

RESOLUTIONS:

1.) Fund: General Amount: \$ 316.00

Explanation: Budget Amendment in the General Fund for damaged/lost materials, as well as donations, received by the
Nassau County Library System.

Support: Tab 1 Page A

OTHER ITEMS FOR CONSIDERATION:

1.) Approve attached Deletion from Inventory forms.

Support: Tab 2 Page A

2.) Approve attached Signature Authorization form.

Support: Tab 2 Page B

Tab 1
Page A

RESOLUTION 2018-

WHEREAS the General Fund has received payment for damaged/lost materials, as well as a donation, for the Nassau County Library System.

WHEREAS this revenue was not anticipated in the 2017/2018 budget year by the fund.

BE IT THEREFORE resolved by the Board of County Commissioners, Nassau County, Florida in regular session, duly assembled on the _____ day of _____, 2018 the following budget amendment pursuant to Florida Statutes Chapter 129.06 be adopted:

REVENUE

01711571-352020	Damaged Books/Materials	\$ 65
01714571-366911	Donations	<u>\$ 251</u>
		\$ 316

APPROPRIATION

01711571-566100	Books & Materials	\$ 65
01714571-552000	Misc Supplies	\$ 155
01714571-566100	Books & Materials	<u>\$ 96</u>
		\$ 316

ADOPTED this _____ day of _____, 2018.

ATTEST:

CHAIR

EX-OFFICIO CLERK

cw

RCVD COUNTY MGR
19 JUN '18 PM 3:25

Cindy,
Please process a BVA
for the attached donation
and lost/damaged items

01714571-552000	\$155.00
01714571-566100	\$ 46.00 96.00
01711571-566100	\$ 65.25
	<hr/> 316.25

BD43 (COPY)
DEPOSIT TICKET
DEPOSIT RECORD COPY

NPLS
H/S

SUNTRUST ACH RT 061000104

DATE 6/13/18

	DOLLARS	CENTS
CURRENCY	1307	00
COIN	26	64
LIST EACH CHECK		
1		
2		
3		
4		
5		
6		
7		
8		
9		
10		
11		
12		
13		
14		
15		
16		
17		

CASH DEPOSIT

Bus. Date 13Jun.2018 AM 1:33:04 CASH
1,333.04 TOTAL
Transaction Date: 13Jun.2018 13:29:01

BOARD OF COUNTY COMMISSIONERS
OF NASSAU COUNTY
LIBRARY DEPARTMENT
76347 VETERANS WAY, SUITE 4000 YULEE, FL 32097

05 0631021521

CHECKS AND OTHER ITEMS ARE RECEIVED FOR DEPOSIT SUBJECT TO THE PROVISIONS OF THE UNIFORM COMMERCIAL CODE OR ANY APPLICABLE COLLECTION AGREEMENT

PLEASE ENTER TOTAL
TOTAL ITEMS
PLEASE BE SURE ALL ITEMS ARE PROPERLY ENDORSED.
DEPOSITS MAY NOT BE AVAILABLE FOR IMMEDIATE WITHDRAWAL

63-215-631

Donna W. [unclear]
6/13/18

NASSAU COUNTY PUBLIC LIBRARY SYSTEM

DAILY BUSINESS DEPOSIT

LIBRARY U NCPLS

DATE: 06/13/18

FISCAL YEAR: 2017-18

Coins
✓ \$0.01 \$ 0.64

✓ \$0.05 \$ 0.40

✓ \$0.10 \$ 5.00

✓ \$0.25 \$ 20.00

\$0.50

\$1.00

Sub-Total \$ 26.04

Bills

✓ \$1.00 \$ 137.00

\$2.00

✓ \$5.00 \$ 100.00

✓ \$10.00 \$ 70.00

✓ \$20.00 \$ 1,000.00

\$50.00

\$100.00

Sub-Total \$ 1,307.00

Total Cash \$ 1,333.04

Check Deposit Amount \$ 1,378.58

Sub-Total \$ 1,378.58

Grand Total \$ 2,711.62

Previous
Deposit: 06/06/18

		TOTAL DEPOSIT														
		352010	01711571- 352020	366911	362002 Meeting Room Rental Fees	208031 Rental Taxes	365920 Sales of Materials	347101 Out of State	347121 Proctoring Fees	341900 PASS Passport	01000000- 201000PASS Expedite Postage	341901 PASS Passport Photos	208031 PASS Sales Tax	Cash		
Branch Account #	Fines&Fees	Damaged Books/Materials	Donations												Total	
ADM-01711571		\$ 65.25													\$ 65.25	
FB -01712571	\$ 459.33		\$ 0.66						\$ 10.00	\$ 1,190.00	\$ 24.70	\$ 355.30	\$ 24.87		\$ 2,064.86	
CAL-01713571	\$ 186.31		\$ 0.81												\$ 187.12	
HLD-01714571	\$ 80.40		\$ 251.00	✓											\$ 331.40	
BRY-01715571	\$ 11.20														\$ 11.20	
YUL-01716571	\$ 51.70														\$ 51.70	
	\$ 788.94	\$ 65.25	\$ 252.47		\$ -	\$ -	\$ -	\$ -	\$ 10.00	\$ 1,190.00	\$ 24.70	\$ 355.30	\$ 24.87		\$ 2,711.53	

Photos Sold 38

Deposit: \$ 2,711.62

Cash +/- \$ 0.09

FB over \$0.09

Preparer

Signatures:

Verified

Claire D. Shepherd 06/13/2018

Anna M. Brannon 6/13/18

0 - *

251 - 00 +

65 - 25 +

316 - 25 *



Deposit Detail (By Deposit) Report

Fifth Third Bank - Electronic Deposit Manager

Report Created on 6/13/2018 10:10:51 AM by QI5WL00A

Presenter: NASSAU COUNTY BOARD OF COUNTY

Date Range: 6/13/2018 - 6/13/2018

Location(s): Fernandina Library

Account(s)

(*) = Please See Adjustment Report For Details

Research Id	Aux OnUs	Transit Routing	Account Number	Process Control	Amount
-------------	----------	--------------------	----------------	-----------------	--------

Location: Fernandina Library ~ Acct: NASSAU COUNTY BOARD OF COUNTY

User: QI5WL00A ~ Item Count: 35 ~ Deposit Amount: \$1378.58

Processed: 6/13/2018 ~ Acknowledged: 6/13/2018 10:11AM ~ Posted: 6/13/2018

3-1			600	1378.58
3-2			00192	(\$35.00)
3-3			00944	(\$14.59)
3-4			01848	(\$50.00)
3-5			0588	(\$12.00)
3-6			1426	(\$45.00)
3-7			02654	(\$20.00)
3-8				(\$35.00)
3-9				(\$45.00)
3-10				(\$35.00)
3-11			2005	(\$45.00)
3-12			09484	(\$10.19)
3-13			02250	(\$45.00)
3-14			0695	(\$35.00)
3-15			02483	(\$23.00)
3-16			0365	(\$45.00)
3-17			1246	(\$45.00)
3-18			001	(\$35.00)
3-19			1140	(\$45.30)
3-20			1427	(\$35.00)
3-21			1428	(\$33.00)
3-22			4436	(\$90.00)
3-23			2234	(\$45.00)
3-24			1154	(\$69.70)
3-25			9344	(\$45.00)
3-26			0763	(\$16.00)
3-27				(\$140.00)
3-28			1586	(\$16.00)
3-29			2362	(\$45.00)
3-30				(\$35.00)

Deposit Detail (By Deposit) Report **Fifth Third Bank - Electronic Deposit Manager**

Report Created on 6/13/2018 10:10:51 AM by QI5WL00A

Presenter: NASSAU COUNTY BOARD OF COUNTY

Date Range: 6/13/2018 - 6/13/2018

Location(s): Fernandina Library

Account(s):

() = Please See Adjustment Report For Details*

Research Id	Aux OnUs	Transit Routing	Account Number	Process Control	Amount
3-31					(\$45.00)
3-32				0196	(\$8.80)
3-33				1044	(\$45.00)
3-34					(\$45.00)
3-35	6623802				(\$45.00)
	Total			}	

DONATION RECORDS

DONATION RECORD (MONETARY)

Donor's Name:	<u>Library Staff</u>	IN HONOR OF:	<u>The Stanley Family</u>
Address:	<u></u>	Address:	<u></u>
City, St., Zip Code:	<u></u>	City, St., Zip Code:	<u></u>
Date of Donation:	<u>6/8/2018</u>	Donation Amount:	<u>\$201.00</u> Cash Check # <u></u>
Donation Purpose:	<u>Purchase of childrens books and childrens area items</u>		
	<u></u>		

DONATION RECORDS

DONATION RECORD (MONETARY)

Donor's Name:	<u>Janet Loveless</u>	IN HONOR OF:	<u>The Stanley Family</u>
Address:	<u></u>	Address:	<u></u>
City, St., Zip Code:	<u></u>	City, St., Zip Code:	<u></u>
Date of Donation:	<u>6/8/2018</u>	Donation Amount:	<u>\$ 50.00</u> Cash Check# <u>1281</u>
Donation Purpose:	<u>Purchase of childrens books and childrens area items</u>		
	<u></u>		

Donations
366911

0 • *

201 • 00 +

50 • 00 +

251 • 00 *

ROBERT W LOVELESS
JANET W LOVELESS
1910 NORTH LAKESIDE DR
FERNANDINA BEACH, FL 32034-5243

1848

63-751/631 11092

6-7-2018
Date

Pay to the
Order of

Nassau County BOCC \$ 50.00
Fifty 00/100 Dollars



Wells Fargo Bank, N.A.
Florida
Wells Fargo

Book Purchase
Library memory of
For Donation for Stanley family

[Signature]

⑆063107513⑆

01848

Photo
Safe
Deposit
Deposit
Deposit

Display User : Glossary**06/12/2018****Item information**

Title: Haunted castle on Hallows Eve ID: 30310000910452
Author: Osborne, Mary Pope.
Call#: J OSB
Copy: 1

Charge information

Date charged: 4/7/2012,12:19 Date due: 4/21/2012,23:59
Checkout library: CALLAHAN
Circulation rule: 14DAY

Bill information

Billed: \$7.17 Tax: Reason: LOST
payments: 1 Date: 6/7/2018 Last notice:
Still owes: \$0.00 Number of notices: 0 Library: CALLAHAN
Transaction date: 6/7/2018 Date paid: 6/7/2018

Payments:

Payment date: 6/7/2018 Amount: \$7.17 Payment type: CASH

Payment library: FERNANDINA

Note:

Damaged/lost *
352020

7 * 17 +
3 * 09 +
6 * 99 +
25 * 00 +
23 * 00 +
65 * 25 *

Display User : Glossary**06/12/2018****Item information**

Title: Summer of the sea serpent ID: 30310001874418
Author: Osborne, Mary Pope.
Call#: J OSB
Copy: 3

