STATE OF OHIO
DEPARTMENT OF ADMINISTRATIVE SERVICES
GENERAL SERVICES DIVISION
OFFICE OF PROCUREMENT SERVICES
4200 SURFACE ROAD, COLUMBUS, OH 43228-1395

AMENDMENT FOR CHANGE
AMENDMENT NO. 16

TO: LIMITED DISTRIBUTION – Department of Mental Health, Office of Support Services, 2150 W. Broad Street, Columbus, OH 43223, Department of Health, 900 Freeway Drive North, Bldg. 8, Columbus, OH 43229, and State Universities

FROM: ROBERT BLAIR, DIRECTOR, DEPARTMENT OF ADMINISTRATIVE SERVICES

SUBJECT: TERM CONTRACT - PHARMACEUTICAL CONTRACT 2010-2011

Attached are pages 30, 34, 44, 46, 47, 74, 97, 98, 102, 103, 120, 121, 122, 131, 162, 175, 195, 210, 211, 212, 213, 214, 216, 217, 252, 259, 269, 274 and 283 to this contract. Remove these pages from the existing contract and replace with the attached pages on the effective and/or revision date.

This amendment is issued to advise of price increase on products, discontinued items, and other changes as indicated herein.

All other prices, terms and conditions remain unchanged.

Questions regarding this Amendment and/or the Requirements Contract may be directed to:

Terry Spiropoulos, CPPB
terry.spiropoulos@das.state.oh.us

This Amendment, the main Requirements Contract and any additional amendments thereto are available from the DAS Web site at the following address:

http://www.ohio.gov/procure

Affected Contractor(s):

94510
Auburn Pharmaceutical Co.
1775 John R Road
Troy, MI 48083
roslisauburnpharm@yahoo.com

76401
Capital Wholesale Drug Co.
873 Williams Avenue
Columbus, OH 43212
grich61695@aol.com

91648
Novartis Vaccines & Diagnostics, Inc.
4560 Horton St.
Emeryville, CA 94608
adam.schwebach@novartis.com

185420
Emed Medical Company
12163 Bridgeton Square Dr.
Bridgeton, MO 63044
tbooker@emedmedical.com

100570
Prescription Supply Inc.
873 Williams Avenue
Columbus, OH 43212
grich61695@aol.com

185417
River City Pharmaceutical Distribution, Inc.
4884 Duff Dr. Ste. D
West Chester, OH 45246
david.anderson@rxrivercity.com

101739
Richie Pharmacal Co., Inc.
119 State Avenue
Glasgow, KY 42141
dboyter@glasgow-ky.com

131828
Sanofi Pasteur, Inc.
Discovery Drive
Swiftwater, PA 18370
jill.bingham@sanofipasteur.com

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
5808 1 210-08-1761 C	Isoniazid Tablets 300mg (INH)	100	BTL	220	5.23	SANDOZ 00185-4350-01	
5809 1 210-08-1761 M	Isoniazid Tablets 300mg (INH)	1,000	BTL	220	44.08	WESTWARD 00143-1261-10	
775 1 210-08-1761 U	Isoniazid Tablets 300mg (INH)	UD 100	PKG	60	11.58	BARR 51079-0083-20	
1048 1 210-08-1802 S	Abacavir (Ziagen) 300mg Tablets	60	BTL	60	518.46	GLAXO 00173-0661-01	
5811 1 210-08-1805 S	Abacavir 300mg, Lamivudine 150mg, Zidovudine 300mg (Trizivir)	60	BTL			STILL UNDER EVALUATION	
5812 1 210-08-1806 T	Abacavir 600mg Lamivudine (Epzicom) 300mg Tablets	30	BTL	60	923.48	GLAXO 49702-0206-13	*
5825 1 210-08-1811 U	Acyclovir Capsules 200mg (Zorvirax)	UD 100	PKG	220	9.92	TEVA 00093-8940-93	
1049 1 210-08-1812 C	Acyclovir (Zovirax) 800mg Tablets	100	BTL	220	16.21	RANBAXY 63304-0505-01	

* To advise of price increase and change in corresponding NDC number effective for orders issued on or after January 25, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1682 1 210-08-1889 H	(Viracept) Nelfinavir Mesylate 625mg Tablets	120	BTL	60	711.09	GLAXO 63010-0027-70	
10313 1 210-08-1890C	Pyrazinamide Tablets 500mg	100	BTL	220	54.57	DAVA 67253-0660-10	
5871 1 210-08-1893 S	Nevirapine (Viramune) 200mg Tablets	60	BTL	220	630.84	BI 00597-0046-60	*
14777 1 210-08-1894S	(Selzentry) Maraviroc 150mg Tablets	60	BTL	60	908.67	GLAXO 00069-0807-60	
14778 1 210-08-1895S	(Selzentry) Maraviroc 300mg Tablets	60	BTL	60	908.67	GLAXO 00069-0808-60	
6164 1 210-08-1896	Ribavirin Capsules 200mg (Generic)	84	BTL	220	22.73	ZYDUS 68382-0260-12	
6160 1 210-08-1898 V	Peg interferon alfa 2b Powder for Injection (Peg Intron) 120mcg/0.5ml	Ea 1	BOX	220	581.96	SCHERING 00085-1304-01	
864 1 210-08-1899 V	Peg interferon alfa 2b Powder for Injection (Peg Intron) 150mcg/0.5ml	Ea 1	BOX	220	581.96	SCHERING 00085-1279-01	

