

THIS IS TO ESTABLISH A CONTRACT FOR STATE AGENCIES TO USE IN THE EVENT OF A DECLARED EMERGENCY THAT IS ISSUED BY THE GOVERNOR OF THE STATE OF LOUISIANA, IN ACCORDANCE WITH THE LAWS OF THE STATE OF LOUISIANA.

Pricing Sheet for Solicitation # 3000005411, Emergency Contingency Statewide Contract for Medical Oxygen

| Line item # | Item Description | Qty | Unit of Measurement | Unit Price |
|-------------|--|-----|---------------------|------------|
| 1 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE C, ** PURCHASE** CGA-870 POST VALVE, 246 LITERS/8.7 CU FT 2015 PSI, DOT APPROVED. Type of Cylinder Bidding: _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 2 | OXYGEN CYLINDER, Aluminum or Steel, SIZE C, **FILL/REFILL** CGA-870 POST VALVE, 246 LITERS/8.7 CU FT 2015 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 3 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE C, ** RENTAL** CGA-870 POST VALVE, 246 LITERS/8.7 CU FT 2015 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Month | |
| 4 | COST TO REPLACE OXYGEN CYLINDER IF LOST AND/OR NOT RECOVERED. LINE ITEM BID FOR LINE ITEM #3, SIZE C. Specify Brand (& Number if Applicable): _____ | 1 | Each | |

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|-------------|---|-----|---------------------|------------|
| 5 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE D, **PURCHASE** CGA-870 POST VALVE, 425 LITERS/15.0 CU FT, 2015 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 6 | OXYGEN CYLINDER, Aluminum or Steel, SIZE D, **FILL/REFILL** CGA-870 POST VALVE, 425 LITERS/15.0 CU FT 2015 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 7 | OXYGEN CYLINDER, Aluminum or Steel, FULL SIZE D, ** RENTAL ** CGA-870 POST VALVE, 425 LITERS/15.0 CU FT, 2015 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Month | |
| 8 | COST TO REPLACE OXYGEN CYLINDER IF LOST AND/OR NOT RECOVERED. LINE ITEM BID FOR LINE ITEM #7, SIZE D. Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 9 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE E, ** PURCHASE** 679 LITERS/24.0 CU FT . 2015 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |

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| 10 | OXYGEN CYLINDER, Aluminum or Steel, SIZE E, **FILL/REFILL** CGA-870 POST VALVE, 679 LITERS/24.0 CU. FT. 2015 PSI DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 11 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE E, **RENTAL** CGA-870 POST VALVE, 679 LITERS/24.0 CU. FT., 2015 PSI DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Month | |
| 12 | COST TO REPLACE OXYGEN CYLINDER IF LOST AND/OR NOT RECOVERED. LINE ITEM BID FOR LINE ITEM #11, SIZE E. ALUMINUM Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 13 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE H, **PURCHASE** CGA-540 VALVE WITH CAP, 7970 LITERS, 2200 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 14 | OXYGEN CYLINDER, Aluminum or Steel, SIZE H, **FILL/REFILL** CGA-540 VALVE WITH CAP, 7970 LITERS, 2200 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |

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| 15 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE H, **RENTAL** CGA-540 VALVE WITH CAP, 7970 LITERS, 2200 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Month | |
| 16 | COST TO REPLACE OXYGEN CYLINDER IF LOST AND/OR NOT RECOVERED. LINE ITEM BID FOR LINE ITEM #15, SIZE H. Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 17 | OXYGEN CYLINDER, Aluminum or Steel, FULL SIZE M, **PURCHASE**, CGA-540 SPIGOT VALVE 3454 LITERS/122.0 CU. FT., 2216 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 18 | OXYGEN CYLINDER, Aluminum or Steel, SIZE M, **FILL/REFILL** CGA-540 SPIGOT VALVE 3454 LITERS/122.0 CU. FT., 2216 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 19 | OXYGEN CYLINDER, Aluminum or Steel, Full, SIZE M, **RENTAL** CGA-540 SPIGOT VALVE 3454 LITERS/122.0 CU. FT., 2216 PSI, DOT APPROVED Type of Cylinder Bidding _____ Aluminum _____ Steel REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |

