

RECEIVED

CONTRACT MANAGEMENT

(Contract Management Use only)  
CONTRACT TRACKING NO.  
Cm2101

CONTRACT APPROVAL FORM  
2014 FEB 26 AM 10:59

CONTRACTOR INFORMATION

Name: Physio-Control, Inc.  
Address: P.O. Box 97006; Redmond, WA 98073-9706  
Contractor's Administrator Name: Ernest "Jay" Gray City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Title: Senior Service Rep. Southeast  
Tel#: 800-442-1142 Fax: 800-772-3340 Email: jay.gray@physio-control.com

CONTRACT INFORMATION

Contract Name: Technical Service Support Agreement for LP12s and LP15s devices Contract Value: \$12,852.00

Brief Description: Physio-Control Inc. provides technical support for seven Life-Pak 12 and three Life-Pak 15 cardiac monitors used on all Fire Rescue ALS units.

Contract Dates : From: 5/2/14 to 5/1/15 Status: X New \_\_\_ Renew \_\_\_ Amend# \_\_\_ WA/Task Order  
How Procured: X Sole Source \_\_\_ Single Source \_\_\_ ITB \_\_\_ RFP \_\_\_ RFQ \_\_\_ Coop. \_\_\_ Other \_\_\_

If Processing an Amendment:

Contract #: \_\_\_\_\_ Increase Amount of Existing Contract: \_\_\_\_\_ No Increase  
New Contract Dates: \_\_\_\_\_ to \_\_\_\_\_ TOTAL OR AMENDMENT AMOUNT: \_\_\_\_\_

APPROVALS PURSUANT TO NASSAU COUNTY PURCHASING POLICY, SECTION 6

- [Signature] 2-26-14 01261526 546020  
Department Head Signature Date Funding Source/Acct #
- [Signature] 3-4-14  
Contract Management Date
- [Signature] 3-5-14  
Office of Management & Budget Date
- [Signature] 3-6-14  
County Attorney (approved as to form only) Date

Comments: \_\_\_\_\_

COUNTY MANAGER - FINAL SIGNATURE APPROVAL

[Signature] 3/11/14  
Ted Selby Date

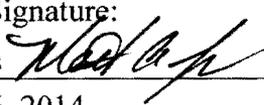
RETURN ORIGINAL(S) TO CONTRACT MANAGEMENT FOR DISTRIBUTION AS FOLLOWS:

- Original: Clerk's Services; Contractor (original or certified copy)
- Copy: Department
- Office of Management & Budget
- Contract Management
- Clerk Finance

RECEIVED  
COUNTY MANAGER'S OFFICE  
14 MAR - 7 AM 10:07  
RECEIVED  
COUNTY MANAGER'S OFFICE  
14 MAR - 4 PM 2:11

RECEIVED

Nassau County Board of County Commissioners  
Sole Source/Single Source Certification Form

Vendor Name: Physio-Control Inc. Department: Fire Rescue  
Address: P.O. Box 97006 Department Head Signature: \_\_\_\_\_  
Redmond, WA 98073-9706 Matthew A. Graves   
Phone: 800-442-1142 Date: February 26, 2014  
Contact Name: Ernest "Jay" Gray  
Account: 01261526-546020 Cost: \$12,852.00

Description of Commodity:

Service agreement with Physio-Control Inc. to provide technical support for Life-Pak 12 and Life-Pak 15 cardiac monitors used on Fire Rescue ALS apparatus.

Check one (1) of the following two (2) choices:

Sole Source: The goods or services can be legally purchased from only one source.

Single Source: The goods or services can be purchased from multiple sources, but, in order to meet certain functional or performance requirements, there is only one economically feasible source for this purchase.

Please check all of the following that apply:

Purchase can only be obtained from original manufacturer-not available through distributors.

Only authorized area distributor of the original manufacturer.

Parts/Equipment are not interchangeable with similar parts of another manufacturer.

This is the only known source that will meet the specialized needs of this department or perform the intended function.

This source must be used to meet warranty or service maintenance requirements.

This source is required for standardization.

None of the above apply.

Comments/Explanations: (required)

Annual service agreement for seven (7) Life-Pak 12 cardiac monitors and three (3) Life-Pak 15 cardiac monitors.

Approval:

 \_\_\_\_\_  
County Manager Date 3/11/14

Physio-Control, Inc. Lifesaving starts here.™

**ADDRESS**

11811 Willows Road NE  
Redmond, WA 98052

**PHONE**

GENERAL  
425.857.4000  
TOLL FREE  
800.442.1142

[www.physio-control.com](http://www.physio-control.com)

February 25, 2014

Constance C. Holmes  
Nassau County Fire Rescue  
96160 Nassau Place  
Yulee, FL 32097

Dear Ms. Holmes:

In response to your recent request, I am writing to confirm that Physio-Control, Inc. is the sole source provider in your marketplace for:

- New LIFEPAK® devices
- Our factory refurbished line of RELI devices
- LIFENET® Data Management Solutions
- The LUCAS® Chest Compression System
- Factory-authorized inspection and repair services which include repair parts, upgrades, inspections, and repairs

Physio-Control does not utilize the services of any authorized resellers in the sale of these products and services in your marketplace.