* To advise of price increase effective for orders issued on or after February 4, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
796 1 210-12-0863 C	Dicyclomine HCL Capsules 10mg (Bentyl)	100	BTL	240	2.54	LANNETT 00527-0586-01	
5878 1 210-12-0863 U	Dicyclomine HCL Capsules 10mg (Bentyl)	UD 100	PKG	60	9.08	MYLAN 51079-0118-20	
14783 1 210-12-0921C	Hyoscyamine 0.125mg Sublingual Tablets	100	BTL	30	29.88	BRECKENRIDGE 51991-0656-01	
10317 1 210-12-1110T	Tiotropium (Spiriva) Capsules 18mg for Inhalation w/Handihaler	30	PKG	220	236.41	B-I 00597-0075-41	*
6008 1 210-12-1144 C	Trihexyphenidyl HCL Tablets 2mg (Artane)	100	BTL	20	3.83	WATSON 00591-5335-01	
821 1 210-12-1144 M	Trihexyphenidyl HCL Tablets 2mg (Artane)	1,000	BTL			NO AWARD	**
6009 1 210-12-1145 C	Trihexyphenidyl HCL Tablets 5mg (Artane)	100	BTL	20	7.69	WATSON 00591-5337-01	
6010 1 210-12-1145 M	Trihexyphenidyl HCL Tablets 5mg (Artane)	1,000	BTL			NO AWARD	**

* To advise of price increase effective for orders issued on or after January 25, 2012.

** To advise of change in award status. Using agency shall procure using its Direct Procurement Authority pursuant to Ohio Revised Code Section 125.05.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
806 1 210-12-1320	Formoterol Fumarate 12mcg Cap for Inh Aerolizer (Foradil)	60	PKG	60	148.15	SCHERING 00085-1401-01	
5948 1 210-12-1480 C	Pseudoephedrine Tablets 30mg (Sudafed)	100	BTL			NO AWARD	*
815 1 210-12-1480 U	Each tablet must be individually unit dose packaged - 2 tablet packs not desired. Pseudoephedrine Tablets 30mg (Sudafed)	UD 24	PKG	240		NO AWARD	*
11934 1 210-12-1481 P	Pseudoephedrine Syrup 30mg/5ml (Sudafed)	16 oz 1	BTL	20	4.00	WATSON RUGBY 00536-1850-85	
5949 1 210-12-1520	Salmeterol Disk Inhaler 50mcg/Inh	60	PKG	60	152.36	GLAXO 00173-0521-00	
6006 1 210-12-1528 C	Terbutaline Sulfate 5mg Tablets (Brethine)	100	BTL	30	26.90	LANNETT 00527-1311-01	
5874 1 210-12-1640 C	Caffeine 100mg Ergotamine Tartrate 1mg (Cafergot) Tablets	100	BTL	225	61.95	MIKART 60258-0070-01	
825 1 210-12-2014 C	Baclofen 10mg Tablets (Lioresal)	100	BTL			NO AWARD	**

* To advise of change in award status. Using agency shall procure using its Direct Procurement Authority pursuant to Ohio Revised Code Section 125.05.

** To advise of change in award status – product has been discontinued by manufacturer. Using agency shall procure using its Direct Procurement Authority pursuant to Ohio Revised Code Section 125.05.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
14701 1 210-12-2014D	Baclofen Tablets 10mg	500	BTL			NO AWARD	*
14702 1 210-12-2014M	Baclofen Tablets 10mg	1,000	BTL	240	30.00	LANNETT 00527-1330-10	
11935 1 210-12-2014U	Baclofen 10mg Tablets (Lioresal)	UD 100	PKG	160	12.61	TEVA 00904-3365-61	
6013 1 210-12-2015 C	Baclofen 20mg Tablets (Lioresal)	100	BTL			NO AWARD	*
14703 1 210-12-2015D	Baclofen Tablets 20mg	500	BTL			NO AWARD	*
5876 1 210-12-2043 C	Chlorzoxazone Tablets 500mg (Parafon Forte DSC)	100	BTL	225	3.32	BARR 00555-0585-02	
795 1 210-12-2043 U	Chlorzoxazone Tablets 500mg (Parafon Forte DSC)	UD 100	PKG	60	13.95	BARR 51079-0476-20	
14785 1 210-12-2045C	Cyclobenzaprine 5mg Tablets	100	BTL	220	2.25	AUROBINDO 65862-0190-01	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER
5963 1 210-24-0859C	Hydralazine Tablets 25mg (Apresoline)	100	BTL	30	4.50	HERITAGE 23155-0002-01
980 1 210-24-0860 C	Minoxidil (Loniten) 2.5 mg Tablets	100	BTL	30	7.60	MUTUAL 53489-0386-01
974 1 210-24-0861N	Losartan (Cozaar) 25mg Tablets	90	BTL	30	76.00	TORRENT * 13668-0113-90
5406 1 210-24-0861U	Losartan (Cozaar) 25mg Tablets	UD 100	PKG			NO AWARD
975 1 210-24-0862N	Losartan (Cozaar) 50mg Tablets	90	BTL	30	8.50	TEVA 00093-7365-98
5407 1 210-24-0862U	Losartan (Cozaar) 50mg Tablets	UD 100	PKG			NO AWARD
5463 1 210-24-0863C	Minoxidil (Loniten) 10 mg Tablets	100	BTL	30	12.70	MUTUAL 53489-0387-01
5327 1 210-24-0865 C	Enalapril Maleate (Vasotec) 2.5mg Tablets	100	BTL	75	1.34	WOCKHARDT 64679-0923-02