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| 20 | COST TO REPLACE OXYGEN CYLINDER IF LOST AND/OR NOT RECOVERED. LINE ITEM BID FOR LINE ITEM #19, SIZE M. Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 21 | STRAPS, **PURCHASE** ALL ASSEMBLIES WITH 10,000 LB CAPACITY AND FEATURE 2 WIDE HEAVY DUTY LOW STRETCH WEBBING WITH 12' LENGTH. END TYPE: EACH END HAS 12 OF 5/16 CHAIN AND GRAB HOOK, DOT APPROVED. REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 22 | CYLINDER CART DOLLY, **PURCHASE** HOLDS (1) M60, M, H OR T SIZE CYLINDER, HEIGHT: 48, WIDTH: 18, DEPTH: 18 WEIGHT: 25 LBS., CASTER DIA: 3 SWIVEL W/BRAKE, RETAINING SAFETY CHAIN. REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 23 | OXYGEN TRANSPORT CART **PURCHASE** CYLINDER CAPACITY 40 CYLINDERS, CYLINDER SIZE D AND/OR E, IRON STEEL FRAME, REMOVABLE STEEL DOORS, REMOVABLE HANDLES, *BUMPER GUARD KIT*, LOCKING CASTERS, DOT APPROVED. REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 24 | OXYGEN TRANSPORT CART **PURCHASE** CYLINDER CAPACITY: 40, LOCK TOP, CYLINDER SIZE D AND/OR E, IRON STEEL FRAME, REMOVABLE HANDLES, LOCKING CASTERS, DOT APPROVED. REGION(S) Bidding (Check all that are applicable): _____ 1 _____ 2 _____ 3 _____ 4 _____ 5 _____ 6 _____ 7 _____ 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |

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| Line Item # | Item Description | Qty | Unit of Measurement | Unit Price |
|-------------|--|----------------------------------|---------------------|------------|
| 25 | OXYGEN TRANSPORT PALLET **PURCHASE** METAL PALLET WITH METAL RAILINGS, PALLET DIMENSION 29 1/2 X 72 X 36, DOT APPROVED. REGION(S) Bidding (Check all that are applicable): 1 2 3 4 5 6 _____ 7 8 Specify Brand (& Number if Applicable): _____ | 1 | Each | |
| 26 | OXYGEN TRANSPORT PALLET, **RENTAL** METAL PALLET WITH METAL RAILINGS, PALLET DIMENSION 29 1/2 X 72 X 36, DOT APPROVED. REGION(S) Bidding (Check all that are applicable): 1 2 3 4 5 6 _____ 7 8 Specify Brand (& Number if Applicable): _____ | 1 | Day | |
| 27 | DELIVERY DETAINMENT CHARGES BEYOND A FOUR (4) HOUR DELAY. IF YOUR DELIVERY IS UNREASONABLY DELAYED IN LOADING OR UNLOADING AT DELIVERY DESTINATION, BEYOND (4) FOUR HOURS, SPECIFY WHETHER A SEPERATE HOURLY DELIVERY DETAINMENT CHARGE WILL BE ASSESSED. | per | Hour | |
| 28 | DELIVERY RE-ROUTING CHARGES: TRUCKS MUST BE ABLE TO BE RE-ROUTED DURING TRANSIT, IF DEEMED NECESSARY, QUOTE YOUR COMPANY'S RE-ROUTING FLAT FEE, AND/OR CHARGE PER MILE. | charge per mile: | OR Flat Fee: | |
| 29 | DELIVERY TRACKING: VENDOR SHOULD HAVE REAL TIME TRACKING CAPABILITY TO IDENTIFY, VERIFY AND TRACK EACH SHIPMENT AS IT MOVES FROM ORDER PLACEMENT TO DESTINATION DELIVERY. THIS IS SIGNIFICANT DURING AN EMERGENCY SITUATION, IN CASE THE TO RE-ROUTE, DIVERT, OR RECEIVER OF GOODS AND/OR RECEIVER OF GOODS AND/OR SERVICES. | Is Real Time Tracking Available? | _____ YES _____ NO | |