Best regards,



Rebecca Joseph

Contract Analyst

Physio Control, Inc.

11811 Willows Road NE

Redmond, WA 98052-2003

[rs.physiocontracts-south@physio-control.com](mailto:rs.physiocontracts-south@physio-control.com)

RECEIVED

CONTRACT MANAGEMENT

TECHNICAL SERVICE SUPPORT AGREEMENT

2014 MAR 27 AM 11:51

Contract Number:

End User # 00546101  
NASSAU CTY FIRE RESCUE  
96160 NASSAU PLACE  
YULEE, FL 32097

Bill To # 00546101  
NASSAU CTY FIRE RESCUE  
96160 NASSAU PLACE  
YULEE, FL 32097

This Technical Service Support Agreement begins on 5/2/2014 and expires on 5/1/2015.

The designated Covered Equipment and/or Software is listed on Schedule A. This Technical Service Agreement is subject to the Terms and Conditions on the reverse side of this document and any Schedule B, if attached. If any Data Management Support and Upgrade Service is included on Schedule A then this Technical Service Support Agreement is also subject to Physio-Control's Data Management Support and Upgrade Service Terms and Conditions, rev 7/99-1.

Price of coverage specified on Schedule A is \$12,852.00 per term, payable in a One Time installment.

Special Terms

- 15% DISCOUNT ON ACCESSORIES
- 15% DISCOUNT ON ALL ELECTRODES

Accepted: Physio-Control, Inc.

Customer:

By: *Rebecca Joseph*

By: *Ted Selby*

Title: *Contract Analyst*

Print: **Ted Selby**

Date: *March 21, 2014*

Title: **County Manager**

Date: *3/11/14*

Purchase Order Number: \_\_\_\_\_

Territory Rep: EAVV58  
Jay Gray  
Phone:  
FAX: 800-772-3340

Customer Contact:  
Mike Sadler  
Phone: 904-491-7525  
FAX:

**PHYSIO-CONTROL, INC.**  
**TECHNICAL SERVICE SUPPORT AGREEMENT TERMS AND CONDITIONS**

Customer's signature on this Agreement or a valid purchase order referencing this Technical Service Support Agreement is required prior to Physio-Control's acceptance and performance of this Agreement. This Agreement covers only the equipment listed on Schedule A ("Covered Equipment"). These terms constitute the complete agreement between the parties and they shall govern over any other documents, including Customer's purchase order. These terms may not be revised in any manner without the prior written consent of Physio-Control.

**SERVICES.** The Services provided under this Agreement are set forth on Schedule A. Physio-Control strives, but does not guarantee, to return service calls within two (2) hours and to resolve service issues within twenty-four (24) hours. Following Services, Physio-Control will provide Customer with a written report of actions taken or recommended and identification of any materials replaced or recommended for replacement. The following Services are available and further described as they relate to each specific Physio-Control device on Schedule B:

"*Repair Plus Service*" or "*Repair Only Service*" means repairs, Battery Replacement Service, parts and labor necessary to restore Covered Equipment to original specifications, subject to Exclusions (as set forth below).

"*Preventative Maintenance*" or "*Inspection Only Service*" means inspection and adjustment to maintain Covered Equipment in satisfactory operating condition. Inspections include tests, measurements, and a thirty-point evaluation of Covered Equipment. Covered Equipment is properly calibrated, mechanical operations are checked and adjusted, if necessary, and output measurements are verified to function properly. Electrical safety checks are also performed in accordance with National Fire Protection Association (NFPA) guidelines. Preventative Maintenance and Inspection Only Service are subject to Exclusions.

"*Comprehensive Service*" or "*Repair & Inspect Service*" means repairs, Battery Replacement Service, parts and labor necessary to restore Covered Equipment to original specifications, and inspections to verify proper device calibration, mechanical operations and output measurements, electrical safety check in accordance with NFPA guidelines, and Updates (as set forth below), subject to Exclusions.

"*Battery Replacement Service*" means replacement of batteries on a one-for-one, like-for-like basis, up to the number of batteries and/or devices listed in Schedule A. Only batteries manufactured or distributed by Physio-Control are eligible for replacement. Battery replacement is available upon Customer notification to Physio-Control of the occurrence of: (i) battery failure as determined by Customer's performance testing and evaluation in accordance with the applicable Operating Instructions; or (ii) the end of the useful life of the battery as set forth in the applicable Operating Instructions.

