	\$ _____ X	25,000 Pairs	= \$ _____
B	Medium (32-34)	\$ _____ X	32,000 Pairs	= \$ _____
C	Large (36-38)	\$ _____ X	34,000 Pairs	= \$ _____
D	X- Large (40-42)	\$ _____ X	32,000 Pairs	= \$ _____
E	2X-Large (44-46)	\$ _____ X	1,000 Pairs	= \$ _____
F	3X-Large (48-50)	\$ _____ X	1,000 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
30.	Boxers, Poly/Cotton Blend, Elastic Waistband, Front Fly, No Buttons (White), Continued			
G	4X-Large (52-54)	\$ _____ X	1,000 Pairs	= \$ _____
H	5X-Large (56-58)	\$ _____ X	1,000 Pairs	= \$ _____
I	6X-Large (60-62)	\$ _____ X	1,000 Pairs	= \$ _____
				Total Item 30 (A-I): \$ _____
31.	Panties, Brief Style, Elastic Waist & Leg Bands (Brown)			
	Brand/Model: _____ (Victory Supply PNTYBR or approved equivalent)			
	Minimum Order Quantity: _____/pairs			
	Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Size 5	\$ _____ X	100 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
31.	Panties, Brief Style, Elastic Waist & Leg Bands (Brown), Continued			
B	Size 6	\$ _____ X	100 Pairs	= \$ _____
C	Size 7	\$ _____ X	100 Pairs	= \$ _____
D	Size 8	\$ _____ X	2,600 Pairs	= \$ _____
E	Size 9	\$ _____ X	100 Pairs	= \$ _____
F	Size 10	\$ _____ X	100 Pairs	= \$ _____
G	Size 11	\$ _____ X	100 Pairs	= \$ _____
H	Size 12	\$ _____ X	100 Pairs	= \$ _____
I	Size 13	\$ _____ X	100 Pairs	= \$ _____
J	Size 14	\$ _____ X	100 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
31.	Panties, Brief Style, Elastic Waist & Leg Bands (Brown), Continued			
K	Size 15	\$ _____ X	100 Pairs	= \$ _____
L	Size 16	\$ _____ X	100 Pairs	= \$ _____
M	Size 17	\$ _____ X	100 Pairs	= \$ _____
N	Size 18	\$ _____ X	100 Pairs	= \$ _____
Total Item 31 (A-N):				\$ _____
32.	Disposable Pants, Spunbonded Polypropylene, Elastic Waist, Slip-On (Navy Blue)			
	Brand/Model: _____			
	<i>(Cellucap SC700-BL or approved equivalent)</i>			
	Minimum Order Quantity: _____/pants			
	Packaging Quantity (ex. 12 per Box): _____/pants per _____			
A	Small	\$ _____ X	500 Pants	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
32.	Disposable Pants, Spunbonded Polypropylene, Elastic Waist, Slip-On (Navy Blue), Continued			
B	Medium	\$ _____ X	1,000 Pants	= \$ _____
C	Large	\$ _____ X	1,000 Pants	= \$ _____
D	X-Large	\$ _____ X	1,000 Pants	= \$ _____
E	2X-Large	\$ _____ X	1,000 Pants	= \$ _____
F	3X-Large	\$ _____ X	1,000 Pants	= \$ _____
				Total Item 32 (A-F): \$ _____
33.	Disposable Shirts, Spunbonded Polypropylene, Pullover (Navy Blue)			
	Brand/Model: _____			
	<i>(Cellucap SC750-BL or approved equivalent)</i>			
	Minimum Order Quantity: _____/shirts			
	Packaging Quantity (ex. 12 per Box): _____/shirts per _____			
A	Small	\$ _____ X	500 Shirts	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
33.	Disposable Shirts, Spunbonded Polypropylene, Pullover (Navy Blue), Continued			
B	Medium	\$ _____ X	1,000 Shirts	= \$ _____
C	Large	\$ _____ X	1,000 Shirts	= \$ _____
D	X-Large	\$ _____ X	1,000 Shirts	= \$ _____
E	2X-Large	\$ _____ X	1,000 Shirts	= \$ _____
F	3X-Large	\$ _____ X	1,000 Shirts	= \$ _____
				Total Item 33 (A-F): \$ _____
<p align="center">DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p align="center">ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p align="center">ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
34.	Protective Transport Spit Hoods No strip or ties for easy application and removal No front or back, one-size-fits-all 10-12 Hoods Per Case Brand/Model: _____ <i>(Bob Barker 8000 or approved equivalent)</i> Minimum Order Quantity: _____/hoods Packaging Quantity (ex. 12 per Box): _____/hoods per _____	\$ _____ X	1,000 hoods	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
JUVENILE SERVICES				
35.	Youth 100% Polyester Blanket, 72 Inches x 90 Inches (Navy Blue) Brand/Model: _____ <i>(Victory Supply BLPLNB7290 or approved equivalent)</i> Minimum Order Quantity: _____/blankets Packaging Quantity (ex. 12 per Box): _____/blankets per _____	\$ _____ X	100 Blankets	= \$ _____
36.	Youth Polyester Core Mattress, 30 Inches x 75 Inches x 4 Inches (Clear) Brand/Model: _____ <i>(ISC Jail Supplies LPM30SS-CL or approved equivalent)</i> Minimum Order Quantity: _____/mattresses Packaging Quantity (ex. 12 per Box): _____/mattresses per _____	\$ _____ X	60 Mattresses	= \$ _____
<p align="center">DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p align="center">ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p align="center">ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
37.	Youth Polyester Core Pillow, 20 Inches x 26 Inches (Clear) Brand/Model: _____ <i>(ICS Jail Supplies L03PC2026-CL or approved equivalent)</i> Is Offered Pillow 20 Inches x 26 Inches (YES/NO): _____ Minimum Order Quantity: _____/blankets Packaging Quantity (ex. 12 per Box): _____/blankets per _____	\$ _____ X	12 Pillows	= \$ _____
38.	Youth Poly/Cotton Pillowcase 20 Inches x 26 Inches (White) Brand/Model: _____ <i>(Acme Supply Co., LTD PCSWH or approved equivalent)</i> Minimum Order Quantity: _____/pillowcases Packaging Quantity (ex. 12 per Box): _____/pillowcases per _____	\$ _____ X	120 Pillowcases	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.

ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.

ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.

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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
39.	Youth Flat Sheets, 48 Inches x 90 Inches (White, Unbleached) Brand/Model: _____ <i>(Victory Supply SHT54902 or approved equivalent)</i> Minimum Order Quantity: _____/sheets Packaging Quantity (ex. 12 per Box): _____/sheets per _____	\$ _____ X	120 Sheets	= \$ _____
40.	Youth Bath Towel, 24 Inches x 48 Inches (White) Brand/Model: _____ <i>(Standard Textile 40161400 or approved equivalent)</i> Minimum Order Quantity: _____/towels Packaging Quantity (ex. 12 per Box): _____/towels per _____	\$ _____ X	600 Towels	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
41.	Youth Washcloth, 12 Inches x 12 Inches (Orange) Brand/Model: _____ <i>(ICS Jail Supplies L017OR or approved equivalent)</i> Minimum Order Quantity: _____/washcloths Packaging Quantity (ex. 12 per Box): _____/washcloths per _____	\$ _____ X	144 Washcloths	= \$ _____
42.	Youth Velcro Canvas Shoes, Pair (Black) Brand/Model: _____ <i>(Victory Supply SHVLTB or approved equivalent)</i> Minimum Order Quantity: _____/pairs			
A	Size 5	\$ _____ X	10 Pairs	= \$ _____
B	Size 6	\$ _____ X	10 Pairs	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.

ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
42.	Youth Velcro Canvas Shoes, Pair (Black), Continued			
C	Size 7	\$ _____ X	10 Pairs	= \$ _____
D	Size 8	\$ _____ X	10 Pairs	= \$ _____
E	Size 9	\$ _____ X	10 Pairs	= \$ _____
F	Size 10	\$ _____ X	10 Pairs	= \$ _____
G	Size 11	\$ _____ X	10 Pairs	= \$ _____
H	Size 12	\$ _____ X	10 Pairs	= \$ _____
I	Size 13	\$ _____ X	10 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
42.	Youth Velcro Canvas Shoes, Pair (Black), Continued			
J	Size 14	\$ _____ X	5 Pairs	= \$ _____
K	Size 15	\$ _____ X	5 Pairs	= \$ _____
Total Item 42 (A-K):				\$ _____
43.	Youth PVC Shower Shoes, Pair (Orange)			
	Brand/Model: _____			
	<i>(CharmTex CT F/ShowerOR or approved equivalent)</i>			
	Minimum Order Quantity: _____/pairs			
	Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Size 5	\$ _____ X	500 Pairs	= \$ _____
B	Size 6	\$ _____ X	100 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
43.	Youth PVC Shower Shoes, Pair (Orange), Continued			
C	Size 7	\$ _____ X	500 Pairs	= \$ _____
D	Size 8	\$ _____ X	500 Pairs	= \$ _____
E	Size 9	\$ _____ X	500 Pairs	= \$ _____
F	Size 10	\$ _____ X	500 Pairs	= \$ _____
G	Size 11	\$ _____ X	100 Pairs	= \$ _____
H	Size 12	\$ _____ X	500 Pairs	= \$ _____
I	Size 13	\$ _____ X	36 Pairs	= \$ _____
J	Size 14	\$ _____ X	36 Pairs	= \$ _____
K	Size 15	\$ _____ X	36 Pairs	= \$ _____
Total Item 43 (A-K):				\$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
44.	Shower Curtain, 36 Inches x 77 Inches, Vinyl, Light Green, Snap Enclosure Brand/Model: _____ <i>(Bob Barker SC3677 or approved equivalent)</i> Minimum Order Quantity: _____/curtains Packaging Quantity (ex. 12 per Box): _____/curtains per _____	\$ _____ X	24 Curtains	= \$ _____
45.	Youth Socks, No-Show Ankle, One-Size-Fits-All, Pair (White) Brand/Model: _____ <i>(Bob Barker BB NS4595 or approved equivalent)</i> Minimum Order Quantity: _____/pairs	\$ _____ X	2,000 Pairs	= \$ _____

**DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
46.	Youth Comb, Afro Pick, 7 Inches (Black) Brand/Model: _____ <i>(ICS Jail Supplies T120 or approved equivalent)</i> Minimum Order Quantity: _____/combs Packaging Quantity (ex. 12 per Box): _____/combs per _____	\$ _____ X	12 Combs	= \$ _____
47.	Youth Hairbrush w/ Tufted, Nylon Bristles Brand/Model: _____ <i>(ICS Jail Supplies T125 or approved equivalent)</i> Minimum Order Quantity: _____/brushes Packaging Quantity (ex. 12 per Box): _____/brushes per _____	\$ _____ X	12 Brushes	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
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PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
48.	Youth Hairbrush w/ Plastic Bristles and Vented Back Brand/Model: _____ <i>(ICS Jail Supplies T126 or approved equivalent)</i> Minimum Order Quantity: _____/brushes Packaging Quantity (ex. 12 per Box): _____/brushes per _____	\$ _____ X	80 Brushes	= \$ _____
49.	Youth Comb w/ Handle, 8.625 Inches (Black) Brand/Model: _____ <i>(ICS Jail Supplies T121 or approved equivalent)</i> Minimum Order Quantity: _____/combs Packaging Quantity (ex. 12 per Box): _____/comb per _____	\$ _____ X	12 Combs	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.
ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
50.	Youth Ponytail Holder, Card of 18 Holders (Black) Brand/Model: _____ <i>(Bob Barker Freestyle 90409 or approved equivalent)</i> Minimum Order Quantity: _____/cards of holders Packaging Quantity (ex. 12 per Box): _____/cards per _____	\$ _____ X	24 Cards	= \$ _____
51.	Youth Pump Spray, Antiperspirant, Deodorant, 2 oz. Container Brand/Model: _____ <i>(FreshScent TSD40 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	800 Containers	= \$ _____

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
52.	Youth Fresh Scent, Hand & Body Lotion, 4.0 oz. Container Brand/Model: _____ <i>(Bob Barker 20046 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	1400 Containers	= \$ _____
53.	Youth Individually Wrapped, 40 Tuft, Toothbrush (White) Brand/Model: _____ <i>(Bob Barker BBST-BB37 or approved equivalent)</i> Minimum Order Quantity: _____/brushes Packaging Quantity (ex. 12 per Box): _____/brushes per _____	\$ _____ X	100 Brushes	= \$ _____
54.	Youth Toothbrush Tube Holder with Outer Ridges (Clear) Brand/Model: _____ <i>(Bob Barker 422 or approved equivalent)</i> Minimum Order Quantity: _____/holders Packaging Quantity (ex. 12 per Box): _____/holders per _____	\$ _____ X	3,000 Holders	= \$ _____

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
55.	Youth Toothpaste, 4.6 oz. Container Brand/Model: _____ <i>(Bob Barker Nature Mint FM-46 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	1,400 Containers	= \$ _____
56.	Youth Shampoo/Body Wash, 1.0 Gallon Container Brand/Model: _____ <i>(CharmTex CT H/CT SSB128 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	600 Containers	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
57.	Youth Lice Control Shampoo, 2.0 fl. oz. Container Brand/Model: _____ <i>(Bob Barker Liceall LCS-2 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	20 Containers	= \$ _____
58.	Youth Lice & Mite Aerosol Spray, 16 fl. oz. Container Brand/Model: _____ <i>(ICS Jail Supplies M080 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	20 Containers	= \$ _____
59.	Lice Combs, double sided / 144 / GR Brand/Model: _____ <i>(ICS Jail Supplies M082 or approved equivalent)</i> Minimum Order Quantity: _____/combs Packaging Quantity (ex. 12 per Box): _____/combs per _____	\$ _____ X	100 Combs	= \$ _____

DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.
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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
60.	Long Maxi Pad, Super Absorbency w/ Wings, 10", Individually Wrapped Brand/Model: _____ <i>(Bob Barker SN288-C or approved equivalent)</i> Minimum Order Quantity: _____/pads Packaging Quantity (ex. 12 per Box): _____/pads per _____	\$ _____ X	8,600 Pads	= \$ _____
61.	Youth Maxi Thin Regular Panty Liner, Individually Wrapped Brand/Model: _____ <i>(Bob Barker SNPL or approved equivalent)</i> Minimum Order Quantity: _____/liners Packaging Quantity (ex. 12 per Box): _____/liners per _____	\$ _____ X	25,000 Liners	= \$ _____

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
62.	Youth T-Shirt, Crewneck (White) Brand/Model: _____ <i>(Victory Supply TSWH or approved equivalent)</i> Minimum Order Quantity: _____/shirts Packaging Quantity (ex. 12 per Box): _____/shirts per _____			
A	Small	\$ _____ X	24 Shirts	= \$ _____
B	Medium	\$ _____ X	144 Shirts	= \$ _____
C	Large	\$ _____ X	156 Shirts	= \$ _____
D	X-Large	\$ _____ X	72 Shirts	= \$ _____
E	2X-Large	\$ _____ X	12 Shirts	= \$ _____
F	3X-Large	\$ _____ X	12 Shirts	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
62.	Youth T-Shirt, Crewneck (White), Continued			
G	4X-Large	\$ _____ X	12 Shirts	= \$ _____
H	5X-Large	\$ _____ X	12 Shirts	= \$ _____
Total Item 62 (A-H):				\$ _____
63.	Youth Briefs (White)			
	Brand/Model: _____			
	<i>(Victory Supply BRWH or approved equivalent)</i>			
	Minimum Order Quantity: _____/pairs			
	Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Small	\$ _____ X	12 Pairs	= \$ _____
B	Medium	\$ _____ X	192 Pairs	= \$ _____
C	Large	\$ _____ X	252 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
63.	Youth Briefs (White), Continued			
D	X-Large	\$ _____ X	252 Pairs	= \$ _____
E	2X-Large	\$ _____ X	96 Pairs	= \$ _____
F	3X-Large	\$ _____ X	12 Pairs	= \$ _____
G	4X-Large	\$ _____ X	12 Pairs	= \$ _____
H	5X-Large	\$ _____ X	24 Pairs	= \$ _____
				Total Item 63 (A-H): \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
64.	Youth 100% Cotton Panties (White) Brand/Model: _____ <i>(Victory Supply PNTYWH or approved equivalent)</i> Minimum Order Quantity: _____/pairs Packaging Quantity (ex. 12 per Box): _____/pairs per _____			
A	Size 5	\$ _____ X	84 Pairs	= \$ _____
B	Size 6	\$ _____ X	84 Pairs	= \$ _____
C	Size 7	\$ _____ X	84 Pairs	= \$ _____
D	Size 8	\$ _____ X	12 Pairs	= \$ _____
E	Size 9	\$ _____ X	12 Pairs	= \$ _____
F	Size 10	\$ _____ X	12 Pairs	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
64.	Youth 100% Cotton Panties (White), Continued			
G	Size 11	\$ _____ X	12 Pairs	= \$ _____
H	Size 12	\$ _____ X	12 Pairs	= \$ _____
I	Size 13	\$ _____ X	12 Pairs	= \$ _____
J	Size 14	\$ _____ X	12 Pairs	= \$ _____
Total Item 64 (A-J):				\$ _____
65.	Youth Sports Bra, T-Back Style, NO HOOKS (White)			
	Brand/Model: _____			
	<i>(Victory Supply SBWH or approved equivalent)</i>			
	Minimum Order Quantity: _____/bras			
	Packaging Quantity (ex. 12 per Box): _____/bras per _____			
A	Size 32, A & B	\$ _____ X	2,400 Bras	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
65.	Youth Sports Bra, T-Back Style, NO HOOKS (White), Continued			
B	Size 34, A & B	\$ _____ X	1,800 Bras	= \$ _____
C	Size 36, A & B	\$ _____ X	24 Bras	= \$ _____
D	Size 38, A & B	\$ _____ X	24 Bras	= \$ _____
E	Size 40, B, C, & D	\$ _____ X	12 Bras	= \$ _____
F	Size 42, B, C, & D	\$ _____ X	2,800 Bras	= \$ _____
G	Size 44, B, C, & D	\$ _____ X	12 Bras	= \$ _____
H	Size 46, B, C, & D	\$ _____ X	12 Bras	= \$ _____
I	Size 48, B, C, & D	\$ _____ X	12 Bras	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
65.	Youth Sports Bra, T-Back Style, NO HOOKS (White), Continued			
J	Size 50, B, C, & D	\$ _____ X	12 Bras	= \$ _____
K	Size 52, B, C, & D	\$ _____ X	12 Bras	= \$ _____
			Total Item 65 (A-K): \$ _____	
66.	Youth Barber Sanitizing Solution Including Disinfectant, Germicide, Fungicide, & Virucide, 64 oz. Container	\$ _____ X	6 Containers	= \$ _____
	Brand/Model: _____			
	<i>(Bob Barker Barbicide 56420 or approved equivalent)</i>			
	Minimum Order Quantity: _____/containers			
	Packaging Quantity (ex. 12 per Box): _____/containers per _____			
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
67.	Youth Hair Dressing, 4 oz. Container Brand/Model: _____ <i>(Bob Barker Royal Crown 18 or approved equivalent)</i> Minimum Order Quantity: _____/containers Packaging Quantity (ex. 12 per Box): _____/containers per _____	\$ _____ X	12 Containers	= \$ _____
68.	Soluble Bags, 26" x 36", 100 bags per roll Brand/Model: _____ <i>(Bob Barker Z500 or approved equivalent)</i> Minimum Order Quantity: _____/bags Packaging Quantity (ex. 12 per Box): _____/bags per _____	\$ _____ X	1 roll	= \$ _____

