

# Event Details

## State of Ohio

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
DAS01-OT00908347	Sell	RFx	1
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
<b>Start Time</b>		<b>Finish Time</b>	
10/31/2014 08:00:00 EST		11/26/2014 13:00:00 EST	

**Bidder:** KAPS GOLD LLC  
LIQUOR AGENCY 757  
358 ENON RD  
ENON OH 45323  
United States

**Submit To:** Electronic Submission online at  
<https://sourcing.fin.oaks.ohio.go>

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Contact:**  
**Phone:**  
**Email:**

## Event Description

Laundry Services for Northcoast Behavioral Healthcare System

## General Comments

- The complete ITB, including all Terms and Conditions is attached. If there are any discrepancies found between the electronic document and this file, the attached version shall supercede.

It is the responsibility of the Bidder to read the entire document and submit any questions or concerns through the Inquiry process during the time the bid is posted. Failure of the bidder to not become familiar with the requirements of the bid will be insufficient reason to support any request to be released from the contract.

## General Questions

Question	UOM	Best	Worst	Response
Have you reviewed all attached bid specifications?  Required: Yes Mandatory Response: No		Yes		<input type="text"/>
Have you attached the required Affirmative Action Verification Form per ITB?  Required: Yes Mandatory Response: No		Yes		<input type="text"/>
Have you indicated which mode of transportation will apply to this contract? 1. Vehicle that is owned, leased, or rented. 2. Delivered via a common carrier. 3. No employee or representative of the contractor will have cause to be on state property to make deliveries or to perform services. Options: 1. 2. 3. Required: Yes Mandatory Response: No				Select All That Apply <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Have you attached the Ohio BWC reg. per ITB (if applicable)?  Required: Yes Mandatory Response: No		Yes		<input type="text"/>
Have you read and understood the attached terms and conditions?  Required: Yes Mandatory Response: No		Yes		<input type="text"/>
Have you attached the insurance coverage required by the Supplemental Cotntract Terms and Conditions, Articles S-12 and S-13 (refer to Instructions, Terms and Conditions for Bidding, Standard Contract Terms and Conditions, and Supplement Contract Terms and Conditions)  Required: Yes Mandatory Response: No		Yes		<input type="text"/>



# Event Details (cont.)

## State of Ohio

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Question	UOM	Best	Worst	Response
Please list prices for the following items:				
Options:				Select All That Apply
Pajama Bottoms XL				<input type="checkbox"/>
Pajama Bottoms 1X				<input type="checkbox"/>
Pajama Bottoms 2X				<input type="checkbox"/>
Pajama Bottoms 3X				<input type="checkbox"/>
Pajama Bottoms 4X				<input type="checkbox"/>
Pajama Bottoms 5X				<input type="checkbox"/>
Pajama Bottoms 6X				<input type="checkbox"/>
REPLACEMENT Pajama Bottoms XL				<input type="checkbox"/>
REPLACEMENT Pajama Bottoms 1X				<input type="checkbox"/>
REPLACEMENT Pajama Bottoms 2X				<input type="checkbox"/>
REPLACEMENT Pajama Bottoms 3X				<input type="checkbox"/>
REPLACEMENT Pajama Bottoms 4X				<input type="checkbox"/>
REPLACEMENT Pajama Bottoms 5X				<input type="checkbox"/>
REPLACEMENT Pajama Bottoms 6X				<input type="checkbox"/>
Required: Yes Mandatory Response: Yes				

## Line Details

**Line:** 1 **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** Flat Sheets

Question	UOM	Best	Worst	Response
Bid Price >		0		<input type="text"/>

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 2 **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** Fitted Sheets

Question	UOM	Best	Worst	Response
Bid Price >		0		<input type="text"/>

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

# Event Details (cont.)

## State of Ohio

<b>Event ID</b> DAS01-OT00908347	<b>Format</b> Sell	<b>Type</b> RFx	<b>Page</b> 4
<b>Event Round</b> 1	<b>Version</b> 1		
<b>Event Name</b> Laundry Services for Northcoast Behavioral Healthc			
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**Contact:**  
**Phone:**  
**Email:**

**Line: 3** **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** Pillow Cases

Question	UOM	Best	Worst	Response
Bid Price >		0		<input type="text"/>

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line: 4** **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** Wash Cloths

Question	UOM	Best	Worst	Response
Bid Price >		0		<input type="text"/>

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line: 5** **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** Bath Towels