At the discretion of Physio-Control, battery replacement shall be effected by shipment to Customer and replacement by Customer, or by on-site delivery and replacement by a Physio-Control Service Technician. Upon Customer's receipt of a replacement battery, the battery being replaced shall become the property of Physio-Control, and Customer must return the battery being replaced to Physio-Control for proper disposal. In the event that Physio-Control does not receive the battery being replaced, Physio-Control will invoice Customer the then-current rate for the replacement battery.

"*On-Site Service*" means that a Physio-Control factory-trained technician will provide Services at Customer's location. Services will be performed between 8:00am and 5:00pm local time, Monday through Friday, excluding holidays. Customer is to ensure Covered Equipment is available for Services at scheduled times. Some Services may not be completed On-Site. Physio-Control will cover travel and/or round-trip freight for Covered Equipment that must be sent to our designated facility for repair.

"*Ship-In Service*" means that Services will be performed at Physio-Control's designated facility. Physio-Control will cover round-trip freight for Covered Equipment that is sent to our designated facility for Services.

If Covered Equipment is not available when Services are scheduled or Customer requests services or goods not covered by this Agreement or outside of designated Services frequency or hours, Physio-Control will charge Customer for such services at 10% off Physio-Control's standard rates (including overtime, if appropriate) and applicable travel costs in addition to the contract price. Repair parts required for such repairs will be made available at 15% off the then-current list price.

**EXCLUSIONS.** Unless otherwise specified, Services do not include the following Exclusions:

- supply or repair of accessories or disposables
- repair of damage caused by misuse, abuse, abnormal operating conditions, operator errors, acts of God, and use of batteries, electrodes, or other products not distributed by Physio-Control
- case changes
- repair or replacement of items not originally distributed or installed by Physio-Control
- Upgrades, and installation of Upgrades
- battery maintenance, performance testing, evaluation, removal, and recycling

**LOANERS.** If Covered Equipment must be removed from use to complete Services, Physio-Control will provide Customer with a loaner device, if one is available, until the Covered Equipment is returned. Customer assumes complete responsibility for the loaner

and shall return the loaner at Customer's expense to Physio-Control in the same condition as received, upon the earlier of the return of the removed Covered Equipment or Physio-Control's request.

**UPDATES.** "Update" means a change to a device to enhance its current features, stability, or software. If Comprehensive Service or Repair & Inspect Service is designated for Covered Equipment on Schedule A, Physio-Control will install Updates at no additional cost, provided such Updates are installed at the time of regularly scheduled Services. Updates installed on Covered Equipment designated on Schedule A as Repair Plus Service, Repair Only Service, Preventative Maintenance Service, Inspection Only Service, or at a time other than regularly scheduled Comprehensive Service or Repair & Inspect Service, will be billed on a separate invoice at 20% off the then-current list price of the Update. For all Service plans, if parts must be replaced to accommodate installation of new software, such parts may be purchased at a rate of 30% off the then-current list price.

**UPGRADES.** "Upgrade" means a major, standalone version of software or the addition of features or capabilities to a device. For all Service plans, Upgrades must be purchased separately and are not provided under this Agreement. Upgrades are available at a rate of 17% off the then-current list price.

**PRICING.** Pricing is set forth on the first page of this Agreement, or in the Quote and/or Invoice for the Services purchased. Prices do not include taxes. Sales, service or use taxes will be invoiced in addition to the price of the goods and Services covered by this Agreement unless Physio-Control receives a copy of a valid exemption certificate. If the number or configuration of Covered Equipment changes during the Term, pricing shall be pro-rated accordingly. For Preventative Maintenance Service, Inspection Only Service, Comprehensive Service, and Repair & Inspect Service, no pricing deduction will be made for removal of Covered Equipment if preventative maintenance and inspection have already been performed during the Term and no further preventative maintenance and inspection are scheduled to occur. Discounts may not be combined with other special terms, discounts, and/or promotions.

**PAYMENT.** Payment is due within forty five (45) days of invoice date.

**WARRANTY.** Physio-Control warrants Services performed under this Agreement and repair/replacement parts provided in performing such Services against defects in material and workmanship for ninety (90) days from the date Services were performed or a repair/replacement part was provided. Customer's sole remedy shall be reservicing the affected Covered Equipment and/or replacement of any part determined to be defective, without additional charge, provided Customer notifies Physio-Control of any allegedly defective condition within ten (10) calendar days of its discovery by Customer. Physio-Control makes no other warranties, express or implied, including, without limitation, **NO WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE, AND IN NO EVENT SHALL PHYSIO-CONTROL BE LIABLE FOR INCIDENTAL, CONSEQUENTIAL, SPECIAL, OR OTHER DAMAGES.**

**TERM.** The Term of this Agreement is set forth on the first page of this document, or in the Quote and/or Invoice for the Services purchased. This Agreement shall automatically renew unless terminated by either party with written notice thirty (30) days prior to the expiration of the then-current Term. Prices are subject to change upon renewal.