Charge information

Date charged: 4/7/2012,12:19 Date due: 4/21/2012,23:59
Checkout library: CALLAHAN
Circulation rule: 14DAY

Bill information

Billed: \$3.09 Tax: Reason: LOST
payments: 1 Date: 6/7/2018 Last notice:
Still owes: \$0.00 Number of 0 Library: CALLAHAN
notices:
Transaction 6/7/2018 Date paid: 6/7/2018
date:

Payments:

Payment date: 6/7/2018 Amount: \$3.09 Payment type: CASH
Payment library: FERNANDINA

Note:

ISBN # 9780099519881

ITEM Library: FB

Item information

Title: PLAYING FOR PIZZA ID: 30310002451208
Author: GRISHAM, JOHN
Call#: PBK F GRI
Copy: 1

Charge information

Date charged: 9/23/2017,11:38 Date due: 11/26/2017,23:59
Date renewed: 10/10/2017,10:47
Checkout library: FERNANDINA
Circulation rule: 14DAY

Bill information

Billed: \$6.99 Tax: Reason: LOST
payments: 1 Date: 6/7/2018 Last notice:
Still owes: \$0.00 Number of 0 Library: FERNANDINA
notices:
Transaction 6/7/2018 Date paid: 6/7/2018
date:

Payments:

Payment 6/7/2018 Amount: \$6.99 Payment CREDITCARD
date: type:
Payment FERNANDINA
library:

Note:

ISBN #

ITEM Library: YULEE

Item information

Title: MAKE IT HAPPEN ID: 30310001784336
Author: MARY ELIZABETH WINSTEAD
Call#: DVD F MAK
Copy: 1

Charge information

Date charged: 5/7/2013,11:52 Date due: 5/14/2013,23:59
Checkout library: YULEE
Circulation rule: 7DAYVIDEO

Bill information

Billed: \$25.00 Tax: Reason: LOST
payments: 1 Date: 6/9/2018 Last notice:
Still owes: \$0.00 Number of 0 Library: YULEE
notices:
Transaction 6/9/2018 Date paid: 6/9/2018
date:

Payments:

Payment 6/9/2018 Amount: \$25.00 Payment CREDITCARD
date: type:
Payment FERNANDINA
library:

Note:

Display User : Glossary

06/13/2018

ISBN # 9781594204876 (HC)

Item Library: FB

Item information

Title: Grant
Author: Chernow, Ron,
Call#: B GRANT

Bill information

Billed: \$23.00 Tax: Reason: DMG-
WITHDR
payments: 1 Date: 6/6/2018 Last
notice:
Still owes: \$0.00 Number of 0 Library: FERNANDINA
notices:
Transaction 6/6/2018 Date paid: 6/6/2018
date:

Payments:

Payment 6/6/2018 Amount: \$23.00 Payment CREDITCARD
date: type:
Payment FERNANDINA
library:

Note:

Cindy Wood

From: Claire Shepherd
Sent: Thursday, June 21, 2018 10:08 AM
To: Cindy Wood
Subject: Donation Correction
Attachments: 06.13.18 Donation Correction.pdf

Cindy,

Please place the \$50 donation into 01714571-566100

Thank you,

Claire-

*Claire Shepherd
Administrative Assistant I
Nassau County Public Library System
904-530-6503 ext. 6503
cshepherd@nassaucountyfl.com*

Under Florida law, e-mail addresses are public records. If you do not want your e-mail address released in response to a public records request, please do not send electronic mail to this entity. Instead, please contact this office by phone or in writing.

FILEHOMEINSERTDESIGNPAGE LAYOUTREFERENCESMAILINGSREVIEWVIEW

Account Inquiry - Muni (BOARD OF COMMISSIONERS)

MyFileEditToolsHelp

Account

Detail

Months

Seq Find

Totals

User Defined Fields

Fund001GENERAL

Org01711571LIBRARIES

Object352020DAMAGBOOKS

Project...

Acct001 711.352020

AcctnameDAMAGED BOOKS/MATERIALS

TypeRevenue

StatusActive

Rollup

Multiple Fund

Account History

4 Year Comparison

History

	Fiscal Year 2018	Fiscal Year 2017	Fiscal Year 2016	Fiscal Year 2015
Original Budget	-1,000.00	.00	.00	.00
Transfers In	-17.00	-1,147.00	-932.00	.00
Transfers Out	.00	.00	.00	.00
Revised Budget	-1,017.00	-1,147.00	-932.00	.00
Actual (Memo)	-1,089.76	-1,147.09	-930.93	.00
Encumbrances	.00	.00	.00	.00
Reservations	.00	.00	.00	.00
Available	72.78	.09	1.07	.00
Percent Used	107.16	100.01	99.99	.00

Attachments (0)

Display detail information for current account.

100%

Budgeted amount has been exceeded; therefore, an amendment is needed.

06/21/2018 10:01
6235cwoo

BOARD OF COMMISSIONERS
G/L ACCOUNT DETAIL

P 1
glactinq

Org: 01711571 Object: 352020
DAMAGED BOOKS/MATERIALS

001 .711.352020.

YEAR	PER	JOURNAL	EFF	DATE	SRC	T	PO/REF2	REFERENCE	AMOUNT	P	CHECK NO	WARRANT	VDR NAME/ITEM	DESC	COMMENTS
2018	09	309		06/13/2018	CRP	1	1598542	ADMIN	-65.25	Y		0	NASSAU COUNTY	LIB	6/5-12/18
2018	09	256		06/06/2018	CRP	1	1598073	ADMIN	-46.44	Y		0	NASSAU COUNTY	LIB	6/1-5/18
2018	09	244		06/01/2018	CRP	1	1598016	ADMIN	-55.39	Y		0	NASSAU COUNTY	LIB	5/22-31/1
2018	08	776		05/25/2018	CRP	1	1596040	ADMIN	-148.43	Y		0	NASSAU COUNTY	LIB	5/16-24/1
2018	08	431		05/02/2018	CRP	1	1591860	ADMIN	-40.00	Y		0	NASSAU COUNTY	LIB	4/25-5/1/
2018	07	727		04/25/2018	CRP	1	1589107	ADMIN	-97.91	Y		0	NASSAU COUNTY	LIB	4/19-24/1
2018	07	556		04/11/2018	CRP	1	1586175	ADMIN	-5.00	Y		0	NASSAU COUNTY	LIB	4/3-10/18
2018	07	519		04/04/2018	CRP	1	1586044	ADMIN	-20.60	Y		0	NASSAU COUNTY	LIB	3/28-4/3/
2018	06	760		03/22/2018	CRP	1	1582267	ADMIN	-22.99	Y		0	NASSAU COUNTY	LIB	3/20-27/1
2018	06	477		03/16/2018	CRP	1	1579139	ADMIN	-44.32	Y		0	NASSAU COUNTY	LIB	3/7-15/18
2018	06	467		03/07/2018	CRP	1	1579090	ADMIN	-20.90	Y		0	NASSAU COUNTY	LIB	3/1-6/18
2018	06	456		03/01/2018	CRP	1	1579042	ADMIN	-82.30	Y		0	NASSAU COUNTY	LIB	2/15-28/1
2018	05	569		02/28/2018	GEN	1		DMGD BOOKS	-61.89	Y		0			LIBRARY D
2018	05	492		02/15/2018	CRP	1	1572243	ADMIN	-60.92	Y		0	NASSAU COUNTY	LIB	2/6-12/18
2018	05	437		02/07/2018	CRP	1	1571495	ADMIN	-7.99	Y		0	NASSAU COUNTY	LIB	1/31/18-2
2018	04	847		01/31/2018	CRP	1	1568543	ADMIN	-41.92	Y		0	NASSAU COUNTY	LIB	1/24-31/1
2018	04	835		01/24/2018	CRP	1	1568474	ADMIN	-19.58	Y		0	NASSAU COUNTY	LIB	1/10-23/1
2018	04	549		01/10/2018	CRP	1	1564852	ADMIN	-48.74	Y		0	NASSAU COUNTY	LIB	1/1-9/18
2018	04	487		01/04/2018	CRP	1	1564275	ADMIN	-24.87	Y		0	NASSAU COUNTY	LIB	12/20-30/
2018	03	579		12/20/2017	CRP	1	1560887	ADMIN	-63.00	Y		0	NASSAU COUNTY	LIB	12/6-12/1
2018	03	551		12/06/2017	CRP	1	1560713	ADMIN	-15.28	Y		0	NASSAU COUNTY	LIB	11/29-12/
2018	02	588		11/29/2017	CRP	1	1556169	ADMIN	-14.85	Y		0	NASSAU COUNTY	LIB	11/14-29/
2018	02	587		11/16/2017	CRP	1	1556157	ADMIN	-10.79	Y		0	NASSAU COUNTY	LIB	11/7-13/1
2018	02	583		11/08/2017	CRP	1	1556124	ADMIN	-53.35	Y		0	NASSAU COUNTY	LIB	10/25-11/
2018	01	416		10/11/2017	CRP	1	1546312	ADMIN	-17.07	Y		0	NASSAU COUNTY	LIB	10/4-10/1

Total Amount: -1,089.78

** END OF REPORT - Generated by Cindy C Wood **

Tab 2
Page A



John A. Crawford
Clerk of the Circuit Court
Nassau County



MEMORANDUM

To: Cindy Wood, OMB

From: Kari Ulmer, Clerk Financial Services

Date: 6/11/18

Re: Deletion of Inventory

Please present the below Deletion from Inventory request(s) to the Board for approval:

DI #	Asset #	Tag #	Department
18.105	20100004	6415	Fire Rescue
18.106	20100006	6416	Fire Rescue
18.107	20100007	6417	Fire Rescue
18.108	20100008	6418	Fire Rescue
18.109	20100009	6419	Fire Rescue
18.110	20100010	6420	Fire Rescue
18.111	20100012	6422	Fire Rescue
18.112	NA	RD-425	Road & Bridge

The original forms are attached.
Thanks

2018 JUN 11 PM 4:58
11 JUN 18 PM 4:58

DELETION FROM INVENTORY FORM

DI # 2018-105

DEPARTMENT: FIRE RESCUE

2018 JUN -7 PM 4:31

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6415 Mileage / Hours if applicable: N/A

Year/Description: 2009, STRYKER POWER PRO LOT

Serial/Vin Number: 091141200 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): END OF

MANUFACTURER SERVICE LIFE. (7 YEARS) TRADE-IN REF.
REQUISITION ES-034

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 6-6-18

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20100004 Acquisition Cost: \$8,763.20

Acquisition Date: 11/18/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 6/11/18

