

COUNTY OF ROCKLAND
Department of General Services
Purchasing Division

Contract Award Notification

Title: **Vaccines, Hepatitis**

Contract Period: **Contract Data Base through June 30, 2024**

Original Date of Issue: July 8, 2020

Date of Revision: **January 20, 2023**

Contract No: MMS2000177

Catalog: Health & Hospitals

Address Inquiries to:

Name: Michele Phillips
Title: Purchaser I
Phone: 845-364-2984
Fax: 845-364-3809
E-mail: phillipm@co.rockland.ny.us

Description

This contract is for hepatitis A & B vaccines

Vendor Number	Contractor & Address	Telephone No.
0000007843	Glaxo Smithkline 3 Franklin Plaza PO Box 13619 Philadelphia, PA 19101-3619 Contact: Christine Hays Christine.d.hayes@gsk.com	866-475-8222 FAX: 215-599-9179

**PLEASE NOTE:
THIS CONTRACT IS ONLY FOR DEPARTMENT OF HEALTH
CLINICS TO USE.**

County of Rockland CONTRACT

Dept. of General Services

Purchasing Division
50 Sanatorium Rd
Bldg A, 6th Fl, Room 609
POMONA NY 10970
www.rcpurchasing.com

Dispatch via Print

Contract ID MMS2000177		Page 1 of 2
Contract Dates 07/08/2020 to 06/30/2024		Currency USD
Freight Terms VACCINES, HEPATITIS		Contract Maximum 46,489.76
Buyer Email phillipm@co.rockland.ny.us		
Buyer PHILLIPS, MICHELE	Phone 845/364-2984	Fax 845/364-3809

Supplier 0000007843
Glaxo Smith Kline
3 Franklin Plaza
PO BOX 13619
Philadelphia PA 19101-3619

Phone 866/475-8222
Fax 215/599-9179
vaccine.service-center@gsk.com

Tax Exempt? Tax Exempt ID:

Line #	Supplier Item	Item Desc	Item ID	Price	UOM
1		HEP B, VACCINE, ADULT, ENGERIX, NDC 58160-082111, (20 MCG/ML VIAL) 1 ML X 10/VIAL, 10 DOSE VIAL, PRICE INCLUDES EXCISE TAX, \$0.75/DOSE (10 X \$0.75=\$7.50), SHIP TO ACCOUNT #1100391199	26980500005	478.07000	Vial
3		HEP B, VACCINE, ADULT, NDC #58160-082152, 10/PK, 1 ML X 10, PRE-FILLED SYTRINGES, ENGERIX-B, 20 MCG/ML, DISPOSABLE, NO LATEX, TIP LOCKS SHIP TO ACCT #1100391199, PRICE INC EXCISE TAX \$0.75/PER DOSE (10 X \$0.75=\$7.50)	26980500007	478.07000	Pack
4		HEP A, VACCINE, ADULT HAVRIX, 1 ML, PREFILLED SYRINGE, NEEDLES, NDC #58160-082652, 10/PKG, SHIP TO ACCT. #1100391199, PRICE INCLUDES EXCISE TAX \$0.75/PER DOSE (10 X \$0.75=\$7.50), PRESERVATIVE FREE,	26980500008	688.75000	Pack

Authorized Signature

Paul J. Brennan

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Glaxo Smith Kline
3 Franklin Plaza
PO BOX 13619
Philadelphia PA 19101-3619

Phone 866/475-8222
Fax 215/599-9179
vaccine.service-center@gsk.com

Tax Exempt? Tax Exempt ID:

Line #	Supplier Item	Item Desc	Item ID	Price	UOM
5		VACCINE, BOOSTRIX, Tdap, NDC #58160-0842-11, DIPH, PERTUSS (ACELL), TET VAC/PF, .5 ML X 10 SINGLE DOSE/PK, EXCISE TAX INCLUDED (\$2.25/DOSE) SHIP TO ACCT #1100391199	26980000024	403.18000	Pack
8		VACCINE, BOOSTRIX, TDAP, NDC #58160-0842-52, DIPH, PERTUSS (ACELL), TEST, VAC/PF, .5ML X 10/PK, DISPOSABLE, PRE-FILLED SYRINGES , SHIP TO ACCT #1100391199, EXCISE TAX INCLUDED	26980000030	403.18000	Pack
9		HEP A/HEP B, VACCINE, NDC 58160-0815-52, 1 ML X 10/SYRINGERS PER PACK, PF720-20 ML SYRINGE, PRICE INCLUDES EXCISE TAX (\$1.50/DOSE (10 X\$1.50=\$15.00), SHIP TO ACCT #1100391199	26980000039	1,053.33000	Pack
10		HEP B, VACCINE, PEDIATRIC, ENGERIX-B, 10 MCG/0.5 SYRINGE, 0.5 MLX10, NDC #58160082052, PRICE INCLUDES EXCISE TAX, \$0.75/DOSE (10X0.75 =\$7.50) , SHIP TO ACCOUNT 1100391199	26980000040	183.86000	Pack

Authorized Signature

Paul J. Brennan