**TERMINATION.** Either party may terminate this Agreement for material breach by the other party by providing thirty (30) days' written notice to the other party, and provided such breach is not cured within the notice period. In addition, either party may terminate this Agreement at any time upon sixty (60) days' prior written notice to the other party. In the event of such early termination by Customer, Customer shall be responsible for the portion of the designated price which corresponds to the portion of the Term prior to the effective date of termination and the list-price cost of any preventative maintenance, inspections, or repairs rendered during the Term.

**DELAYS.** Physio-Control will not be liable for any loss or damage of any kind due to its failure to perform or delays in its performance resulting from any cause beyond its reasonable control, including, but not limited to, acts of God, labor disputes, labor shortages, the requirements of any governmental authority, war, civil unrest, delays in manufacture, obtaining any required license or permit, and Physio-Control's inability to obtain goods from its usual sources. Any such delay shall not be considered a breach of Physio-Control's obligations and the performance dates shall be extended for the length of such delay.

**DEVICE INSPECTION BEFORE ACCEPTANCE.** Any device that is not covered by either a Physio-Control Limited Warranty or a current Physio-Control Technical Service Support Agreement must be inspected and repaired (if necessary) to meet original specifications at then-current list prices prior to being covered under a Technical Service Support Agreement. Physio-Control reserves the right to refuse to support any device that has been remanufactured by a company other than Physio-Control.

**MISCELLANEOUS.** (a) During the Term of this Agreement and for one (1) year following its expiration, without Physio-Control's prior written consent, Customer agrees to not to solicit or offer employment to anyone who is employed by Physio-Control to provide Services such as those described in this Agreement; (b) this Agreement, and any related obligation of other party, may not be assigned in whole or in part without the prior written consent of the other party; (c) this Agreement shall be governed by the laws of the State in which the Services are provided; (d) all costs and expenses incurred by the prevailing party related to the enforcement of its rights under this Agreement, including reasonable attorney's fees, shall be reimbursed by the other party.

**PHYSIO-CONTROL, INC.  
TECHNICAL SERVICE SUPPORT AGREEMENT  
SCHEDULE A**

Contract Number:

Servicing Rep: Jay Gray, EAVV58  
District: SOUTHEAST  
Phone:  
FAX: 800-772-3340

Equipment Location: NASSAU CTY FIRE RESCUE, 00546101  
96160 NASSAU PLACE  
YULEE, FL 32097

Scope Of Service On Site Comprehensive Coverage

Model	Part Number	Serial Number	Ref. Line	Effective Date	Expiration Date	Total Inspections
LIFEPAK® 12	VLP12-02-002940	* 14319579	1	5/2/2014	5/1/2015	1
LIFEPAK® 12	VLP12-02-002940	* 14319582	2	5/2/2014	5/1/2015	1
LIFEPAK® 12	VLP12-02-002940	* 14319585	3	5/2/2014	5/1/2015	1
LIFEPAK® 12	VLP12-02-002940	* 14319588	4	5/2/2014	5/1/2015	1
LIFEPAK® 12	VLP12-02-002940	* 14330919	5	5/2/2014	5/1/2015	1
LIFEPAK® 12	VLP12-02-002940	* 14330920	6	5/2/2014	5/1/2015	1
LIFEPAK® 12	VLP12-02-007228	* 37068661	7	5/2/2014	5/1/2015	1

Scope Of Service On Site Repair and 1 On Site Inspection per Year:M-F/8-5

Model	Part Number	Serial Number	Ref. Line	Effective Date	Expiration Date	Total Inspections
LIFEPAK® 15	V15-2-001565	41030702	8	5/2/2014	5/1/2015	1
LIFEPAK® 15	V15-2-001565	41030759	9	5/2/2014	5/1/2015	1
LIFEPAK® 15	V15-2-001565	41031001	10	5/2/2014	5/1/2015	1

\*\* Denotes an inventory line that has changed since the last contract revision or addendum.

**MEDTRONIC EMERGENCY RESPONSE SYSTEMS, INC.  
TECHNICAL SERVICE SUPPORT AGREEMENT  
SCHEDULE A**

Contract Number:  
Additional Items

Service Type	Item	Quantity	Start Date	End Date
CASE CHANGE	LP12/15/20 CASE CHG 1-9	1	5/2/2014	5/1/2015

\*\* Denotes an additional item line that has changed since the last contract revision or addendum.