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20100004		MASTER ASSET		DESCRIPTION		POWER PRO AMBULANCE COT	
		ADD'L DESC		POWER PRO AMBULANCE COT 1 OF 8 COTS			
CLASS	40	MACHINERY & EQU	FUND SOURCE				
SUBCL	812	STRETCHER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y
COMMODITY						INSURED	N
DEPT	0223	FIRE DEPT	ACQUIS DATE	11/18/2009	TYPE	G	INSURED VAL
LOC CODE	516	RESCUE #50	ACQUIS COST	8,763.20	EXPIRE DATE		EXPIRE DATE
LOC MEMO			ACRES	0.000	ANNUAL COST	0.00	POLICY CST
ROOM			QTY	1	MEMO		MEMO
STORAGE LOC			UNIT PRICE	0.00			
			PURCH MEMO	01261526-564001 STRYKE			
STATUS	A	ACTIVE					
CONDITION	E	EXCELLENT	SOY BOOK	0.06	DEPRECIATE	Y	
CUSTODIAN	DEPT HEAD		CURRENT BOOK	0.06	DEPREC PRIN	8,763.20	
TITLEHOLDER			EST SALVAGE	0.00	FIRST YR/PR	2010/02	LAST YR/PR
			REPL COST	8,763.20	EST LIFE	5	2015/01
TAG #	06415		LAST INVENT		PERIODS TAKEN	60	
SERIAL #	091141200		IMPROVE MEMO		ACCUM DEPREC	8,763.20	
MANUFACTURER	STRYK	STRYKER					
MODEL	POWER PRO		RETIRE DATE				
MODEL YEAR	2009		DISP CODE				
LICENSE #			DISP PRICE	0.00			
			SALE PRICE	0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
--------	------	------------	-----------	----------	---------

G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
-----	-----	------	--------

P.O. Box 4000
FERNANDINA BEACH, FLORIDA 32035-4000

VENDOR NAME / ADDRESS

STRYKER MEDICAL
P.O. BOX 93308
CHICAGO, IL 60673

REQUISITION
ES-034

DEPARTMENT
FIRE RESCUE
R. GUNDER
REQUISITION BY:

[illegible]

APPROVED BY:

WHITE - Finance Copy
YELLOW - Requisitioner's Copy

☐ Subtotal
☐ Total



Sales Account Manager

RYAN JACOBSMA

ryan.jacobsma@stryker.com

1-800-327-0770

Fax: 000-000-0000

End User Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Comprehensive Quotation

Remit to:

Stryker Medical

P.O. Box 93308

Chicago, IL 60673-3308

Billing Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
	6304385	4/25/2018	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
		Options				
	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
	2	Standard Comp 6390 Power Load	6390026000			
	2	English Manual	6390800000			
	2	1 year parts, labor & travel	7777681660			
	2	UNIVERSAL FLOORPLATE OPTION	6390028000			
	2	ONE PER ORDER, MANUAL, ENG OPT	639E+11			
2	2	Protect Power-LOAD- 7year	77506001	\$6,109.60	\$12,219.20	
3	7	2009 Power Pro Trade-In Credit		(\$1,000.00)	(\$7,000.00)	

Note:

A total of 7 PowerPro Cols from 2009 must be returned to receive a \$3,500 credit towards each Power Load.

Product Total	\$48,862.54
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$48,862.54

Signature: _____ Title/Position: _____ Date: _____

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

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

Vendor Name: Stryker Medical
Address: P. O. Box 93308
Chicago, IL 60673
Phone: 1-800-787-9537
Contact Name: Ryan Jacobsma
Account: 01261526-564001FRP

Department: Fire Rescue
Department Head Signature: 
Date: 5/16/2018
Cost: \$48,862.54

Description of Commodity:

Power Load units for FRP rescues

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)

Power Loads required for 2 new Fleet Replacement Plan rescue units. Power Loads are required to ensure that our stretchers and vehicles meet the Triple K crash test rating. Stryker Power Loads are the standard in our department and, these two units will ensure the standardization and continuity of our equipment.

Approval:

County Manager

Date

Date: January, 2018

Re: Stryker Combined Sole Source

To Whom It May Concern:

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-LOAD (Model 6390). Below are the unique characteristics of the Power-LOAD Cot Fastener. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use. The Stryker EMS Power-LOAD (Model 6390) cot fastening system is mounted within the patient compartment and is intended to aid in the loading/unloading of patients.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-LOAD conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use

- Device must provide a linear guide when loading and unloading the cot
- Device must allow for remote actuation from Power-PRO foot end controls
- Device must engage to the cot during loading and unloading, providing a means of lifting and lowering
- Device must allow for manual back-up operation in the event of power failure or system error
- Device must have a safe working load of 870 lbs and be capable of lifting patients weighing up to 700lbs.
- Device must be mounted inside the patient compartment to prevent environmental exposure and corrosion
- Device must be power washable
- Device must be capable of inductively charging the Stryker SMRT cot battery

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). Below are the unique characteristics of the Power-PRO XT Ambulance Cot.

These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance. ¹

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- The battery is placed at the foot end of the stretcher
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator-adjustable to match the deck height of individual ambulances.
- The foot end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The cot has 6" x 2" sealed bearing casters – the largest in the industry
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.
- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating lubrication.
- The cot is power-washable.
- The cot has an optional knee-gatch which provides patient comfort
- The cot has a retractable head section which provides 360 degree mobility in any height position.

Stryker Medical also certifies that we are the sole manufacturer of Stryker OEM Service Parts.

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Stair-PRO (6252) product. This correspondence is to inform you of the unique characteristics of the Stair-PRO (6252) system.

Standard Features:

- High visibility powder-coated yellow frame
- Color-coded controls
- Extendable foot end lift handles
- Locking rear lift handles
- Molded hand grips
- Lightweight, rugged aluminum construction
- Oversized rear wheels with sealed bearings
- Dual wheel locks
- Compact storage size
- Positive action locking mechanism
- Power washable
- Grease-free maintenance

Ease of Use:

- Innovative Stair-TREAD system
- Extendable upper control handle
- 4-inch (10cm) front caster wheels

Patented Exclusivity:

- Patent Number: 6648343
- Patent Abstract: The present invention is directed to a stair chair. The stair chair includes a seat assembly mounted to a main frame and configured to pivot about a first pivot axis. A rail assembly having two laterally spaced brackets provided at a lower end of the rail assembly is included. A back wheel is rotatably supported on each bracket for rotation about a common axis of rotation. At least two mounts are provided at a lower end of the main frame, each of which is configured to pivotally connect one of the brackets to the main frame for movement about a second pivot axis. The rail assembly and seat assembly are configured to pivot about their respective pivot axes independent of movement of one another.

Please contact your Stryker Sales Representative for further information.

¹ Only conforms when used with the Power-LOAD[®] cot fastener (model 6390).

DELETION FROM INVENTORY FORM

RECEIVED

DI # 2018-106

DEPARTMENT: FIRE RESCUE

2018 JUN -7 PM 4:31

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6416 Mileage / Hours if applicable: N/A

Year/Description: STRYKER POWER PRO COT, 2009

Serial/Vin Number: 091141201 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): END OF MANUFACTURER SERVICE LIFE (7 YEARS). TRADE-IN REF. REQUISITION ES-034

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please

indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 6-6-18

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20100006 Acquisition Cost: \$8,763.20

Acquisition Date: 11/18/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 6/11/18

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20100006	MASTER ASSET	DESCRIPTION	POWER PRO AMBULANCE COT
CLASS 40 MACHINERY & EQU	FUND SOURCE 01		
SUBCL 812 STRETCHER	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0223 FIRE DEPT	ACQUIS DATE 11/18/2009	TYPE G	INSURED VAL 0.00
LOC CODE 523 RESCUE 90	ACQUIS COST 8,763.20	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM	QTY 1	MEMO	MEMO
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO 01261526-564001 STRYKE		
STATUS A ACTIVE			
CONDITION E EXCELLENT	SOY BOOK 0.06	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.06	DEPREC PRIN 8,763.20	
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2010/02	LAST YR/PR 2015/01
	REPL COST 8,763.20	EST LIFE 5	
TAG # 06416	LAST INVENT	PERIODS TAKEN 60	
SERIAL # 091141201	IMPROVE MEMO	ACCUM DEPREC 8,763.20	
MANUFACTURER STRYK STRYKER			
MODEL POWER PRO	RETIRE DATE		
MODEL YEAR 2009	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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P.O. Box 4000
FERNANDINA BEACH, FLORIDA 32035-4000

VENDOR NAME / ADDRESS

STRYKER MEDICAL
P.O. BOX 93308
CHICAGO, IL 60673

REQUISITION
ES-034

DEPARTMENT
FIRE RESCUE

R. GANDER
REQUISITION BY:

[illegible]

APPROVED BY:

WHITE - Finance Copy
YELLOW - Requisitioner's Copy

- ☐ Subtotal
- ☐ Total



Sales Account Manager

RYAN JACOBSMA

ryan.jacobsma@stryker.com

1-800-827-0770

Fax: 000-000-0000

End User Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96180 NASSAU PLACE

YULEE, FL 32097

Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96180 NASSAU PLACE

YULEE, FL 32097

Comprehensive Quotation

Remit to:

Stryker Medical

P.O. Box 93308

Chicago, IL 60673-3308

Billing Address

1064485

NASSAU COUNTY FIRE RESCUE

96180 NASSAU PLACE

YULEE, FL 32097

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
	6304385	4/25/2018	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1	2	PowerLOAD	6390000000	\$21,821.57	\$43,643.34	
		Options				
	2	PowerLOAD	6390000000	\$21,821.57	\$43,643.34	
	2	Standard Comp 6390 Power Load	6390026000			
	2	English Manual	6390600000			
	2	1 year parts, labor & travel	7777881880			
	2	UNIVERSAL FLOORPLATE OPTION	6390028000			
	2	ONE PER ORDER, MANUAL, ENG OPT	6.39E+11			
2	2	Protect Power-LOAD- 7year	77506001	\$6,109.60	\$12,219.20	
3	7	2009 Power Pro Trade-In Credit		(\$1,000.00)	(\$7,000.00)	

Note:

A total of 7 PowerPro Cots from 2009 must be returned to receive a \$3,500 credit towards each Power Load.

Product Total	\$48,862.54
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$48,862.54

Signature: _____ Title/Position: _____ Date: _____


Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

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

Vendor Name: <u>Stryker Medical</u>	Department: <u>Fire Rescue</u>
Address: <u>P. O. Box 93308</u>	Department Head Signature: <u></u>
<u>Chicago, IL 60673</u>	Date: <u>5/16/2018</u>
Phone: <u>1-800-787-9537</u>	
Contact Name: <u>Ryan Jacobsma</u>	
Account: <u>01261526-564001FRP</u>	Cost: <u>\$48,862.54</u>

Description of Commodity:

Power Load units for FRP rescues

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)

Power Loads required for 2 new Fleet Replacement Plan rescue units. Power Loads are required to ensure that our stretchers and vehicles meet the Triple K crash test rating. Stryker Power Loads are the standard in our department and, these two units will ensure the standardization and continuity of our equipment.