* To advise of change in manufacturer and corresponding NDC number.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1238 3 210-28-1352 C	Gabapentin Capsules (Neurontin) 400mg	100	BTL	220	8.52	CARACO 62756-0139-02	
6413 3 210-28-1352 D	Gabapentin Capsules (Neurontin) 400mg	500	BTL	220	41.39	CARACO 62756-0139-05	
6414 3 210-28-1352 U	Gabapentin Capsules (Neurontin) 400mg	UD 100	PKG	160	15.02	AMNEAL 00904-6105-61	
1074 3 210-28-1355U	Gabapentin Tablets 600mg	UD 100	PKG	95	29.49	AMERICAN HEALTH 68084-0122-01	
1075 3 210-28-1356 C	Gabapentin Tablets 800mg	100	BTL	240	53.64	CARACO 62756-0204-01	
(TBD) 3 210-28-1356D	Gabapentin Tablets 800mg	500	BTL			NO AWARD	**
1076 3 210-28-1356U	Gabapentin Tablets 800mg	UD 100	PKG	95	50.47	AMERICAN HEALTH 68084-0123-01	*
(TBD) 3 210-28-1374	Lamotrigine Starter Kit 25/100mg	98	PKG			NO AWARD	

* To advise of price increase effective for orders issued on or after January 25, 2012.

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
(TBD) 3 210-28-1375	Lamotrigine Starter Kit 25/100mg	49	PKG			NO AWARD	
(TBD) 3 210-28-1376U	Lamotrigine tablet 25 mg	UD 100	PKG	60	9.75	MYLAN 51079-0498-20	
(TBD) 3 210-28-1377U	Lamotrigine tablet 100 mg	UD 100	PKG	60	13.35	MYLAN 51079-0499-20	
5681 3 210-28-1378 S	Lamotrigine (Lamictal) 150mg Tablet	60	BTL	75	3.77	TORRENT 13668-0048-60	
1079 3 210-28-1392 H	Levetiracetam Tablets 250mg (Keppra)	120	BTL	255	9.31	ROXANE 00054-0150-23	
5683 3 210-28-1393 H	Levetiracetam Tablets 500mg (Keppra)	120	BTL	220	14.41	ROXANE 00054-0151-23	
1080 3 210-28-1394 H	Levetiracetam Tablets 750mg (Keppra)	120	BTL	220	19.21	ROXANE 00054-0152-23	
6394 3 210-28-1430 C	Oxcarbazepine Tablets 150mg (Trileptal)	100	BTL	240	10.70	BRECKENRIDGE 51991-0292-01	*

* To advise of change in manufacturer and corresponding NDC number.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER
14684 3 210-28-1556K	Valproic Acid 250mg caps Blister Cards	UD 300	PKG	60	48.57	CATALENT 51079-0298-56
1439 3 210-28-1556U	Valproic Acid 250mg Capsules	UD 100	PKG	220	19.53	UDL 51079-0298-08
1632 3 210-28-1564 C	Zonisamide (Zonegran) 100mg Capsules	100	BTL	30	8.80	WOCKHARDT 64679-0990-01
(TBD) 3 210-28-1588S	Asenapine (Saphris) 5 mg tablet	60	BTL	60	568.76	SCHERING 00052-0118-06
(TBD) 3 210-28-1588U	Asenapine (Saphris) 5 mg tablet	UD 100	PKG	220	895.12	SCHERING 00052-0119-90
(TBD) 3 210-28-1589S	Asenapine (Saphris) 10 mg tablet	60	BTL	60	568.76	SCHERING 00052-0119-06
(TBD) 3 210-28-1589U	Asenapine (Saphris) 10 mg tablet	UD 100	PKG	220	895.12	SCHERING 00052-0119-90
1004 3 210-28-1590 T	Atomoxetine Capsules 10mg (Strattera)	30	BTL	220	179.73	LILLY 00002-3227-30 *

* To advise of price increase effective for orders issued on or after February 10, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1005 3 210-28-1591 T	Atomoxetine Capsules 18mg (Strattera)	30	BTL	220	179.73	LILLY 00002-3238-30	*
1006 3 210-28-1592 T	Atomoxetine Capsules 25mg (Strattera)	30	BTL	220	179.73	LILLY 00002-3228-30	*
1007 3 210-28-1593 T	Atomoxetine Capsules 40mg (Strattera)	30	BTL	220	196.04	LILLY 00002-3229-30	*
5959 3 210-28-1594 T	Atomoxetine Capsules 60mg (Strattera)	30	BTL	220	196.04	LILLY 00002-3239-30	*
14685 3 210-28-1595T	(Strattera) Atomoxetine 80mg Capsules	30	BTL	220	212.29	LILLY 00002-3250-30	*
14686 3 210-28-1596T	(Strattera) Atomoxetine 100mg Capsules	30	BTL	220	212.29	LILLY 00002-3251-30	*
(TBD) 3 210-28-1597D	Bupropion SR 100 mg tablets	500	BTL	220	245.93	SANDOZ 00185-0410-05	
7153 3 210-28-1598	Bupropion SR Tablets 150mg	250	BTL	75	63.26	WATSON 00591-3541-25	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
6818 3 210-28-1798	Aripiprazole Liquid 1mg/ml (Abilify)	150 ml 1	BTL	60	581.85	BMS 59148-0013-15	
12689 3 210-28-1799T	Aripiprazole Tablets 2mg	30	BTL	220	561.24	BRISTOL 59148-0006-13	*
1346 3 210-28-1800 T	Aripiprazole (Abilify) 10mg Tablets	30	BTL	60	528.27	BMS 59148-0008-13	
6819 MBE; 2 210-28-1800 U	Aripiprazole (Abilify) 10mg Tablets	UD 100	PKG			NO AWARD	
1347 MBE; 2 210-28-1801 T	Aripiprazole (Abilify) 15mg Tablets	30	BTL	** 235	521.73	BRISTOL MYERS SQUIBB 59148-0009-13	
6820 3 210-28-1801 U	Aripiprazole (Abilify) 15mg Tablets	UD 100	PKG			NO AWARD	
1348 3 210-28-1802 T	Aripiprazole (Abilify) 20mg Tablets	30	BTL	60	747.06	BMS 59145-0010-13	
6821 3 210-28-1802 U	Aripiprazole (Abilify) 20mg Tablets	UD 100	PKG			NO AWARD	