**PHYSIO-CONTROL, INC.**  
**TECHNICAL SERVICE SUPPORT AGREEMENT**  
**SCHEDULE B**

LIFEPAK® 15 Monitor/Defibrillator Services

LIFEPAK® 15 Monitor/Defibrillator Comprehensive Service

- Inspections at intervals set forth on Schedule A
- Parts and labor necessary to restore device to original specifications, subject to Exclusions
- Standard detachable hard paddles repair or replacement
- REDI-CHARGE® battery charger (Catalog# 11141-000115) repair or replacement of one for each LIFEPAK 15 Monitor/Defibrillator listed in Schedule A and as determined necessary by Physio-Control
- Power Adapter repair or replacement
- Battery Replacement Service
- o Replacement of three (3) LIFEPAK Lithium-ion batteries every three (3) years, or upon battery failure
- Updates installed at no additional cost, provided such Updates are installed at the time of regularly scheduled Services. If parts must be replaced to accommodate installation of new software, such parts may be purchased at a rate of 30% off the then-current list price.

LIFEPAK® 15 Monitor/Defibrillator Repair Plus Service

- Parts and labor necessary to restore device to original specifications, subject to Exclusions
- Standard detachable hard paddles repair or replacement
- REDI-CHARGE® battery charger (Catalog# 11141-000115) repair or replacement of one for each LIFEPAK 15 Monitor/Defibrillator listed in Schedule A and as determined necessary by Physio-Control
- Power Adapter repair or replacement
- Battery Replacement Service
- o Replacement of three (3) LIFEPAK Lithium-ion batteries every three (3) years, or upon battery failure
- Updates installed at 20% off the then-current list price provided such Updates are installed at the time of regularly scheduled Services. If parts must be replaced to accommodate installation of new software, such parts may be purchased at a rate of 30% off the then-current list price.

LIFEPAK® 15 Monitor/Defibrillator Preventative Maintenance Service

- Inspections at intervals set forth on Schedule A
- Updates installed at 20% off the then-current list price provided such Updates are installed at the time of regularly scheduled Services. If parts must be replaced to accommodate installation of new software, such parts may be purchased at a rate of 30% off the then-current list price.

**PHYSIO-CONTROL, INC.**  
**TECHNICAL SERVICE SUPPORT AGREEMENT**  
**SCHEDULE B**

LIFEPAK® 12 Defibrillator/Monitor Services

LIFEPAK® 12 Defibrillator/Monitor Comprehensive Service

- Preventative maintenance and inspections at intervals set forth on Schedule A
- Parts and labor necessary to restore device to original specifications, subject to Exclusions
- Standard detachable hard paddles repair or replacement
- REDI-CHARGE® battery charger (Catalog# 11141-000115) repair or replacement of one for each LIFEPAK 12 Defibrillator/Monitor listed in Schedule A and as determined necessary by Physio-Control
- Power Adapter repair or replacement
- Battery Replacement Service
  - o Replacement of failed internal coin cell batteries; and
  - o Replacement of four (4) Physio-Control FASTPAK® batteries, FASTPAK 2 batteries, LIFEPAK SLA batteries, LIFEPAK NiCd batteries every two years, or upon battery failure; or
  - o Replacement of three (3) LIFEPAK Lithium-ion batteries every two years, or upon battery failure
- Updates installed at no additional cost, provided such Updates are installed at the time of regularly scheduled Services. If parts must be replaced to accommodate installation of new software, such parts may be purchased at a rate of 30% off the then-current list price.

LIFEPAK® 12 Defibrillator/Monitor Repair Plus Service

- Parts and labor necessary to restore device to original specifications, subject to Exclusions
- Standard detachable hard paddles repair or replacement
- REDI-CHARGE® battery charger (Catalog# 11141-000115) repair or replacement of one for each LIFEPAK 12 Defibrillator/Monitor listed in Schedule A and as determined necessary by Physio-Control
- Power Adapter repair or replacement
- Battery Replacement Service
  - o Replacement of failed internal coin cell batteries; and
  - o Replacement of four (4) Physio-Control FASTPAK® batteries, FASTPAK 2 batteries, LIFEPAK SLA batteries, LIFEPAK NiCd batteries every two years, or upon battery failure every two years, or upon battery failure; or
  - o Replacement of three (3) LIFEPAK Lithium-ion batteries every two years, or upon battery failure
- Updates installed at 20% off the then-current list price provided such Updates are installed at the time of regularly scheduled Services. If parts must be replaced to accommodate installation of new software, such parts may be purchased at a rate of 30% off the then-current list price.

LIFEPAK® 12 Defibrillator/Monitor Preventative Maintenance Service

- Preventative maintenance and inspections at intervals set forth on Schedule A
- Updates installed at 20% off the then-current list price provided such Updates are installed at the time of regularly scheduled Services. If parts must be replaced to accommodate installation of new software, such parts may be purchased at a rate of 30% off the then-current list price.