Approval:

County Manager

Date

Date: January, 2018

Re: Stryker Combined Sole Source

To Whom It May Concern:

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-LOAD (Model 6390). Below are the unique characteristics of the Power-LOAD Cot Fastener. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use. The Stryker EMS Power-LOAD (Model 6390) cot fastening system is mounted within the patient compartment and is intended to aid in the loading/unloading of patients.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-LOAD conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use

- Device must provide a linear guide when loading and unloading the cot
- Device must allow for remote actuation from Power-PRO foot end controls
- Device must engage to the cot during loading and unloading, providing a means of lifting and lowering
- Device must allow for manual back-up operation in the event of power failure or system error
- Device must have a safe working load of 870 lbs and be capable of lifting patients weighing up to 700lbs.
- Device must be mounted inside the patient compartment to prevent environmental exposure and corrosion
- Device must be power washable
- Device must be capable of inductively charging the Stryker SMRT cot battery

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). Below are the unique characteristics of the Power-PRO XT Ambulance Cot.

These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance. ¹

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- The battery is placed at the foot end of the stretcher
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator-adjustable to match the deck height of individual ambulances.
- The foot end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The cot has 6" x 2" sealed bearing casters – the largest in the industry
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.
- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating lubrication.
- The cot is power-washable.
- The cot has an optional knee-gatch which provides patient comfort
- The cot has a retractable head section which provides 360 degree mobility in any height position.

Stryker Medical also certifies that we are the sole manufacturer of Stryker OEM Service Parts.

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Stair-PRO (6252) product. This correspondence is to inform you of the unique characteristics of the Stair-PRO (6252) system.

Standard Features:

- High visibility powder-coated yellow frame
- Color-coded controls
- Extendable foot end lift handles
- Locking rear lift handles
- Molded hand grips
- Lightweight, rugged aluminum construction
- Oversized rear wheels with sealed bearings
- Dual wheel locks
- Compact storage size
- Positive action locking mechanism
- Power washable
- Grease-free maintenance

Ease of Use:

- Innovative Stair-TREAD system
- Extendable upper control handle
- 4-inch (10cm) front caster wheels

Patented Exclusivity:

- Patent Number: 6648343
- Patent Abstract: The present invention is directed to a stair chair. The stair chair includes a seat assembly mounted to a main frame and configured to pivot about a first pivot axis. A rail assembly having two laterally spaced brackets provided at a lower end of the rail assembly is included. A back wheel is rotatably supported on each bracket for rotation about a common axis of rotation. At least two mounts are provided at a lower end of the main frame, each of which is configured to pivotally connect one of the brackets to the main frame for movement about a second pivot axis. The rail assembly and seat assembly are configured to pivot about their respective pivot axes independent of movement of one another.

Please contact your Stryker Sales Representative for further information.

¹ Only conforms when used with the Power-LOAD[®] cot fastener (model 6390).

DELETION FROM INVENTORY FORM

DI # 2018-107

DEPARTMENT: FIRE RESCUE**TO BE COMPLETED BY DEPARTMENT:**

2018 JUN -7 PM 4:31

Property Number: 6417 Mileage / Hours if applicable: N/AYear/Description: 2009, STRYKER POWER PRO COTSerial/Vin Number: 0911 41202 Indicate if a photo is included _____Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): END OFMANUFACTURER SERVICE LIFE (7 YEARS). TRADE-IN REF.
REQUISITION ES-034.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please

indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 6-6-18**TO BE COMPLETED BY FINANCIAL SERVICES:**Asset Number: 20100007 Acquisition Cost: \$8,763.20Acquisition Date: 11/18/2009 Book Value: -0-Financial Services Signature: [Signature] Date: 6/11/18**BOARD APPROVAL:**

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20100007		MASTER ASSET		DESCRIPTION		POWER PRO AMBULANCE COT	
		ADD'L DESC	POWER PRO AMBULANCE COT				
CLASS	40	MACHINERY & EQU	FUND SOURCE	01			
SUBCL	812	STRETCHER	ACQUIS METH	A1	PURCHASE	MAINT CONT	Y
COMMODITY						INSURED	N
DEPT	0223	FIRE DEPT	ACQUIS DATE	11/18/2009	VENDOR DESC	Vendor Name Mi	CARRIER
LOC CODE	515	RESCUE #40	ACQUIS COST	8,763.20	TYPE	G	INSURED VAL
LOC MEMO			ACRES	0.000	EXPIRE DATE		EXPIRE DATE
ROOM			QTY	1	ANNUAL COST	0.00	POLICY CST
STORAGE LOC			UNIT PRICE	0.00	MEMO		MEMO
			PURCH MEMO	01261526-564001 STRYKE			
STATUS	A	ACTIVE					
CONDITION	E	EXCELLENT	SOY BOOK	0.06	DEPRECIATE	Y	
CUSTODIAN	DEPT HEAD		CURRENT BOOK	0.06	DEPREC PRIN	8,763.20	
TITLEHOLDER			EST SALVAGE	0.00	FIRST YR/PR	2010/02	LAST YR/PR
			REPL COST	8,763.20	EST LIFE	5	2015/01
			LAST INVENT		PERIODS TAKEN	60	
TAG #	06417		IMPROVE MEMO		ACCUM DEPREC	8,763.20	
SERIAL #	091141202						
MANUFACTURER	STRYK	STRYKER					
MODEL	POWER PRO		RETIRE DATE				
MODEL YEAR	2009		DISP CODE				
LICENSE #			DISP PRICE	0.00			
			SALE PRICE	0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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P.O. Box 4000
FERNANDINA BEACH, FLORIDA 32035-4000

VENDOR NAME / ADDRESS

STRYKER MEDICAL
P.O. BOX 93308
CHICAGO, IL 60673

REQUISITION
ES-034

R. GUNDETZ
REQUISITION BY:

1. 1
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 97. 97
 98. 98
 99. 99
 100. 100

APPROVED BY:

WHITE - Finance Copy
YELLOW - Requisitioner's Copy

☐ Subtotal
☐ Total



Sales Account Manager

RYAN JACOBSMA

ryan.jacobsma@stryker.com

1-800-327-0770

Fax: 000-000-0000

End User Shipping Address

1084485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Shipping Address

1084485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Comprehensive Quotation

Remit to:

Stryker Medical

P.O. Box 93308

Chicago, IL 60673-3308

Billing Address

1084485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
	6304385	4/25/2018	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
		Options				
	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
	2	Standard Comp 6390 Power Load	6390028000			
	2	English Manual	6390800000			
	2	1 year parts, labor & travel	7777861650			
	2	UNIVERSAL FLOORPLATE OPTION	6390028000			
	2	ONE PER ORDER, MANUAL, ENG OPT	6.39E+11			
2	2	Protect Power-LOAD- 7year	77508001	\$5,109.60	\$12,219.20	
3	7	2009 Power Pro Trade-In Credit		(\$1,000.00)	(\$7,000.00)	

Note:

A total of 7 PowerPro Cots from 2009 must be returned to receive a \$3,500 credit towards each Power Load.

Product Total	\$48,862.54
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$48,862.54

Signature: _____ Title/Position: _____ Date: _____

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days, FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

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

Vendor Name: Stryker Medical
Address: P. O. Box 93308
Chicago, IL 60673
Phone: 1-800-787-9537
Contact Name: Ryan Jacobsma
Account: 01261526-564001FRP

Department: Fire Rescue
Department Head Signature: 
Date: 5/16/2018
Cost: \$48,862.54

Description of Commodity:

Power Load units for FRP rescues

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)

Power Loads required for 2 new Fleet Replacement Plan rescue units. Power Loads are required to ensure that our stretchers and vehicles meet the Triple K crash test rating. Stryker Power Loads are the standard in our department and, these two units will ensure the standardization and continuity of our equipment.

Approval:

County Manager

Date

Date: January, 2018

Re: Stryker Combined Sole Source

To Whom It May Concern:

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-LOAD (Model 6390). Below are the unique characteristics of the Power-LOAD Cot Fastener. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use. The Stryker EMS Power-LOAD (Model 6390) cot fastening system is mounted within the patient compartment and is intended to aid in the loading/unloading of patients.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-LOAD conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use

- Device must provide a linear guide when loading and unloading the cot
- Device must allow for remote actuation from Power-PRO foot end controls
- Device must engage to the cot during loading and unloading, providing a means of lifting and lowering
- Device must allow for manual back-up operation in the event of power failure or system error
- Device must have a safe working load of 870 lbs and be capable of lifting patients weighing up to 700lbs.
- Device must be mounted inside the patient compartment to prevent environmental exposure and corrosion
- Device must be power washable
- Device must be capable of inductively charging the Stryker SMRT cot battery

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). Below are the unique characteristics of the Power-PRO XT Ambulance Cot.

These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance. ¹

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- The battery is placed at the foot end of the stretcher
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator-adjustable to match the deck height of individual ambulances.
- The foot end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The cot has 6" x 2" sealed bearing casters – the largest in the industry
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.
- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating lubrication.
- The cot is power-washable.
- The cot has an optional knee-gatch which provides patient comfort
- The cot has a retractable head section which provides 360 degree mobility in any height position.

Stryker Medical also certifies that we are the sole manufacturer of Stryker OEM Service Parts.

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Stair-PRO (6252) product. This correspondence is to inform you of the unique characteristics of the Stair-PRO (6252) system.

Standard Features:

- High visibility powder-coated yellow frame
- Color-coded controls
- Extendable foot end lift handles
- Locking rear lift handles
- Molded hand grips
- Lightweight, rugged aluminum construction
- Oversized rear wheels with sealed bearings
- Dual wheel locks
- Compact storage size
- Positive action locking mechanism
- Power washable
- Grease-free maintenance

Ease of Use:

- Innovative Stair-TREAD system
- Extendable upper control handle
- 4-inch (10cm) front caster wheels

Patented Exclusivity:

- Patent Number: 6648343
- Patent Abstract: The present invention is directed to a stair chair. The stair chair includes a seat assembly mounted to a main frame and configured to pivot about a first pivot axis. A rail assembly having two laterally spaced brackets provided at a lower end of the rail assembly is included. A back wheel is rotatably supported on each bracket for rotation about a common axis of rotation. At least two mounts are provided at a lower end of the main frame, each of which is configured to pivotally connect one of the brackets to the main frame for movement about a second pivot axis. The rail assembly and seat assembly are configured to pivot about their respective pivot axes independent of movement of one another.

Please contact your Stryker Sales Representative for further information.

¹ Only conforms when used with the Power-LOAD[®] cot fastener (model 6390).

