COUNTY OF ROCKLAND Department of General Services **Purchasing Division**

Contract Award Notification

Title:	Vaccines, Hepatitis
Contract Period:	Contract Data Base through March 31, 2025
Original Date of Issue:	July 8, 2020
Date of Revision:	April 9, 2024
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

<u>Description</u> This contract is for hepatitis A & B vaccines

Vendor Number	Contractor & Address	Telephone No.
0000007843	Glaxo Smithkline	866-475-8222
	3 Franklin Plaza	
	PO Box 13619	
	Philadelphia, PA 19101-3619	FAX: 215-5999179
	Contact: Christine Hays	
	Christine.d.hayes@gsk.com	

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

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Contract ID	Page
MMS2000177	1 of 2
Contract Dates	Currency
07/08/2020 to 03/31/2025	USD
	Contract Maximum
VACCINES, HEPATITIS	46,489.76
Freight Terms	Buyer Email
-	phillipm@co.rockland.ny.us

Dispatch via Print

	phillipm@co.rockland.ny.us			
Buyer	Phone	Fax		
PHILLIPS, MICHELE	845/364-2984	845/364-3809		

Supplier 00000 Glaxo Smith Kline 000007843 3 Franklin Plaza PO BOX 13619 Philadelphia PA 19101-3619

Tax Exempt:	Phone Fax	866/475-8222 215/599-9179 vaccine.service-center@gsk.com			
Line # Supp		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	496.86000	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	496.86000	Pack

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

716.00000 Pack

Authorized Signature Paul J Brenn

County of Rockland CONTRACT

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

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	Бібра		
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MMS2000177		2 of 2	
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07/08/2020 to 03/31/2025	USD		
	Cont	ract Maximum	
VACCINES, HEPATITIS	46,489.76		
Freight Terms	Buyer Email		
-	phillipm@co.rockland.ny.us		
Buyer	Phone	Fax	
PHILLIPS, MICHELE	845/364-2984	845/364-3809	

Phone Fax Tax Exempt? 7	866/475-8222 215/599-9179 vaccine.service-center@gsk.com ^{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	414.60000 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	414.60000 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	1,094.87000 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	190.91000 Pack	

Paul J Brenn

Dispatch via Print