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ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

PRICE FORM

ITEM NO.	DESCRIPTION	UNIT PRICE	ESTIMATED QUANTITY	EXTENDED PRICE
69.	Laundry Bag, Tie, Cord 15" x 20", white Do not need closures, just cord Brand/Model: _____ <i>(Bob Barker E1520 or approved equivalent)</i> Minimum Order Quantity: _____/bags Packaging Quantity (ex. 12 per Box): _____/bags per _____	\$ _____ X	252 Bags	= \$ _____
<p>DETAILED SPECIFICATIONS SHEETS ARE TO BE SUBMITTED WITH BID IF OFFERING ALTERNATE ITEMS.</p> <p>ESTIMATED QUANTITIES ARE NOT TO BE ALTERED WHEN DETERMINING EXTENDED PRICING.</p> <p>ALL TARIFFS/DELIVERY/FREIGHT/TRAVEL/FUEL COSTS TO BE INCLUDED IN UNIT PRICING.</p>				

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SEALED BID/PROPOSAL/RESPONSE**

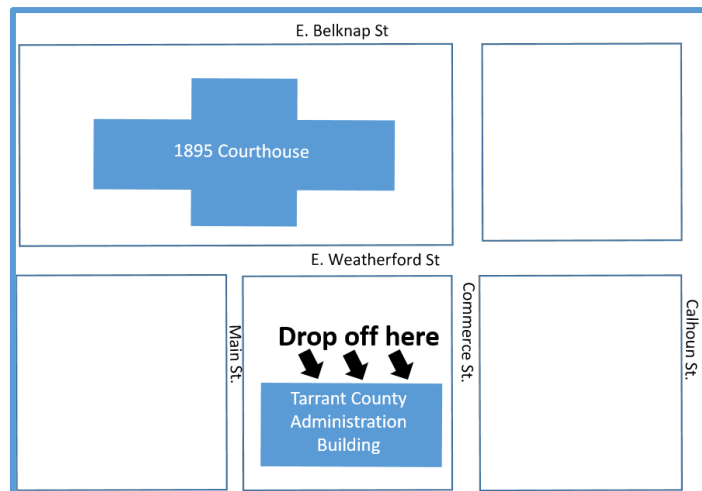
RFB No. 2023-006

ANNUAL CONTRACT FOR INMATE HYGIENE SUPPLIES

Due Date: OCTOBER 20, 2022 at 2:00 PM. CST

**Tarrant County Administration Building
ATTN: Purchasing Department
100 E. Weatherford St., Third Floor, Suite 303
Fort Worth, Texas 76196-0104**

Street View



Building View