DELETION FROM INVENTORY FORMDI # 2018-108DEPARTMENT: FIRE RESCUE**TO BE COMPLETED BY DEPARTMENT:**

2018 JUN -7 PM 4:31

Property Number: 6418 Mileage / Hours if applicable: N/AYear/Description: 2009, STRYKER POWER PRO COTSerial/Vin Number: 091141203 Indicate if a photo is included _____Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): END OFMANUFACTURER SERVICE LIFE (7 YEARS). TRADE-IN REF.
REQUISITION ES-034

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please

indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 6-6-18**TO BE COMPLETED BY FINANCIAL SERVICES:**Asset Number: 20100008 Acquisition Cost: \$8,763.20Acquisition Date: 11/18/2009 Book Value: -0-Financial Services Signature: [Signature] Date: 6/11/18**BOARD APPROVAL:**

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20100008	MASTER ASSET	DESCRIPTION	POWER PRO	AMBULANCE COT
CLASS 40 MACHINERY & EQU	FUND SOURCE 01			
SUBCL 812 STRETCHER	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N	
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER	
DEPT 0223 FIRE DEPT	ACQUIS DATE 11/18/2009	TYPE G	INSURED VAL	0.00
LOC CODE 559 FIRE/RESCUE HQ	ACQUIS COST 8,763.20	EXPIRE DATE	EXPIRE DATE	
LOC MEMO	ACRES 0.000	ANNUAL COST	0.00 POLICY CST	0.00
ROOM	QTY 1	MEMO	MEMO	
STORAGE LOC	UNIT PRICE 0.00			
	PURCH MEMO 01261526-564001 STRYKE			
STATUS A ACTIVE				
CONDITION E EXCELLENT	SOY BOOK 0.06	DEPRECIATE Y		
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.06	DEPREC PRIN 8,763.20		
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2010/02	LAST YR/PR	2015/01
	REPL COST 8,763.20	EST LIFE 5		
TAG # 06418	LAST INVENT	PERIODS TAKEN 60		
SERIAL # 091141203	IMPROVE MEMO	ACCUM DEPREC 8,763.20		
MANUFACTURER STRYK STRYKER				
MODEL POWER PRO	RETIRE DATE			
MODEL YEAR 2009	DISP CODE			
LICENSE #	DISP PRICE 0.00			
	SALE PRICE 0.00			

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
-----	-----	------	--------

P.O. Box 4000
FERNANDINA BEACH, FLORIDA 32035-4000

VENDOR NAME / ADDRESS

STRYKER MEDICAL
P.O. BOX 93308
CHICAGO, IL 60673

REQUISITION
ES-034

R. GANDER

REQUISITION BY:

VENDOR NUMBER		PURCHASE ORDER NUMBER		PURCHASE ORDER DATE		PURCHASE ORDER TOTAL		DISCOUNT TERMS	
				5/16/18		\$ 48,862.54			
ITEM NO.	DESCRIPTION			QUANTITY	UNIT PRICE	AMOUNT		FUND ACCOUNT NUMBER	
1	POWER LOAD UNITS FOR FRP RESCUES #6390000000 * POWER LOADS NEEDED TO PAIR W/ STRETCHERS AND TO ENSURE SAFETY RATING			2	21,821.67	\$ 43,643.34		612615210-56400) FRP	
2	7 YR PROTECTION PLAN #77506001			2	6109.60	\$ 12,219.20			
3	TRADE-IN OF OUT OF SERVICE STRETCHERS			7	1000	\$ 7,000			

APPROVED BY:

WHITE - Finance Copy
YELLOW - Requisitioner's Copy

☐ Subtotal
☐ Total



Sales Account Manager

RYAN JACOBSMA

ryan.jacobsma@stryker.com

1-800-327-0770

Fax: 000-000-0000

End User Shipping Address

1084485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Shipping Address

1084485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Comprehensive Quotation

Remit to:

Stryker Medical

P.O. Box 93308

Chicago, IL 60673-3308

Billing Address

1084485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
	6304365	4/25/2018	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
		Options				
	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
	2	Standard Comp 6390 Power Load	6390028000			
	2	English Manual	6390800000			
	2	1 year parts, labor & travel	7777861650			
	2	UNIVERSAL FLOORPLATE OPTION	6390028000			
	2	ONE PER ORDER, MANUAL, ENG OPT	6.39E+11			
2	2	Protect Power-LOAD- 7year	77506001	\$6,109.60	\$12,219.20	
3	7	2009 Power Pro Trade-In Credit		(\$1,000.00)	(\$7,000.00)	

Note:

A total of 7 PowerPro Cots from 2009 must be returned to receive a \$3,500 credit towards each Power Load.

Product Total	\$48,662.54
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$48,662.54

Signature: _____ Title/Position: _____ Date: _____


Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days, FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

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

Vendor Name: <u>Stryker Medical</u>	Department: <u>Fire Rescue</u>
Address: <u>P. O. Box 93308</u>	Department Head Signature: <u></u>
<u>Chicago, IL 60673</u>	Date: <u>5/16/2018</u>
Phone: <u>1-800-787-9537</u>	
Contact Name: <u>Ryan Jacobsma</u>	
Account: <u>01261526-564001FRP</u>	Cost: <u>\$48,862.54</u>

Description of Commodity:

Power Load units for FRP rescues

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)

Power Loads required for 2 new Fleet Replacement Plan rescue units. Power Loads are required to ensure that our stretchers and vehicles meet the Triple K crash test rating. Stryker Power Loads are the standard in our department and, these two units will ensure the standardization and continuity of our equipment.

Approval:

County Manager

Date

Date: January, 2018

Re: Stryker Combined Sole Source

To Whom It May Concern:

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-LOAD (Model 6390). Below are the unique characteristics of the Power-LOAD Cot Fastener. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use. The Stryker EMS Power-LOAD (Model 6390) cot fastening system is mounted within the patient compartment and is intended to aid in the loading/unloading of patients.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-LOAD conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use

- Device must provide a linear guide when loading and unloading the cot
- Device must allow for remote actuation from Power-PRO foot end controls
- Device must engage to the cot during loading and unloading, providing a means of lifting and lowering
- Device must allow for manual back-up operation in the event of power failure or system error
- Device must have a safe working load of 870 lbs and be capable of lifting patients weighing up to 700lbs.
- Device must be mounted inside the patient compartment to prevent environmental exposure and corrosion
- Device must be power washable
- Device must be capable of inductively charging the Stryker SMRT cot battery

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). Below are the unique characteristics of the Power-PRO XT Ambulance Cot.

These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance. ¹

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- The battery is placed at the foot end of the stretcher
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator-adjustable to match the deck height of individual ambulances.
- The foot end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The cot has 6" x 2" sealed bearing casters – the largest in the industry
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.
- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating lubrication.
- The cot is power-washable.
- The cot has an optional knee-gatch which provides patient comfort
- The cot has a retractable head section which provides 360 degree mobility in any height position.

Stryker Medical also certifies that we are the sole manufacturer of Stryker OEM Service Parts.

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Stair-PRO (6252) product. This correspondence is to inform you of the unique characteristics of the Stair-PRO (6252) system.

Standard Features:

- High visibility powder-coated yellow frame
- Color-coded controls
- Extendable foot end lift handles
- Locking rear lift handles
- Molded hand grips
- Lightweight, rugged aluminum construction
- Oversized rear wheels with sealed bearings
- Dual wheel locks
- Compact storage size
- Positive action locking mechanism
- Power washable
- Grease-free maintenance

Ease of Use:

- Innovative Stair-TREAD system
- Extendable upper control handle
- 4-inch (10cm) front caster wheels

Patented Exclusivity:

- Patent Number: 6648343
- Patent Abstract: The present invention is directed to a stair chair. The stair chair includes a seat assembly mounted to a main frame and configured to pivot about a first pivot axis. A rail assembly having two laterally spaced brackets provided at a lower end of the rail assembly is included. A back wheel is rotatably supported on each bracket for rotation about a common axis of rotation. At least two mounts are provided at a lower end of the main frame, each of which is configured to pivotally connect one of the brackets to the main frame for movement about a second pivot axis. The rail assembly and seat assembly are configured to pivot about their respective pivot axes independent of movement of one another.

Please contact your Stryker Sales Representative for further information.

¹ Only conforms when used with the Power-LOAD[®] cot fastener (model 6390).

DELETION FROM INVENTORY FORM

RECEIVED

DI # 2018-109

DEPARTMENT: FIRE RESCUE

2018 JUN -7 PM 4:31

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6419 Mileage / Hours if applicable: N/A

Year/Description: 2009, STRYKER POWER PRO COT

Serial/Vin Number: 091141204 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): END OF

MANUFACTURER SERVICE LIFE (7 YEARS) TRADE-IN REF.
REQUISITION ES-034.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 6-6-18

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20100009 Acquisition Cost: \$8,763.20

Acquisition Date: 11/18/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 6/11/18

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20100009	MASTER ASSET	DESCRIPTION	POWER PRO AMBULANCE COT
CLASS 40 MACHINERY & EQU	FUND SOURCE 01		
SUBCL 812 STRETCHER	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0223 FIRE DEPT	ACQUIS DATE 11/18/2009	TYPE G	INSURED VAL 0.00
LOC CODE 517 RESCUE #60 BRYC	ACQUIS COST 8,763.20	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM	QTY 1	MEMO	MEMO
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO 01261526-564001 STRYKE		
STATUS A ACTIVE			
CONDITION E EXCELLENT	SOY BOOK 0.06	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.06	DEPREC PRIN 8,763.20	
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2010/02	LAST YR/PR 2015/01
	REPL COST 8,763.20	EST LIFE 5	
TAG # 06419	LAST INVENT	PERIODS TAKEN 60	
SERIAL # 091141204	IMPROVE MEMO	ACCUM DEPREC 8,763.20	
MANUFACTURER STRYK STRYKER			
MODEL POWER PRO	RETIRE DATE		
MODEL YEAR 2009	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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PAGE: 1 OF 1

P.O. Box 4000
FERNANDINA BEACH, FLORIDA 32035-4000

STRYKER MEDICAL
P.O. BOX 93308
CHICAGO, IL 60673

REQUISITION
ES-034

DEPARTMENT
FIRE RESCUE
R. GUNDER
REQUISITION BY:

VENDOR NUMBER		PURCHASE ORDER NUMBER		PURCHASE ORDER DATE		PURCHASE ORDER TOTAL		DISCOUNT TERMS	
				5/16/18		\$ 48,862.54			
ITEM NO.	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT	FUND ACCOUNT NUMBER				
1	POWER LOAD UNITS FOR FRP RESCUES #6390000000 * POWER LOADS NEEDED TO PAIR W/ STRETCHERS AND TO ENSURE SAFETY RATING	2	21,821.67	\$ 43,643.34	61261526-564001 FRP				
2	7 YR PROTECTION PLAN #77506001	2	6109.60	\$ 12,219.20					
3	TRADE-IN OF OUT OF SERVICE STRETCHERS	7	1000	\$ 7,000					

APPROVED BY:

WHITE - Finance Copy
YELLOW - Requisitioner's Copy

- ☐ Subtotal
- ☐ Total



Sales Account Manager

RYAN JACOBSMA

ryan.jacobsma@stryker.com

1-800-327-0770

Fax: 000-000-0000

End User Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Comprehensive Quotation

Remit to:

Stryker Medical

P.O. Box 93308

Chicago, IL 60673-3308

Billing Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
	6304385	4/25/2018	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
		Options				
	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
	2	Standard Comp 6390 Power Load	6390026000			
	2	English Manual	6390800000			
	2	1 year parts, labor & travel	7777681650			
	2	UNIVERSAL FLOORPLATE OPTION	6390028000			
	2	ONE PER ORDER, MANUAL, ENG OPT	6.39E+11			
2	2	Protect Power-LOAD- 7year	77508001	\$8,109.60	\$12,219.20	
3	7	2009 Power Pro Trade-In Credit		(\$1,000.00)	(\$7,000.00)	

Note:

A total of 7 PowerPro Cots from 2009 must be returned to receive a \$3,500 credit towards each Power Load.