* To advise of price increase effective for orders issued on or after February 2, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1349 3 210-28-1803 T	Aripiprazole (Abilify) 30mg Tablets	30	BTL	60	747.06	BMS 59148-0011-13	
6822 3 210-28-1803 U	Aripiprazole (Abilify) 30mg Tablets	UD 100	PKG			NO AWARD	
1345 3 210-28-1804 T	Aripiprazole (Abilify) 5mg Tablets	30	BTL	60	528.27	BMS 59148-0007-13	
12641 3 210-28-1804U	Aripiprazole 5 mg Tablet	UD 100	PKG	220	1,951.02	BRISTOL 59148-0007-35	*
1116 3 210-28-1805 D	Alprazolam 0.25mg (Xanax)	500	BTL	225	7.35	QUALITEST 00603-2127-28	
1008 3 210-28-1805 U	Alprazolam 0.25mg (Xanax)	UD 100	PKG	160	4.59	ACTAVIS 00904-5858-61	
1118 3 210-28-1806 D	Alprazolam 0.5mg (Xanax)	500	BTL	225	8.30	QUALITEST 00603-2128-28	
5960 3 210-28-1806 U	Alprazolam 0.5mg (Xanax)	UD 100	PKG			NO AWARD	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
11193 210-28-1807 D	Alprazolam 1mg (Xanax)	500	BTL	225	8.89	QUALITEST 00603-2129-28	
55463 210-28-1807 U	Alprazolam 1mg (Xanax)	UD 100	PKG	60	6.29	MYLAN 51079-0790-20	
14313 210-28-1808 C	Alprazolam 2mg Tablets (Xanax)	100	BTL	30	4.24	QUALITEST 00603-2130-21	
13513 210-28-1809	Alprazolam XR 2mg (Xanax XR)	60	BTL			NO AWARD	*
13503 210-28-1810	Alprazolam XR 0.5mg (Xanax XR)	60	BTL			NO AWARD	*
68243 210-28-1811	Alprazolam XR 1mg (Xanax XR)	60	BTL			NO AWARD	*
13523 210-28-1812	Alprazolam XR 3mg (Xanax XR)	60	BTL			NO AWARD	*
11623 210-28-1816 C	Buspirone HCL (Buspar) 5mg Tablets	100	BTL	75	2.42	WATSON 00591-0657-01	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER
1482 3 210-28-1921 M	Haloperidol Tablets 5mg (Haldol)	1,000	BTL	30	106.50	MYLAN 00378-0327-10
6559 3 210-28-1921 U	Haloperidol Tablets 5mg (Haldol)	UD 100	PKG	160	11.50	SANDOZ 00904-5925-61
1483 3 210-28-1922 C	Haloperidol Tablets 20mg (Haldol)	100	BTL	30	98.00	MYLAN 68382-0081-01
6547 3 210-28-1923 U	Haloperidol Concentrate 2mg/ml (Haldol) 5ml UD Cups	UD 100	PKG	240	89.60	PHARM ASSOCIATES 00121-0581-05
6548 3 210-28-1925	Haloperidol Lactate Inj. 5mg/ml (Haldol) 1ml Vial or Syringe	10	PKG	220	22.79	SICOR 00703-7041-03
1276 3 210-28-1925B	Haloperidol Inj. 5mg/ml (Haldol), Vial	10 ml 1	VL	220	23.79	BEDFORD 55390-0147-01 *
7362 MBE; 2 210-28-1926 C	Hydroxyzine HCL 10mg Tablets (Atarax)	100	BTL	** 85	4.84	AMNEAL 67405-0575-10
1484 3 210-28-1927 C	Hydroxyzine Pamoate 25mg Capsules (Vistaril)	100	BTL	220	4.11	BARR 00555-0323-02

* To advise of price increase effective for orders issued on or after January 25, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
11919 1 210-36-6850 V	Iohexol Inj 300mg/ml 50ml (Ominpaque 300) Vial	50ml 1	VL			NO AWARD	
6434 1 210-36-8400 V	5TU/0.1ml (Aplisol) (No Substitution) Tuberculin PPD Skin Test 10 Test Vial (Mantoux)	1 ml 1	VL	60	34.80	JHP 42023-0104-01	
1633 1 210-36-8401 V	5TU/0.1ml (Aplisol) (No Substitution) Tuberculin PPD Skin Test 50 Test Vial (Mantoux)	5ml 1	VL	60	120.35	JHP 42023-0104-05	
6435 1 210-36-8402 V	5TU/0.1ml (Tubersol) (No Substitution) Tuberculin PPD Skin Test 10 Test Vial (Mantoux)	1 ml 1	VL	260	31.71	SANOFI PASTEUR 49281-0752-21	*
10294 1 210-36-8403 V	5TU/0.1ml (Tubersol) (No Substitution) Tuberculin PPD Skin Test 50 Test Vial (Mantoux)	5 ml 1	VL	260	115.36	SANOFI PASTEUR 49281-0752-22	*
1467 4 210-40-0801 M	Sodium Bicarbonate Tablets 648mg	1,000	BTL	220	8.50	WATSON 00536-4544-10	
10202 4 210-40-1176	Calcium Acetate (PhosLo) 667mg Gelcaps	200	BTL	30	85.40	ROXANE 00054-0088-26	
6440 4 210-40-1200 M	Calcium Carbonate 10grain Tablets	1,000	BTL	75	4.43	PHARBEST 16103-0377-11	

