

INVITATION FOR BID

ISSUING OFFICE:

GENERAL SERVICES AGENCY  
GOVERNMENT OF GUAM  
148 ROUTE 1, MARINE DRIVE  
PITI, GUAM 96915

*Claudia S. Acfalle*  
CLAUDIA S. ACFALLE  
Chief Procurement Officer

DATE ISSUED: February 19, 2014

BID INVITATION NO: GSA-019-14

BID FOR: PHARMACEUTICAL SUPPLIES

SPECIFICATION: ATTACHED

DESTINATION: Department of Public Health and Social Services to include All Government Agencies and Autonomous Agencies

REQUIRED DELIVERY DATE: 30 Days Upon Receipt of Purchase Order. For a period of one (1) year on an as needed basis upon availability of funds. **THIS IS AN INDEFINITE QUANTITY BID.**

INSTRUCTION TO BIDDERS:

INDICATE WHETHER: INDIVIDUAL PARTNERSHIP  CORPORATION

INCORPORATED IN: Guam

This bid shall be submitted in duplicate and sealed to the issuing office above no later than (Time) 10:00am Date: 3/07/14 shall be publicly opened. Bid submitted after the time and date specified above shall be rejected. See attached General Terms and Conditions, and Sealed Bid Solicitation for details.

The undersigned offers and agrees to furnish within the time specified, the articles and services at the price stated opposite the respective items listed on the schedule provided, unless otherwise specified by the bidder. In consideration to the expense of the Government in opening, tabulating, and evaluating this and other bids, and other considerations, the undersigned agrees that this bid remain firm and irrevocable within 60 calendar days from the date opening to supply any or all the items which prices are quoted.

NAME AND ADDRESS OF BIDDER:

Medpharm  
138 Kayen Chando St.  
Dededo, Guam 96929

SIGNATURE AND TITLE OF PERSON AUTHORIZED TO SIGN THIS BID:

*[Signature]*  
Sales Representative

AWARD: CONTRACT NO.: GSA-019-14 Multiple Awards (Indef. Qty. Bid)  
AMOUNT: \_\_\_\_\_ DATE: \_\_\_\_\_

ITEM \_\_\_\_\_ NO(S) \_\_\_\_\_ AWARDED: \_\_\_\_\_

CONTRACTING OFFICER:

*[Signature]*  
CLAUDIA S. ACFALLE  
Chief Procurement Officer

NAME AND ADDRESS OF CONTRACTOR:

MEDPHARM  
138 KAYEN CHANDO ST.  
DEDEDO, GUAM, 96929

SIGNATURE AND TITLE OF PERSON AUTHORIZED TO SIGN THIS CONTRACT:

*[Signature]*  
SALES MANAGER