Product Total	\$48,862.54
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$48,862.54

Signature: _____ Title/Position: _____ Date: _____

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

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

Vendor Name: Stryker Medical
Address: P. O. Box 93308
Chicago, IL 60673
Phone: 1-800-787-9537
Contact Name: Ryan Jacobsma
Account: 01261526-564001FRP

Department: Fire Rescue
Department Head Signature: 
Date: 5/16/2018
Cost: \$48,862.54

Description of Commodity:

Power Load units for FRP rescues

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

☒ X 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:

- ☒ X Purchase can only be obtained from original manufacturer-not available through distributors.
- ☒ X Only authorized area distributor of the original manufacturer.
- ☒ X Parts/Equipment are not interchangeable with similar parts of another manufacturer.
- ☒ X This is the only known source that will meet the specialized needs of this department or perform the intended function.
- ☒ X This source must be used to meet warranty or service maintenance requirements.
- ☒ X This source is required for standardization.
- ☐ None of the above apply.

Comments/Explanations: (required)

Power Loads required for 2 new Fleet Replacement Plan rescue units. Power Loads are required to ensure that our stretchers and vehicles meet the Triple K crash test rating. Stryker Power Loads are the standard in our department and, these two units will ensure the standardization and continuity of our equipment.

Approval:

County Manager

Date

Date: January, 2018

Re: Stryker Combined Sole Source

To Whom It May Concern:

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-LOAD (Model 6390). Below are the unique characteristics of the Power-LOAD Cot Fastener. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use. The Stryker EMS Power-LOAD (Model 6390) cot fastening system is mounted within the patient compartment and is intended to aid in the loading/unloading of patients.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-LOAD conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use

- Device must provide a linear guide when loading and unloading the cot
- Device must allow for remote actuation from Power-PRO foot end controls
- Device must engage to the cot during loading and unloading, providing a means of lifting and lowering
- Device must allow for manual back-up operation in the event of power failure or system error
- Device must have a safe working load of 870 lbs and be capable of lifting patients weighing up to 700lbs.
- Device must be mounted inside the patient compartment to prevent environmental exposure and corrosion
- Device must be power washable
- Device must be capable of inductively charging the Stryker SMRT cot battery

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). Below are the unique characteristics of the Power-PRO XT Ambulance Cot.

These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance. ¹

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- The battery is placed at the foot end of the stretcher
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator-adjustable to match the deck height of individual ambulances.
- The foot end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The cot has 6" x 2" sealed bearing casters – the largest in the industry
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.
- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating lubrication.
- The cot is power-washable.
- The cot has an optional knee-gatch which provides patient comfort
- The cot has a retractable head section which provides 360 degree mobility in any height position.

Stryker Medical also certifies that we are the sole manufacturer of Stryker OEM Service Parts.

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Stair-PRO (6252) product. This correspondence is to inform you of the unique characteristics of the Stair-PRO (6252) system.

Standard Features:

- High visibility powder-coated yellow frame
- Color-coded controls
- Extendable foot end lift handles
- Locking rear lift handles
- Molded hand grips
- Lightweight, rugged aluminum construction
- Oversized rear wheels with sealed bearings
- Dual wheel locks
- Compact storage size
- Positive action locking mechanism
- Power washable
- Grease-free maintenance

Ease of Use:

- Innovative Stair-TREAD system
- Extendable upper control handle
- 4-inch (10cm) front caster wheels

Patented Exclusivity:

- Patent Number: 6648343
- Patent Abstract: The present invention is directed to a stair chair. The stair chair includes a seat assembly mounted to a main frame and configured to pivot about a first pivot axis. A rail assembly having two laterally spaced brackets provided at a lower end of the rail assembly is included. A back wheel is rotatably supported on each bracket for rotation about a common axis of rotation. At least two mounts are provided at a lower end of the main frame, each of which is configured to pivotally connect one of the brackets to the main frame for movement about a second pivot axis. The rail assembly and seat assembly are configured to pivot about their respective pivot axes independent of movement of one another.

Please contact your Stryker Sales Representative for further information.

¹ Only conforms when used with the Power-LOAD[®] cot fastener (model 6390).

DELETION FROM INVENTORY FORM

DI # 2018-110

DEPARTMENT: FIRE RESCUE

2018 JUN -7 PM 4:31

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6420 Mileage / Hours if applicable: N/A

Year/Description: 2009, STRYKER POWER PRO COT

Serial/Vin Number: 091141205 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): END OF

MANUFACTURER SERVICE LIFE (7 YEARS), TRADE-IN REF.
REQUISITION ES-034

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 6-6-18

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20100010 Acquisition Cost: \$8,763.20

Acquisition Date: 11/18/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 6/11/18

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20100010	MASTER ASSET	DESCRIPTION	POWER PRO	AMBULANCE	COT
CLASS 40 MACHINERY & EQU	FUND SOURCE 01				
SUBCL 812 STRETCHER	ACQUIS METH A1 PURCHASE	MAINT CONT Y		INSURED	N
COMMODITY		VENDOR DESC Vendor Name Mi		CARRIER	
DEPT 0223 FIRE DEPT	ACQUIS DATE 11/18/2009	TYPE G		INSURED VAL	0.00
LOC CODE 518 RESCUE #70 O'NE	ACQUIS COST 8,763.20	EXPIRE DATE		EXPIRE DATE	
LOC MEMO	ACRES 0.000	ANNUAL COST	0.00	POLICY CST	0.00
ROOM	QTY 1	MEMO		MEMO	
STORAGE LOC	UNIT PRICE 0.00				
	PURCH MEMO 01261526-564001 STRYKE				
STATUS A ACTIVE					
CONDITION E EXCELLENT	SOY BOOK 0.06	DEPRECIATE Y			
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.06	DEPREC PRIN	8,763.20		
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR	2010/02	LAST YR/PR	2015/01
	REPL COST 8,763.20	EST LIFE	5		
TAG # 06420	LAST INVENT	PERIODS TAKEN	60		
SERIAL # 091141205	IMPROVE MEMO	ACCUM DEPREC	8,763.20		
MANUFACTURER STRYK STRYKER					
MODEL POWER PRO	RETIRE DATE				
MODEL YEAR 2009	DISP CODE				
LICENSE #	DISP PRICE 0.00				
	SALE PRICE 0.00				

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
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P.O. Box 4000
FERNANDINA BEACH, FLORIDA 32035-4000

VENDOR NAME / ADDRESS

STRYKER MEDICAL
P.O. BOX 93308
CHICAGO, IL 60673

REQUISITION
ES-034

DEPARTMENT
FIRE RESCUE
R. GUNDER
REQUISITION BY:

VENDOR NUMBER		PURCHASE ORDER NUMBER		PURCHASE ORDER DATE		PURCHASE ORDER TOTAL		DISCOUNT TERMS	
				5/16/18		\$ 48,862.54			
ITEM NO.	DESCRIPTION	QUANTITY	UNIT PRICE	AMOUNT	FUND ACCOUNT NUMBER				
1	POWER LOAD UNITS FOR FRP RESCUES #6390000000 * POWER LOADS NEEDED TO PAIR W/ STRETCHERS AND TO ENSURE SAFETY RATING	2	21,821.67	\$ 43,643.34	61261526-564001 FRP				
2	7 YR PROTECTION PLAN #77506001	2	\$ 6109.60	\$ 12,219.20					
3	TRADE-IN OF OUT OF SERVICE STRETCHERS	7	1000	\$ 7,000					

APPROVED BY:

WHITE - Finance Copy
YELLOW - Requisitioner's Copy

- ☐ Subtotal
- ☐ Total



Sales Account Manager

RYAN JACOBSMA

ryan.jacobsma@stryker.com

1-800-327-0770

Fax: 000-000-0000

End User Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Comprehensive Quotation

Remit to:

Stryker Medical

P.O. Box 93308

Chicago, IL 60673-3308

Billing Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
	6304365	4/25/2018	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1	2	PowerLOAD	6390000000	\$21,821.57	\$43,643.34	
		Options				
	2	PowerLOAD	6390000000	\$21,821.57	\$43,643.34	
	2	Standard Comp 6390 Power Load	6390028000			
	2	English Manual	6390600000			
	2	1 year parts, labor & travel	7777881650			
	2	UNIVERSAL FLOORPLATE OPTION	6390028000			
	2	ONE PER ORDER, MANUAL, ENG OPT	6.39E+11			
2	2	Protect Power-LOAD- 7year	77508001	\$6,109.60	\$12,219.20	
3	7	2009 Power Pro Trade-In Credit		(\$1,000.00)	(\$7,000.00)	

Note:

A total of 7 PowerPro Coils from 2009 must be returned to receive a \$3,500 credit towards each Power Load.

Product Total	\$48,862.54
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$48,862.54

Signature: _____ Title/Position: _____ Date: _____

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

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

Vendor Name: Stryker Medical
Address: P. O. Box 93308
Chicago, IL 60673
Phone: 1-800-787-9537
Contact Name: Ryan Jacobsma
Account: 01261526-564001FRP

Department: Fire Rescue
Department Head Signature: 
Date: 5/16/2018
Cost: \$48,862.54

Description of Commodity:

Power Load units for FRP rescues

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)

Power Loads required for 2 new Fleet Replacement Plan rescue units. Power Loads are required to ensure that our stretchers and vehicles meet the Triple K crash test rating. Stryker Power Loads are the standard in our department and, these two units will ensure the standardization and continuity of our equipment.