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ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1551 4 210-52-0675	Tobramycin (Tobrex) Ophth. Soln. 3mg/ml 0.3%	5 ml 1	BTL	225	1.11	ALCON 61314-0643-05	
7181 4 210-52-0676	Tobramycin (Tobrex) Ophth. Oint. 3mg/gm, Tube	3.5 gm 1	TB	220	86.66	ALCON 00065-0644-35	*
6637 4 210-52-0750 B	Sulfacetamide NA Ophthalmic Sol 10% Store at Room Temperature	15 cc 1	BTL			NO AWARD	**
919 4 210-52-0774 A	CiproFloxacin 0.3% (Ciloxan) Ophth. Soln.	2.5 ml 1	BTL	220	2.08	FALCON 61314-0656-25	
6328 4 210-52-0774 B	CiproFloxacin 0.3% (Ciloxan) Ophth. Soln.	5 ml 1	BTL	220	2.13	FALCON 61314-0656-05	
12737 4 210-52-0778	Ciprofloxacin 0.3% Dexameth 0.1% (Ciprodex) Otic Susp	5BTL./CS. 7.5ml BTL 5	CS			STILL UNDER EVALUATION	
920 4 210-52-0779	Ciprofloxacin 2mg Hydrocortisone 10mg/ml Otic Susp. 10ml Cipro HC	10 ml 1	BTL	220	117.65	ALCON 00065-8531-10	
784 4 210-52-0785 A	Ofloxacin 0.3% OTIC Soln (Floxin)	5 ml 1	BTL			STILL UNDER EVALUATION	

* To advise of price increase effective for orders issued on or after February 9, 2012.

** To advise of change in award status – product has been discontinued by manufacturer. Using agency shall procure using its Direct Procurement Authority pursuant to Ohio Revised Code Section 125.05.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1821 4 210-68-0683 C	Prednisone Tablets 5mg	100	BTL	240	1.77	WESTWARD 00143-1475-01	
6449 4 210-68-0683 U	Prednisone Tablets 5mg	UD 100	PKG	255	3.85	ROXANE 00054-8724-25	
1822 4 210-68-0684 C	Prednisone Tablets 10mg	100	BTL	240	1.95	WESTWARD 00143-1473-01	
6450 4 210-68-0684 U	Prednisone Tablets 10mg	UD 100	PKG	255	4.51	ROXANE 00054-0017-20	
1823 4 210-68-0685 C	Prednisone Tablets 20mg	100	BTL	220	4.70	WESTWARD 00143-1477-01	*
6451 4 210-68-0685 U	Prednisone Tablets 20mg	UD 100	PKG	255	6.40	ROXANE 00054-0018-20	
12761 4 210-68-0744V	Triamcinolone Acetonide Inj 10mg/ml, Vial	5 ml 1	VL	220	10.83	BMS 00003-0494-20	
1830 4 210-68-0745 V	Triamcinolone Acetonide Inj. 40mg/ml (Kenalog-40), Vial	5ml 1	VL	220	43.65	BMS 00003-0293-20	

* To advise of price increase effective for orders issued on or after January 25, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
6076 4 210-72-4239	Lidocaine Inj 2% Epinephrine 1:100 , Vial	(25/pk) 20 ml 1	VL	75	40.05	HOSPIRA 00409-3182-01	
839 4 210-72-4244	(Xylocaine) Lidocaine HCL 2% 5ml Disp. Syringe	(10/pk) 5ml 1	SYR	75	16.45	HOSPIRA 00409-1323-05	
840 4 210-72-4245	Lidocaine HCL 2% Viscous (Xylocaine)	100 ml 1	BTL	75	1.74	HITECH 50383-0775-04	
269-80-55-050-8 1 210-80-0558 S	Hepatitis B Immune Globulin (Hbig) Pediatric Single Dose Prefilled Syringe, 0.5ml	0.5 ml 1	SYR			NO AWARD	
14807 1 210-80-0558 V	Hepatitis B Immune Globulin (Hbig) Adult Formula Single Dose Vial	1 ml 1	VL			NO AWARD	
10564 1 210-80-0711	Human Diploid Rabies Immune Globulin (HRIG) Vaccine 150IU/ml, Single Dose Vial	2 ml 1	VL	260	358.50	SANOFI PASTEUR 49281-0190-20	*
10565 1 210-80-0711V	Human Diploid Rabies Immune Globulin (HRIG) Vaccine 150IU/ml, Vial	10 ml 1	VL	260	1,792.51	SANOFI PASTEUR 49281-0190-10	*

* To advise of price increase effective for orders issued on or after February 10, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
(TBD) 1 210-80-0850	Diphtheria, Tetanus, acellular pertussis combined with Haemophilius influenza type B and inactivated polio single dose vial including Federal Excise Tax, Must have expiration date of at least one year from delivery date. (no substitution) (Pentacel) 5 vials/pkg.	Vial 5	PKG			NO AWARD	
(TBD) 1 210-80-0855	Diphtheria, Tetanus, acellular pertussis combined with inactivated polio single dose vial including Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Kinrix) (no substitution) 10 vials/package	Vial 10	PKG	60	402.93	GLAXO 58160-0812-11	
(TBD) 1 210-80-0855S	Diphtheria, Tetanus, acellular pertussis combined with inactivated polio single pre-filled syringe including Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Kinrix) (no substitution).5 syringes / Pkg.	Syr 5	PKG	60	402.93	GLAXO 58160-0812-51	
10566 1 210-80-0858	Diphtheria - Tetanus (DT) Pediatric Single Dose Vial including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from date of delivery.	10	PKG			NO AWARD	
10545 1 210-80-0859S	Tetanus & Diphtheria (Td) Toxoids adsorbed for Adult use Preservative Free 10 Pre Filled Syringes including Federal Excise Tax (FET). Must have exp. date of at least one (1) year from date of delivery. (No Substitution) (DECAVAC)	Single-Dose Syringes 10	PKG	260	211.48	SANOFI PASTEUR 49281-0291-10	*