03/05/2014 09:51  
6235clew

LP12

BOARD OF COMMISSIONERS  
SUBCLASS 803

PG 1  
faloclst

DEPT ROOM	TAG # ASSET #	SUB CLASS DESCRIPTION	MANUF SERIAL #	CUSTODIAN	QTY	ACQUIS DATE EST LIFE	ACQUIS COST CURR BOOK	REPLACE COST	REMARKS STATUS	CAPITALIZE?
SUBCLASS: 803 MONITOR										
0261	1904 20010110	MONITOR PROPAQ ECG/BP/TEMP. MONITOR	PROTODAO 14862	PUBLIC SAFETY		08/03/1999 5	3,856.25 .00	3,856.25	ACTIVE	Y
0261	1948 20010112	MONITOR PROPAQ ECG/BG/TEMP. MONITOR	PROTODAO 14873	PUBLIC SAFETY		08/03/1999 5	3,856.25 .00	3,856.25	ACTIVE	Y
0223	1942 20011025	MONITOR STINGER MONITOR	ELKHA	PUBLIC SAFETY		09/01/1996 10	2,140.25 .00	2,140.25	ACTIVE	Y
0223	1890 20011846	MONITOR TASK FORCE TIP MONITOR AND NOZ	TASK X355782	DEPT HEAD		09/25/2001 10	1,878.00 .00	1,878.00	ACTIVE	Y
0223	1953 20011847	MONITOR TASK FORCE TIP MONITOR & NOZZL	TASK X355816	PUBLIC SAFETY		09/25/2001 10	1,878.00 .00	1,878.00	ACTIVE	Y
0223	1924 20011848	MONITOR TASK FORCE TIP MONITOR & NOZZL	TASK X355937	PUBLIC SAFETY		09/25/2001 10	1,878.00 .00	1,878.00	ACTIVE	Y
0261	1903 20020010	MONITOR HEART MONITOR	PHYSI14319579	PUBLIC SAFETY		05/09/2002 5	20,094.00 .00	20,094.00	ACTIVE	Y
0261	1934 20020011	MONITOR HEART MONITOR	PHYSI14319582	PUBLIC SAFETY		05/09/2002 5	20,069.00 .00	20,069.00	ACTIVE	Y
0261	1916 20020012	MONITOR HEART MONITOR	PHYSI14330920	PUBLIC SAFETY		05/09/2002 5	20,069.00 .00	20,069.00	ACTIVE	Y
0261	1947 20020013	MONITOR HEART MONITOR	PHYSI14319588	PUBLIC SAFETY		05/09/2002 5	20,069.00 .00	20,069.00	ACTIVE	Y
0261	1972 20020014	MONITOR HEART MONITOR	PHYSI14330919	PUBLIC SAFETY		05/09/2002 5	20,069.00 .00	20,069.00	ACTIVE	Y
0261	1895 20020015	MONITOR HEART MONITOR	PHYSI14319585	PUBLIC SAFETY		05/09/2002 5	20,069.00 .00	20,069.00	ACTIVE	Y
0223	5463 20070137	MONITOR LIFEPAK 10P MONITOR/DEFIB/PACE	000111121	DEPT HEAD	1	06/01/2007 5	1,000.00 .00	1,000.00	ACTIVE	Y
0223	5464 20070138	MONITOR LIFEPAK 10P MONITOR/DEFIB/PACE	00007441	DEPT HEAD	1	06/01/2007 5	1,000.00 .00	1,000.00	ACTIVE	Y
0223	5465 20070139	MONITOR LIFEPAK 10P MONITOR/DEFIB/PACE	00038682	DEPT HEAD	1	06/01/2007 5	1,000.00 .00	1,000.00	ACTIVE	Y
0223	5466 20070140	MONITOR LIFEPAK 10P MONITOR/DEFIB/PACE	00006544	DEPT HEAD	1	06/01/2007 5	1,000.00 .00	1,000.00	ACTIVE	Y
0261	05970 20080134	MONITOR LIFEPAK 12 HEART MONITOR	PHYSI37068661	DEPT HEAD	1	08/19/2008 5	12,594.62 .00	12,594.62	ACTIVE	Y



03/05/2014 09:51  
6235clew

BOARD OF COMMISSIONERS  
SUBCLASS 803

PG 2  
faloclst

DEPT ROOM	TAG # ASSET #	SUB CLASS DESCRIPTION	MANUF SERIAL #	CUSTODIAN	QTY	ACQUIS DATE EST LIFE	ACQUIS COST CURR BOOK	REPLACE COST	REMARKS STATUS CAPITALIZE?
		SUBCLASS 803 TOTALS	COUNT:	17			152,520.37 .00	152,520.37	
		GRAND TOTALS	COUNT:	17			152,520.37 .00	152,520.37	