Approval:

County Manager

Date

Zac Jordan - Marketing Manager
3800 E. Centre Ave.
Portage, MI 49002
t: 269 329 2100 f: 269 329 2213
www.stryker.com



Medical

Date: January, 2018

Re: Stryker Combined Sole Source

To Whom It May Concern:

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-LOAD (Model 6390). Below are the unique characteristics of the Power-LOAD Cot Fastener. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use. The Stryker EMS Power-LOAD (Model 6390) cot fastening system is mounted within the patient compartment and is intended to aid in the loading/unloading of patients.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-LOAD conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use

- Device must provide a linear guide when loading and unloading the cot
- Device must allow for remote actuation from Power-PRO foot end controls
- Device must engage to the cot during loading and unloading, providing a means of lifting and lowering
- Device must allow for manual back-up operation in the event of power failure or system error
- Device must have a safe working load of 870 lbs and be capable of lifting patients weighing up to 700lbs.
- Device must be mounted inside the patient compartment to prevent environmental exposure and corrosion
- Device must be power washable
- Device must be capable of inductively charging the Stryker SMRT cot battery

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). Below are the unique characteristics of the Power-PRO XT Ambulance Cot.

These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance. ¹

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- The battery is placed at the foot end of the stretcher
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator-adjustable to match the deck height of individual ambulances.
- The foot end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The cot has 6" x 2" sealed bearing casters – the largest in the industry
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.
- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating lubrication.
- The cot is power-washable.
- The cot has an optional knee-gatch which provides patient comfort
- The cot has a retractable head section which provides 360 degree mobility in any height position.

Stryker Medical also certifies that we are the sole manufacturer of Stryker OEM Service Parts.

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Stair-PRO (6252) product. This correspondence is to inform you of the unique characteristics of the Stair-PRO (6252) system.

Standard Features:

- High visibility powder-coated yellow frame
- Color-coded controls
- Extendable foot end lift handles
- Locking rear lift handles
- Molded hand grips
- Lightweight, rugged aluminum construction
- Oversized rear wheels with sealed bearings
- Dual wheel locks
- Compact storage size
- Positive action locking mechanism
- Power washable
- Grease-free maintenance

Ease of Use:

- Innovative Stair-TREAD system
- Extendable upper control handle
- 4-inch (10cm) front caster wheels

Patented Exclusivity:

- Patent Number: 6648343
- Patent Abstract: The present invention is directed to a stair chair. The stair chair includes a seat assembly mounted to a main frame and configured to pivot about a first pivot axis. A rail assembly having two laterally spaced brackets provided at a lower end of the rail assembly is included. A back wheel is rotatably supported on each bracket for rotation about a common axis of rotation. At least two mounts are provided at a lower end of the main frame, each of which is configured to pivotally connect one of the brackets to the main frame for movement about a second pivot axis. The rail assembly and seat assembly are configured to pivot about their respective pivot axes independent of movement of one another.

Please contact your Stryker Sales Representative for further information.

¹ Only conforms when used with the Power-LOAD[®] cot fastener (model 6390).

DELETION FROM INVENTORY FORM

RECEIVED
DI# 2018-111

DEPARTMENT: FIRE RESCUE

2018 JUN -7 PM 4:31

TO BE COMPLETED BY DEPARTMENT:

Property Number: 6422 Mileage / Hours if applicable: N/A

Year/Description: 2009, STRYKER POWER PRO COT

Serial/Vin Number: 091141207 Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): END OF

MANUFACTURER SERVICE LIFE (7 YEARS). TRADE-IN REF.
REQUISITION ES-034

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: X (Please include trade-in documents)

Destroy: _____ Indicate how and by whom: _____

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: [Signature] Date: 6-6-18

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: 20100012 Acquisition Cost: \$8,763.20

Acquisition Date: 11/18/2009 Book Value: -0-

Financial Services Signature: [Signature] Date: 6/11/18

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date: _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ASSET # 20100012	MASTER ASSET	DESCRIPTION	POWER PRO AMBULANCE COT
CLASS 40 MACHINERY & EQU	FUND SOURCE 01		
SUBCL 812 STRETCHER	ACQUIS METH A1 PURCHASE	MAINT CONT Y	INSURED N
COMMODITY		VENDOR DESC Vendor Name Mi	CARRIER
DEPT 0223 FIRE DEPT	ACQUIS DATE 11/18/2009	TYPE G	INSURED VAL 0.00
LOC CODE 514 RESCUE #30	ACQUIS COST 8,763.20	EXPIRE DATE	EXPIRE DATE
LOC MEMO	ACRES 0.000	ANNUAL COST 0.00	POLICY CST 0.00
ROOM	QTY 1	MEMO	MEMO
STORAGE LOC	UNIT PRICE 0.00		
	PURCH MEMO 01261526-564001 STRYKE		
STATUS A ACTIVE			
CONDITION E EXCELLENT	SOY BOOK 0.06	DEPRECIATE Y	
CUSTODIAN DEPT HEAD	CURRENT BOOK 0.06	DEPREC PRIN 8,763.20	
TITLEHOLDER	EST SALVAGE 0.00	FIRST YR/PR 2010/02	LAST YR/PR 2015/01
	REPL COST 8,763.20	EST LIFE 5	
TAG # 06422	LAST INVENT	PERIODS TAKEN 60	
SERIAL # 091141207	IMPROVE MEMO	ACCUM DEPREC 8,763.20	
MANUFACTURER STRYK STRYKER			
MODEL POWER PRO	RETIRE DATE		
MODEL YEAR 2009	DISP CODE		
LICENSE #	DISP PRICE 0.00		
	SALE PRICE 0.00		

VEND #	PO #	DOCUMENT #	INVOICE #	INV DATE	INV AMT
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G/L Accounts

TYPE	DESC	ORG	OBJ	PROJ	PERCENT
1	ASSET	98000	166900		100.00
2	CONTRA	98052	564000		100.00
5	DEPRECIATION EXPENSE	98052	559000		100.00
6	ACCUMULATED DEPRECIATION	98000	167900		100.00

PO Accounts

ORG	OBJ	PROJ	AMOUNT
-----	-----	------	--------

P.O. Box 4000
FERNANDINA BEACH, FLORIDA 32035-4000

VENDOR NAME / ADDRESS

STRYKER MEDICAL
P.O. BOX 93308
CHICAGO, IL 60673

REQUISITION
ES-034

DEPARTMENT
FIRE RESCUE

R. GUNDER

REQUISITION BY:

RECEIVED
JUN - 7 1964
MAIL ROOM
U.S. AIR FORCE

APPROVED BY:

WHITE - Finance Copy
YELLOW - Requisitioner's Copy

☐ Subtotal
☐ Total

**Sales Account Manager**

RYAN JACOBSMA

ryan.jacobsma@stryker.com

1-800-327-0770

Fax: 000-000-0000

End User Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Shipping Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Comprehensive Quotation**Remit to:**

Stryker Medical

P.O. Box 93308

Chicago, IL 60673-3308

Billing Address

1064485

NASSAU COUNTY FIRE RESCUE

96160 NASSAU PLACE

YULEE, FL 32097

Customer Contact	Ref Number	Date	PO Number	Reference Field	Quote Type
	6304385	4/25/2018	QUOTE		

Line #	Quantity	Item Description	Part #	Unit Price	Extended Price	Item Comments
1	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
		Oplons				
	2	PowerLOAD	6390000000	\$21,821.67	\$43,643.34	
	2	Standard Comp 6390 Power Load	6390026000			
	2	English Manual	6390600000			
	2	1 year parts, labor & travel	7777861660			
	2	UNIVERSAL FLOORPLATE OPTION	6390028000			
	2	ONE PER ORDER, MANUAL, ENG OPT	639E+11			
2	2	Protect Power-LOAD- 7year	77506001	\$6,109.60	\$12,219.20	
3	7	2009 Power Pro Trade-In Credit		(\$1,000.00)	(\$7,000.00)	

Note:

A total of 7 PowerPro Coils from 2009 must be returned to receive a \$3,500 credit towards each Power Load.

Product Total	\$48,862.54
Freight	\$0.00
Tax	\$0.00
Total Incl Tax & Freight	\$48,862.54

Signature: _____ Title/Position: _____ Date: _____


Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule.

Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days. FOB origin. A copy of Stryker Medical's standard terms and conditions can be obtained by calling Stryker Medical's Customer Service at 1-800-STRYKER.

Cancellation and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received 30 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.

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

Vendor Name: <u>Stryker Medical</u>	Department: <u>Fire Rescue</u>
Address: <u>P. O. Box 93308</u>	Department Head Signature: <u></u>
<u>Chicago, IL 60673</u>	Date: <u>5/16/2018</u>
Phone: <u>1-800-787-9537</u>	
Contact Name: <u>Ryan Jacobsma</u>	
Account: <u>01261526-564001FRP</u>	Cost: <u>\$48,862.54</u>

Description of Commodity:

Power Load units for FRP rescues

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)

Power Loads required for 2 new Fleet Replacement Plan rescue units. Power Loads are required to ensure that our stretchers and vehicles meet the Triple K crash test rating. Stryker Power Loads are the standard in our department and, these two units will ensure the standardization and continuity of our equipment.

Approval:

County Manager

Date

Date: January, 2018

Re: Stryker Combined Sole Source

To Whom It May Concern:

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-LOAD (Model 6390). Below are the unique characteristics of the Power-LOAD Cot Fastener. These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use. The Stryker EMS Power-LOAD (Model 6390) cot fastening system is mounted within the patient compartment and is intended to aid in the loading/unloading of patients.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-LOAD conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.

Ease of Use

- Device must provide a linear guide when loading and unloading the cot
- Device must allow for remote actuation from Power-PRO foot end controls
- Device must engage to the cot during loading and unloading, providing a means of lifting and lowering
- Device must allow for manual back-up operation in the event of power failure or system error
- Device must have a safe working load of 870 lbs and be capable of lifting patients weighing up to 700lbs.
- Device must be mounted inside the patient compartment to prevent environmental exposure and corrosion
- Device must be power washable
- Device must be capable of inductively charging the Stryker SMRT cot battery

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Power-PRO XT (Model 6506). Below are the unique characteristics of the Power-PRO XT Ambulance Cot.

These characteristics can be broken down into two primary categories: Independent Qualification, and Ease of Use and Maintenance.

Independent Qualification

- IPX6: The system is rated to withstand powerful water jets.
- IEC 60601-1 and IEC 60601-1-2: This certification indicates that Power-PRO conforms to industry standards for mechanical and electrical safety for medical electrical devices, as well as electromagnetic compatibility and immunity.
- BS EN-1789 clause 4.5.9: This is a European dynamic crash test which subjects a 50th percentile dummy to a nominal 10g deceleration for a minimum of 50ms. Following the test there shall be no sharp edges or danger to the safety of persons in the road ambulance.¹

Ease of Use and Maintenance

- The cot has a weight capacity of 700lbs.
- The battery is placed at the foot end of the stretcher
- The cot legs power-retract in 2.4 seconds which speeds load times.
- The cot provides the highest possible load height of any cot on the market at 36" and is operator-adjustable to match the deck height of individual ambulances.
- The foot end of the cot provides lifting bars and operator controls at two different heights, thus providing optimum ergonomics to most operator heights.
- The foot end of the cot contains a large battery indicator light which displays amber or green which indicates battery level. A warning is given by a flashing amber light, providing the operator the time to change the battery before full depletion of power.
- The cot has 6" x 2" sealed bearing casters – the largest in the industry
- The cot features a foot-end-mounted hourly usage meter. This is an easy tool to determine the timing of preventative maintenance checks.
- The cot features powder-coating of the entire aluminum frame (including the patient handling surfaces), thus eliminating aluminum oxidation throughout the cot.
- All caster bearings are sealed, eliminating lubrication.
- The cot is power-washable.
- The cot has an optional knee-gatch which provides patient comfort
- The cot has a retractable head section which provides 360 degree mobility in any height position.