* To advise of price increase effective for orders issued on or after February 10, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
14808 1 210-80-0859V	Tetanus & Diphtheria (Td) Toxoids adsorbed for Adult use Preservative Free 10 Single-Dose Vials including Federal Excise Tax (FET). Must have exp. date of at least one (1) year from date of delivery. (No Substitution) (DECAVAC)	Single-Dose Vials 10	PKG	260	211.48	SANOFI PASTEUR 49281-0291-83	*
14809 1 210-80-0860V	Tetanus & Diphtheria Toxoids Adsorbed for Adults 15 dose vials including Federal Excise Tax (FET)	(Vial) 7.5ml 1	VL			NO AWARD	
6518 1 210-80-0863S	Diphtheria Tetanus , acellular Pertussis combined with Hepatitis B & Inactivated Polio DTaP-HBV-IPV. Single Pre-filled Safety Tip-Lock Syringe W/O BD needle including Federal Excise Tax (FET). (Pediarix) (No Substitution) Must have expiration date of at least one (1) year from date of delivery.	5	PKG	60	305.66	GLAXO 58160-0811-46	
11949 1 210-80-0863V	Diphtheria Tetanus , acellular Pertussis combined with Hepatitis B & Inactivated Polio DTaP-HBV-IPV Single Dose Vial including Federal Excise Tax (FET) (No Substitution) (Pediarix) Must have expiration date of at least one (1) year from date of delivery.	10	PKG	60	611.32	GLAXO 58160-0811-11	
10567 1 210-80-0866	Diphtheria - Tetanus - accellular - Pertussis (DTaP) Single Dose Vial including Federal Excise Tax (FET) (Tripedia) (No Substitution) Must have expiration date of at least one (1) year from date of delivery.	10	PKG	260	236.70	SANOFI PASTEUR 49281-0298-10	

* To advise of price increase effective for orders issued on or after February 10, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
10568 1 210-80-0870	Diphtheria - Tetanus - accellular - Pertussis (DTaP) Single Dose Vial including Federal Excise Tax (FET) (Daptacel) (No Substitution) Must have expiration date of at least one (1) year from date of delivery.	10	PKG	260	252.88	SANOFI PASTEUR 49281-0286-10	*
1841 1 210-80-0872	Tetanus Diphtheria and accelular Pertussis (TDaP) (Boostrix) Single Dose Vial including any applicable Federal Excise Tax (FET) 10 Vials/Package	10	PKG	60	329.17	GLAXO 58160-0842-11	
(TBD) 1 210-80-0872S	Tetanus, diphtheria and acellular pertussis single dose syringe including any applicable Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Boostrix) (no substitution) 5 syringes/package	Syr. 5	PKG	60	164.59	GLAXO 58160-0842-46	
6519 1 210-80-0874	Tetanus Diphtheria and accelular Pertussis (TDaP) (Adacel) Single Dose Vial including any applicable Federal Excise Tax (FET) 10 Vials/Package	10	PKG	260	312.60	SANOFI PASTEUR 49281-0400-10	
(TBD) 1 210-80-0874S	Tetanus,Diphtheria and acellular Pertussis Single dose syringe including any applicable Federal Excise Tax. Must have expiration date of at least one year from date of delivery. (Adacel) 5 syringes / package	Syr. 5	PKG	260	156.30	SANOFI PASTEUR 49281-0400-15	
10570 1 210-80-1144 V	Tetanus Toxoid (No Tubex) adsorbed 5LF units Single Dose Vial including Federal Excise Tax (FET)	10	VL			NO AWARD	

* To advise of price increase effective for orders issued on or after February 10, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER
14810 1 210-80-1330	Hepatitis A Vaccine, Inactivated, Pediatric/Adolescent 25U/0.5ml (Vaqta) Single Dose Vial	10	VL			NO AWARD
269-80-50-420-8 1 210-80-1333 V	Hepatitis A Vaccine, Inactivated, Adult 50U/1ml (Vaqta) Single Dose Vials	1 ml 1	VL			NO AWARD
6639 1 210-80-1337 V	Hepatitis A Vaccine, Inactivated, Pediatric 720 EL.U/0.5ml (Havrix). (No Subsititution), Vial	0.5 ml 10	VL	60	175.36	GLAXO 58160-0825-11
6640 1 210-80-1339 S	1440 EL.U/ml Hepatitis A Vaccine, Inactivated (Havrix) Adult w/ 1ml Disposable Tip-Lok Syringe	Each 5	SYR	60	113.75	GLAXO 58160-0826-46
1688 1 210-80-1339 V	Hepatitis A Vaccine, Inactivated (Havrix) Adult 1440 EL.U/ml, 10 single-dose vials	1 ml 10	VL	60	247.70	GLAXO 58160-0826-11
1690 1 210-80-1342	Hepatitis B Vaccine - Recombinant Adolescent/ Infant (Recombivax HB) 5mcg/0.5ml, Single Dose Vial (No Substitution) including Federal Excise Tax	10	PKG	60	240.16	MERCK 00006-4981-00
1691 1 210-80-1345	Hepatitis B Vaccine - Recombinant (Engerix B) 20mcg/ml, Single Dose 1 ml Vial (No Substitution) including Federal Excise Tax (FET)	1 ml 10	VL	60	319.98	GLAXO 58160-0821-11
6644 1 210-80-1345A	Hepatitis B Vaccine - Recombinant (Engerix B) 20mcg/ml, Syringes (No Substitution) incl. Federal Excise Tax (FET)	5	PKG			NO AWARD *