\*\* END OF REPORT - Generated by Cathy Lewis \*\*

03/05/2014 09:55  
6235clew

BOARD OF COMMISSIONERS  
SBUCLASS 513

PG 2  
faloclst

4715

DEPT ROOM	TAG # ASSET #	SUB CLASS DESCRIPTION	MANUF SERIAL #	CUSTODIAN	QTY	ACQUIS DATE EST LIFE	ACQUIS COST CURR BOOK	REPLACE COST	REMARKS STATUS	CAPITALIZE?
0261	06885 20120082	DEFIBRILLATOR LIFEPAK 15 MONITOR/DEFIBRILLAT	PHYSI40256031	DEPT HEAD	1	03/23/2012 5	29,789.66 18,370.33	29,789.66	ACTIVE	Y
0261	06886 20120083	DEFIBRILLATOR LIFEPAK 15 MONITOR/DEFIBRILLAT	PHYSI40256773	DEPT HEAD	1	03/23/2012 5	29,789.66 18,370.33	29,789.66	ACTIVE	Y
0261	06887 20120084	DEFIBRILLATOR LIFEPAK 15 MONITOR/DEFIBRILLAT	PHYSI40256775	DEPT HEAD	1	03/23/2012 5	29,789.66 18,370.33	29,789.66	ACTIVE	Y
0021	06911 20120108	DEFIBRILLATOR LIFE PACK CRPLUS DE DEFIBRILLA	PHYSI40301536	JOHN A CRAWFORD	1	03/16/2012 5	1,423.50 877.84	1,423.50	ACTIVE	Y
0021	06912 20120109	DEFIBRILLATOR LIFE PACK CRPLUS DE DEFIBRILLA	PHYSI40301537	JOHN A CRAWFORD	1	03/16/2012 5	1,423.50 877.84	1,423.50	ACTIVE	Y
0261	07264 20130219	DEFIBRILLATOR LIFEPAK MONITOR/DEFIBRILLATOR	PHYSI41030702	DEPT HEAD	1	01/17/2013 5	29,439.79 23,061.20	29,439.79	ACTIVE	Y
0261	07265 20130220	DEFIBRILLATOR LIFEPAK MONITOR/DEFIBILLATOR	PHYSI41031001	DEPT HEAD	1	01/17/2013 5	29,439.80 23,061.21	29,439.80	ACTIVE	Y
0261	07266 20130221	DEFIBRILLATOR LIFEPAK MONITOR/DIFIBRILLATOR	PHYSI41030759	DEPT HEAD	1	01/17/2013 5	29,439.80 23,061.21	29,439.80	ACTIVE	Y
0625	07373 20130306	DEFIBRILLATOR DCF A100-EN LIFELINE AED DEFIB	LIFEL101228916	DEPT HEAD	1	05/02/2013 5	1,044.53 887.84	1,044.53	ACTIVE	Y
0258	07429 20130359	DEFIBRILLATOR POWERHEART G3 AED DEFIBRILLATO	CARSC4343534	DEPT HEAD	1	09/30/2013 5	795.00 728.75	795.00	ACTIVE	Y
SUBCLASS 813 TOTALS				COUNT:	26		230,137.41 149,344.91	227,788.41		
GRAND TOTALS				COUNT:	26		230,137.41 149,344.91	227,788.41		

\*\* END OF REPORT - Generated by Cathy Lewis \*\*

03/05/2014 09:55  
6235clew

BOARD OF COMMISSIONERS  
SBUCLASS 513

PG 1  
faloclst

DEPT ROOM	TAG # ASSET #	SUB CLASS DESCRIPTION	MANUF SERIAL #	CUSTODIAN	QTY	ACQUIS DATE EST LIFE	ACQUIS COST CURR BOOK	REPLACE COST	COST REMARKS STATUS	CAPITALIZE?
SUBCLASS: 813 DEFIBRILLATOR										
0223	0277 20011625	DEFIBRILLATOR HEARTSTART & CASE	LAERD	DEPT HEAD		03/31/2000 10	2,349.00 .00	.00	ACTIVE	Y
0628	05708 20070394	DEFIBRILLATOR AUTO EXTERNAL DEFIBRILLATOR	28307	DEPT HEAD	1	08/25/2006 5	1,150.00 .00	1,150.00	ACTIVE	Y
0627	05714 20070400	DEFIBRILLATOR AED DEFIBRILLATOR	28405	DEPT HEAD	1	08/25/2006 5	1,150.00 .00	1,150.00	ACTIVE	Y
0626	05719 20070405	DEFIBRILLATOR AED DEFIBRILLATOR	28415	DEPT HEAD	1	08/25/2006 5	1,150.00 .00	1,150.00	ACTIVE	Y
0629	05737 20070423	DEFIBRILLATOR POWERHEART AED DEFIBRILLATOR	28291	DEPT HEAD	1	08/25/2006 5	1,150.00 .00	1,150.00	ACTIVE	Y
0223	06510 20101155	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325204	DEPT HEAD	1	08/10/2010 5	1,102.38 330.77	1,102.38	ACTIVE	Y
0223	06512 20101156	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325235	DEPT HEAD	1	08/10/2010 5	1,102.38 330.77	1,102.38	ACTIVE	Y
0223	06513 20101157	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325238	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0223	06514 20101158	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325274	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0223	06515 20101159	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325274	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0223	06516 20101160	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325276	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0223	06517 20101161	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325297	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0223	06518 20101162	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325354	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0223	06519 20101163	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325360	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0223	06520 20101164	DEFIBRILLATOR DEFIBRILLATOR - POWER HEART G3	CARSC4325364	DEPT HEAD	1	08/10/2010 5	1,102.39 330.77	1,102.39	ACTIVE	Y
0261	06884 20120081	DEFIBRILLATOR LIFEPAK 15 MONITOR/DEFIBRILLAT	PHYSI40256025	DEPT HEAD	1	03/23/2012 5	29,789.63 18,370.33	29,789.63	ACTIVE	Y