Stryker Medical also certifies that we are the sole manufacturer of Stryker OEM Service Parts.

Stryker Medical certifies that we are the sole manufacturer of the Stryker EMS Stair-PRO (6252) product. This correspondence is to inform you of the unique characteristics of the Stair-PRO (6252) system.

Standard Features:

- High visibility powder-coated yellow frame
- Color-coded controls
- Extendable foot end lift handles
- Locking rear lift handles
- Molded hand grips
- Lightweight, rugged aluminum construction
- Oversized rear wheels with sealed bearings
- Dual wheel locks
- Compact storage size
- Positive action locking mechanism
- Power washable
- Grease-free maintenance

Ease of Use:

- Innovative Stair-TREAD system
- Extendable upper control handle
- 4-inch (10cm) front caster wheels

Patented Exclusivity:

- Patent Number: 6648343
- Patent Abstract: The present invention is directed to a stair chair. The stair chair includes a seat assembly mounted to a main frame and configured to pivot about a first pivot axis. A rail assembly having two laterally spaced brackets provided at a lower end of the rail assembly is included. A back wheel is rotatably supported on each bracket for rotation about a common axis of rotation. At least two mounts are provided at a lower end of the main frame, each of which is configured to pivotally connect one of the brackets to the main frame for movement about a second pivot axis. The rail assembly and seat assembly are configured to pivot about their respective pivot axes independent of movement of one another.

Please contact your Stryker Sales Representative for further information.

¹ Only conforms when used with the Power-LOAD[®] cot fastener (model 6390).

DELETION FROM INVENTORY FORM

RECEIVED

DI # 2018-112

DEPARTMENT: Road and Bridge Department

TO BE COMPLETED BY DEPARTMENT:

2018 JUN -8 PM 4:36

Property Number: RD 425 Mileage / Hours if applicable: _____

Year/Description: 1983 Air Compressor

Serial/Vin Number: ACP-G58-V Indicate if a photo is included _____

Describe the reason for deletion (Include replacement criteria if part of the Fleet Replacement Program): Very old air compressor and not working.

If an election was made to offer the property to other governmental units or private nonprofit agencies per Florida Statute 274.05, please indicate which agencies: _____

Indicate how the property will be disposed of:

Trade-In: _____ (Please include trade-in documents)

Destroy: X Indicate how and by whom: Will be scrapped by Ira Bowen

Auction: _____ Where: _____ Amount Received: _____

Other: _____ Please describe: _____

Department Head Signature: Rebecca M Date: 6/8/18

TO BE COMPLETED BY FINANCIAL SERVICES:

Asset Number: RD-425 Acquisition Cost: \$1,565.16

Acquisition Date: November, 1983 Book Value: -0-

Financial Services Signature: Kari Ume Date: 6/11/18

BOARD APPROVAL:

Board of County Commissioners Chair: _____

Ex-Officio Clerk to the Board of County Commissioners: _____

Date _____

TO BE COMPLETED AFTER DISPOSAL:

Signature of Person Disposing of the Property: _____ Date: _____

ty 6/8/18

Dept 0410

Class 40
Sub 512

Loc 375

PROPERTY
RECORD
(ITEM)
NUMBERS

RD-425

732

ITEM NAME (CLASS & TYPE) Air Compressor

NUMBER
OF ITEMS 1

LOCATION Bailey Road Shop

IDENTIFICATION
OR DESCRIPTION Model ACP-G58-V 5 H.P.

DATE PURCHASED
OR ACQUIRED 11-83

VOUCHER
NUMBER:

WARRANT
NUMBER:

FUND: R&B

NAME, MAKE OR
MANUFACTURER Petroleum
Equipment

SERIAL OR
MOTOR NO.: ACP-G58-V

YEAR OR
MODEL: 1983

TITLE
NO.

ACQUIRED
FROM: T. P. Herndon Company

UNIT
COST

TOTAL
COST 1565.16

DISPOSED OF
(SOLD, TRADED, TRANSFERRED OR JUNKED)

DED.
PERP.
INV.

ESTIMATED

LIFE

CONDITION: () GOOD

FAIR () () POOR

SEE REVERSE SIDE FOR:
ADDITIONAL ACQUISIT-
IONS, PERPETUAL INVEN-
TORY, PHYSICAL INVEN-
TORY, REMARKS, DEPRE-
CIATION AND OTHER
INFORMATION.

PROPERTY RECORD
GOVERNMENTAL UNIT:

ORIGINAL TO
PROPERTY
CLERK

BOWEN SUPPLY CO.
Form No. F.S. 274

CUSTODIAN DATA (NAME, TITLE OR POSITION, BEGINNING & ENDING DATES OF JURISDICTION)

R. L. King, Nassau County Engineer, November, 1983

DATE	AUTHORITY	MIN. BOOK	PAGE	REALIZED VALUE & REMARKS	(INIT.)
8/18/95	to trans maint from Rd. Dept				

Norma Jean Angeles

From: Norma Jean Angeles
Sent: Wednesday, June 06, 2018 12:23 PM
To: 'Kari Ulmer'
Subject: RE: Air Compressor deletion - Asset# 20010900

Follow Up Flag: Follow up
Flag Status: Flagged

Thanks for the research, I will prepare the deletion form.

Norma-Jean

Road and Bridge Fleet Management
96161 Nassau Place
Yulee, FL 32097
Phone (904) 530-6178
Email: NJAngeles@nassaucountyfl.com

From: Kari Ulmer [mailto:kulmer@nassauclerk.com]
Sent: Wednesday, June 06, 2018 11:47 AM
To: Norma Jean Angeles <njangeles@nassaucountyfl.com>
Subject: RE: Air Compressor deletion - Asset# 20010900

Hi Norma-Jean~

After some digging and research I found that asset #20010900 is **not** the compressor that you have. The attached asset card is for RD-425. I have searched MUNIS-Fixed Assets for the serial #, model, class/subclass/location, amount, etc. and I am unable to find anything. It appears it was never added to MUNIS.

The Board still needs to approve the disposal even though we don't have it in our system. If you could please prepare a deletion form and I will attach the asset card for support.

Please let me know if you any questions.

Thanks

~Kari

From: Kari Ulmer
Sent: Wednesday, June 06, 2018 10:57 AM
To: 'Norma Jean Angeles' <njangeles@nassaucountyfl.com>
Subject: RE: Air Compressor deletion - Asset# 20010900

Do you know the model #?

~Kari

Norma Jean Angeles

From: Kari Ulmer <kulmer@nassauclerk.com>
Sent: Thursday, May 17, 2018 4:10 PM
To: Norma Jean Angeles
Subject: RE: Air Compressor deletion
Attachments: Compressor.pdf

Could it be either of these? They are both retired though. Asset #20010900 disposal code is "cannot locate" so I am wondering if this one is it.

~Kari

From: Norma Jean Angeles <njangeles@nassaucountyfl.com>
Sent: Thursday, May 17, 2018 4:01 PM
To: Kari Ulmer <kulmer@nassauclerk.com>
Subject: RE: Air Compressor deletion

No serial number either. It is old and rusty.

Norma-Jean

*Road and Bridge Fleet Management
96161 Nassau Place
Yulee, FL 32097
Phone (904) 530-6178
Email: NJAngeles@nassaucountyfl.com*

From: Kari Ulmer [<mailto:kulmer@nassauclerk.com>]
Sent: Thursday, May 17, 2018 3:43 PM
To: Norma Jean Angeles <njangeles@nassaucountyfl.com>
Subject: RE: Air Compressor deletion

Do you have the serial #?

~Kari

From: Norma Jean Angeles <njangeles@nassaucountyfl.com>
Sent: Thursday, May 17, 2018 2:58 PM
To: Kari Ulmer <kulmer@nassauclerk.com>
Subject: FW: Air Compressor deletion

Hi Kari,

Can you help me find the asset number of an old compressor at Bailey Yard which is about 35 years old and it has a tag RD425. I tried searching it in munis system and I cannot find it.

We will scrap it as the reason for deletion.

Thank you.

Norma-Jean

Road and Bridge Fleet Management

96161 Nassau Place

Yulee, FL 32097

Phone (904) 530-6178

Email: NJAdeles@nassaucountyfl.com

From: Norma Jean Angeles

Sent: Wednesday, May 09, 2018 10:27 AM

To: Ira Bowen <ibowen@nassaucountyfl.com>

Subject: RE: Air Compressor deletion

Thanks, I will process the deletion.

Norma-Jean

Road and Bridge Fleet Management

96161 Nassau Place

Yulee, FL 32097

Phone (904) 530-6178

Email: NJAdeles@nassaucountyfl.com

From: Ira Bowen

Sent: Wednesday, May 09, 2018 10:25 AM

To: Norma Jean Angeles <njangeles@nassaucountyfl.com>; Darren Marsh <dmarsh@nassaucountyfl.com>

Subject: Air Compressor deletion

Norma Jean,

[We need to delete shop air compressor from inventory asset tag RB425 or RD425 it's 35 years old and doesn't work and will be scrapped.]

Thank You,

Ira Bowen

Nassau County Road & Bridge

Fleet Management

3163 Bailey Rd.

Fernandina Bch., FL. 32034

904-753-0506

Email ibowen@nassaucountyfl.com

Tab 2
Page B


**PERSONNEL AUTHORIZED TO APPROVE INVOICES,
REQUISITIONS AND BUDGET TRANSFERS**

2018 JUN -7 PM 4:35

EMPLOYEE'S NAME:

Dawn Carter

SIGNATURE & INITIALS:



DEPARTMENT:

State Attorney's Office

FUND NAME	ACCOUNT NO. (ORG)	APPROVAL LIMIT	CHANGES & UPDATES
Criminal Justice	20164602	\$5,000	Updated Approval Limit
FS Special Rev	49172713 SA164	\$5,000	Updated Approval Limit

SPECIAL CLERK INSTRUCTIONS:

NOTE: Keep a copy of this form for your records. If any information should change, please send the new information to the Finance Department to be submitted to the BOCC for approval.



DEPARTMENT HEAD SIGNATURE

June 6, 2018

DATE

EX-OFFICIO CLERK SIGNATURE

DATE

BOARD APPROVED:

REVISED 10/2011

FD-1