* To advise of change in award status – product has been discontinued by manufacturer. Using agency shall procure using its Direct Procurement Authority pursuant to Ohio Revised Code Section 125.05.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
10571 1 210-80-1357 A	Hib - Haemophilus Influenza B (Hib), (ActHib) Single Dose Vial including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from delivery date (No Substitution)	5	PKG	260	127.35	SANOFI PASTEUR 49281-0545-05	*
269-80-49-150-5 1 210-80-1358	Preservative Free Hib titer - Haemophilus Influenza B (Hib), (HibTiter) Single Dose Vials including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from delivery date (No Substitution)	5	BOX			NO AWARD	
6697 1 210-80-1440	Measles, Mumps & Rubella Virus Vaccine Live, Box of 10 Single Dose 0.5ml Vials w/ necessary diluent and including Federal Excise Tax (FET). Must have expiration date of at least one (1) year from delivery date	10	BOX	60	518.48	MERCK 00006-4681-00	
1695 1 210-80-1447	Meningococcal Polysaccharide Vaccine 10 Dose Vial w/diluent.	10 dose 1	VIAL			NO AWARD	
19542 1 210-80-1447V	Meningococcal Polysaccharide Vaccine Single Dose Vial w/diluent.	5	(non return) PKG			NO AWARD	
19540 1 210-80-1447U	Meningococcal Polysaccharide Vaccine Individual Vial w/diluent.	1 dose 1	(non return) VL	60	113.29	SANOFI PASTEUR 49281-0489-01	

* To advise of price increase effective for orders issued on or after February 10, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
10572 1 210-80-1449 V	Meningococcal Conjugate (Groups A, C, Y and W-135) (Menactra) Single Dose Vial including any applicable Federal Excise Tax (FET) 5 Vials/Package	5	(non return) PKG	260	532.46	SANOFI PASTEUR 49281-0589-05	
10573 1 210-80-1482	Inactivated Polio Vaccine (IPV) 10 Doses/Pkg. including Federal Excise Tax (FET). Must have exp. date of at least one (1) year from delivery date.	(Vial) 10 dose 1	VL			NO AWARD	
10575 1 210-80-1520 V	Rabies Vaccine (Imovax) adsorbed 2.5IU/ml Vial	1 ml 1	VL	260	214.98	SANOFI PASTEUR 49281-0250-51	*
14811 1 210-80-1521	Rabies Vaccine 2.5 IU, Powder for Inj (RabAvert)	1 ml 1	PKG	182	185.18	NOVARTIS 63851-0501-01	
11945 1 210-80-1540	HPV - Quadrivalent Human Papillomavirus Types 6, 11, 16, and 18 Recombinant Single-dose Vials (Gardasil)	10	PKG	60	1,354.83	MERCK 00006-4045-41	
11946 1 210-80-1540S	Papillomavirus Vaccine Quadrivalent Human (Gardasil), Syringe	1	SYR	60	125.58	MERCK 00006-4109-31	
6698 1 210-80-1545 A	Pneumococcal Vaccine Polyvolent. 0.5cc Disp. Vial. Must have exp. date of at least one (1) year from date of delivery. 10 Vial/Pkg.	10	PKG			NO AWARD	

* To advise of price increase effective for orders issued on or after February 10, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1283 4 210-92-0778H	Chondroitin 400mg Glucosamine 500mg Tablets	120	BTL	160	13.21	NUTRO 00904-5481-18	
(TBD) 4 210-92-0779S	Cilostazol Tablets 50mg (Pletal)	60	BTL			NO AWARD	
12832 4 210-92-0780S	Cilostazol (Pletal) Tablets 100mg	60	BTL			NO AWARD	
7060 4 210-92-0782T	Cinacalcet HCl Tablets 30mg (Sensipar)	30	BTL	220	404.38	AMGEN 55513-0073-30	
(TBD) 4 210-92-0783T	Cinacalcet HCl tablets 60 mg	30	BTL	220	808.77	AMGEN 55513-0074-30	
(TBD) 4 210-92-0784T	Cinacalcet HCl tablets 90 mg	30	BTL	220	1,207.76	AMGEN 55513-0075-30	
(TBD) 4 210-92-0785D	Clopidogrel Bisul 75mg tabs (Plavix)	500	BTL	220	3,365.16	BRISTOL 63653-1171-05	*
6992 4 210-92-0785N	Clopidogrel 75mg Tablets (Plavix)	90	BTL	220	605.73	BRISTOL 63653-1171-01	*

* To advise of price increase effective for orders issued on or after February 2, 2012.