ESB19

**Constance Holmes**

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**From:** Gray, Jay [jay.gray@physio-control.com]  
**Sent:** Tuesday, February 25, 2014 3:49 PM  
**To:** Constance Holmes  
**Subject:** FW: Lifepak Service Agreement - V58-1414

**Attachments:** Nassau County Fire Rescue.pdf; V58-1414 clean.pdf



Nassau County Fire V58-1414 clean.pdf  
Rescue.pdf ... (52 KB)

Constance,  
Attached are the documents that have been revised according to your email.

Let me know if you have any questions.

Thanks and take care

Jay Gray

-----Original Message-----  
From: Constance Holmes [mailto:cholmes@nassaucountyfl.com]  
Sent: Monday, February 24, 2014 9:14 AM  
To: Gray, Jay  
Cc: Constance Holmes  
Subject: Lifepak Service Agreement - V58-1414

Jay,  
Fire Rescue will need the sole-source letter (copy of last letter is attached) and confirmation of net 45 days vs. 30 days for payment terms to complete the documentation for the service agreement. The information can be e-mailed to me. Please let me know if you need more information. Thank you.

Constance C. Holmes  
Fire Rescue Headquarters  
96160 Nassau Place  
Yulee, FL 32097  
904.491.7525  
904.321.5748/fax

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**Constance Holmes**

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**From:** Dawn Krass [dkrass@nassaucountyfl.com]  
**Sent:** Wednesday, February 12, 2014 4:31 PM  
**To:** Constance Holmes  
**Cc:** Dawn Krass  
**Subject:** FW: Service Agreement  
**Attachments:** PO Requirement.pdf; Nassau Service Agreement.pdf

Constance,

Please process the attached contract with a Contract Approval Form for Ted's signature. I will forward it to Physio for signature once Ted signs it.

Thanks!

Dawn Krass  
Contract Specialist  
Nassau County Contract Management  
96135 Nassau Place, Suite 6  
Yulee, FL 32097  
Phone: (904) 491-7377 ext 1097  
Fax: (904) 321-2658  
Email: [dkrass@nassaucountyfl.com](mailto:dkrass@nassaucountyfl.com)

*OK 2/16/14*

---

**From:** Gray, Jay <jay.gray@physio-control.com>  
**Sent:** Tuesday, February 11, 2014 10:34 PM  
**To:** Dawn Krass  
**Subject:** Service Agreement

Dawn,

Attached is the renewal for the Lifepak Service Agreement. The attached PO form is required unless a copy of the PO is sent with the signed contract.

Let me know if you have any questions.

Thanks and take care

■

**Jay Gray**  
Senior Service Representative, Southeast

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**ADDRESS**

11811 Willows Road NE  
Redmond, WA 98052

**PHONE**

GENERAL  
425 867 4000  
TOLL-FREE  
800 442 1142

[www.physio-control.com](http://www.physio-control.com)

Valued Customer,

To ensure payment will be received for goods and services purchased, Physio Control's policy requires a hard copy Purchase Order be submitted, with the signed Service Contract Agreement, for any value in excess of \$10,000.

In the event a hard copy purchase order is unable to be provided for the full amount of the Contract, or your company does not utilize a purchase order system, this letter confirms that you acknowledge and agree that payment will be made, in full, for the total value of the contract, based on the payment term specified in the Contract terms and conditions.

Sincerely,  
Physio-Control, Inc.  
Redmond, WA 98052

\_\_\_\_\_  
Service Contract Number

\_\_\_\_\_  
Customer

\_\_\_\_\_  
Customer Representative – Print

\_\_\_\_\_  
Customer Representative – Signature

\_\_\_\_\_  
Date