ITEM ID NO. MBE, SECT. NO. REFER. NO.	DESCRIPTION	UNIT QTY. SIZE	PRICE /UNIT	VEN #	UNIT PRICE	MANUFACTURER NDC NUMBER	
1839 4 210-92-9630 U	Zafirlukast Tablets 20mg (Accolate)	UD 100	PKG			NO AWARD	
6517 4 210-92-9650 V	Zoledronic Acid (Zometra) Inj 4mg/5ml Vial	5ml 1	VL	60	897.28	NOVARTIS 00078-0387-25	
6514 4 210-92-9700	Zolmitriptan Tablets 2.5mg (Zomig)	6	PKG	60	143.58	ASTRAZENECA 00310-0210-20	
1141 4 210-92-9702	Zolmitriptan Oral Disintegrating Tablet 2.5mg (Zomig ZMT)	6	BTL	220	146.81	ASTRA 00310-0209-20	**
5764 4 210-92-9703	Zolmitriptan Oral Disintegrating Tablet 5mg (Zomig ZMT)	3	BTL	60	72.87	ASTRAZENECA 00310-0213-21	
12837 4 210-92-9704	Zolmitriptan Nasal Spray 5mg (Zomig)	sprays 6	BTL	220	216.66	ASTRA 00310-0208-60	*

* To advise of price increase effective for orders issued on or after February 4, 2012.

** To advise of price increase effective for orders issued on or after February 10, 2012.

CONTRACTOR INDEX

CONTRACTOR AND TERMS:

BID CONTRACT NO.: OT901311-10 (03/31/12)

42031
Merchandise Incorporated
170 5929 State Route 128
Miamitown, OH 45041-0010

DELIVERY: 15 Days A.R.O.

TERMS: Net 30 Days

CONTRACTOR'S CONTACT: Greg Christopfel, ext. 19

Toll Free: (800) 819-8615
Telephone: (513) 353-2200
FAX: (513) 353-3970
E-Mail: gregc@merchandiseinc.com

Contractor's preferred method of receiving purchase orders.: Fax

ITEM ID NO.: 11516 - Freight charges on orders totaling less than $500.00.

CONTRACTOR AND TERMS:

BID CONTRACT NO.: OT901311-11 (03/31/12)

91648
182 Novartis Vaccines & Diagnostics, Inc.
4560 Horton St.
Emeryville, CA 94608

DELIVERY: 15 Days A.R.O.

TERMS: 2% 30 Days, Net 30

REMITTANCE ADDRESS:
Novartis Vaccines & Diagnostics, Inc.
Accounts Receivable
4560 Horton Street
Emeryville, CA 94608

MAIL PURCHASE ORDERS TO: *
Novartis Vaccines & Diagnostics, Inc.
c/o Jasmina Tatalovic
350 Massachusetts Avenue
Cambridge, MA 02139

CONTRACTOR'S CONTACT: Adam Schwebach **

Toll Free: (877) 683-4732
Telephone:** (617) 871-8012
FAX: (617) 871-8911
E-mail:** adam.schwebach@novartis.com

* Contractor's preferred method of receiving purchase orders: E-Mail

ITEM ID NO.: (TBD) - Freight charges on orders totaling less than $500.00.

** To advise of change in contractor's contact person information.

CONTRACTOR INDEX

CONTRACTOR AND TERMS:

BID CONTRACT NO.: OT901311-17 (03/31/12)

89697
Richmond Pharmaceuticals, Inc.
245 3510 Mayland Court
Richmond, VA 23233

DELIVERY: 15 Days A.R.O.

TERMS: Net 30 Days

CONTRACTOR'S CONTACT: Mary Scott

Telephone: (804) 270-4498
FAX: (804) 270-4699
E-mail: richmond.pharm@verizon.net

Contractor's preferred method of receiving purchase orders: FAX

ITEM ID NO.: 11364 - Freight charges on orders totaling less than $500.00.

CONTRACTOR AND TERMS:

BID CONTRACT NO.: OT901311-19 (09/30/11)

185417
River City Pharmaceutical Distribution, Inc.
250 4884 Duff Dr. Ste. D
West Chester, OH 45246

DELIVERY: 15 Days A.R.O.

TERMS: Net 30 Days

CONTRACTOR'S CONTACT: Sheila Townsend, x 4468

Toll Free: (866) 345-3171
Telephone: (513) 389-4468
FAX: (937) 550-2166 *
E-mail: david.anderson@rxrivercity.com

Contractor's preferred method of receiving purchase orders: E-mail

ITEM ID NO.: (TBD) - Freight charges on orders totaling less than $500.00.

* To advise of change in contractor's contact person information.

SUMMARY OF AMENDMENTS

Amendment Number	Revision Date	Description
16	1/25/12	To advise of price increase on products, discontinued items, and other changes as indicated herein.
15	12/5/2011	To advise of price increase on products, as indicated herein.
14	10/21/11	To advise of price increase on products, as indicated herein.
13	09/29/11	To advise of renewal of the contract for an additional six (6) months, with the exception of three (3) contractors and selected items, change in contractor contact information, and other changes as indicated herein.
12	09/19/11	To advise of changes in price, as indicated herein.
11	08/13/11	To advise of changes in price and award status, as indicated herein.
10	07/29/11	To advise of changes in price and award status, as indicated herein.
9	06/29/11	To advise of price changes, discontinued items, and other changes, as indicated herein.
8	05/03/11	To advise of price changes, discontinued items, correction, and changes as indicated herein.
7	04/01/11	To advise of price increase on products, as indicated herein.
6	03/10/11	To advise of renewal of the contract for an additional six (6) months and changes in award status for items, as indicated herein.
5	12/16/10	To advise of award of products with the addition of one (1) contractor, re-award of product, and changes as indicated herein.
4	12/06/10	To advise of award of products with the addition of two (2) contractors, as indicated herein
3	11/03/10	To advise of award of products and a change in contractor's contact person information, as indicated herein.
2	10/13/10	To add the supplemental Bid No. OT901611 to the contract with the addition of one (1) contractor and to advise of changes, as indicated herein.
1	10/01/10	To add the supplemental Bid No. OT901511 to the contract with the addition of three (3) contractors and to advise of changes, as indicated herein.