Question	UOM	Best	Worst	Response
Bid Price >		0		<input type="text"/>

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line: 6** **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** Pajama Tops M-L

**Comments:** - Bids for Pajama Tops sizes XL-6X should be entered in the General Questions section.



# Event Details (cont.)

## State of Ohio

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**Contact:**  
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**Email:**

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 10 **Item ID:** **UOM:** Each

**Required:** Yes **Reserve Price:** No

**Description:** Curtains (Laundry Only)

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 11 **Item ID:** **UOM:** Each

**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Flat Sheets

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 12 **Item ID:** **UOM:** Each

**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Fitted Sheets

# Event Details (cont.)

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**Contact:**  
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**Email:**

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 13 **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Pillow Cases

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 14 **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Wash Cloths

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 15 **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Bath Towels

# Event Details (cont.)

## State of Ohio

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**Contact:**  
**Phone:**  
**Email:**

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line: 16 Item ID:** UOM: Each  
**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Pajama Tops M-L  
**Comments:** - Bids for REPLACEMENT Pajama Tops sizes XL-6X should be entered in the General Questions section.

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line: 17 Item ID:** UOM: Each  
**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Pajama Bottoms M-L  
**Comments:** - Bids for REPLACEMENT Pajama Bottoms sizes XL-6X should be entered in the General Questions section.

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

Price Components				
Component	UOM	Unit Price	Component Quantity	Component Price

**Line: 18 Item ID:** UOM: Each  
**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Blankets

# Event Details (cont.)

## State of Ohio

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
DAS01-OT00908347	Sell	RFx	9
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
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10/31/2014 08:00:00 EST		11/26/2014 13:00:00 EST	

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**Contact:**  
**Phone:**  
**Email:**

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

### Price Components

Component	UOM	Unit Price	Component Quantity	Component Price

**Line:** 19 **Item ID:** **UOM:** Each  
**Required:** Yes **Reserve Price:** No

**Description:** REPLACE Laundry Bags

Question	UOM	Best	Worst	Response
Bid Price >		0		

Required: Yes Mandatory Response: No

### Price Components

Component	UOM	Unit Price	Component Quantity	Component Price

# Event Details (cont.)

## State of Ohio

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
DAS01-OT00908347	Sell	RFx	10
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
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10/31/2014 08:00:00 EST		11/26/2014 13:00:00 EST	

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**Contact:**  
**Phone:**  
**Email:**

## Bidder Information

<b>Firm Name:</b>		
<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
<b>Phone #:</b>	<b>Fax #:</b>	
<b>Street Address:</b>		
<b>City &amp; State:</b>	<b>Zip Code:</b>	
<b>Email:</b>		

# Event Details (cont.)

## State of Ohio

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
DAS01-OT00908347	Sell	RFx	11
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
<b>Start Time</b>		<b>Finish Time</b>	
10/31/2014 08:00:00 EST		11/26/2014 13:00:00 EST	

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**Bids allowed in other currency:** No

**Contact:**  
**Phone:**  
**Email:**

## Appendix A - Line Specifications

**Line:** 1 **Item ID:** **UOM:** Each  
**Description:** Flat Sheets

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 2 **Item ID:** **UOM:** Each  
**Description:** Fitted Sheets

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 3 **Item ID:** **UOM:** Each  
**Description:** Pillow Cases

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

# Event Details (cont.)

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<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
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**Contact:**  
**Phone:**  
**Email:**

### Shipping Information

**Schedule:** 1  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Ship To:**

**Line:** 4 **Item ID:**  
**Description:** Wash Cloths

**UOM:** Each

### Item Specifications

**Manufacturer:**  
**Item Length:** 0  
**Item Width:** 0  
**Item Volume:** 0  
**Item Weight:** 0  
**Item Size:**

**Mfg Item ID:**  
**Item Height:** 0  
**Dimension UOM:**  
**Volume UOM:**  
**Weight UOM:**  
**Item Color:**

### Shipping Information

**Schedule:** 1  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Ship To:**

**Line:** 5 **Item ID:**  
**Description:** Bath Towels

**UOM:** Each

### Item Specifications

**Manufacturer:**  
**Item Length:** 0  
**Item Width:** 0  
**Item Volume:** 0  
**Item Weight:** 0  
**Item Size:**

**Mfg Item ID:**  
**Item Height:** 0  
**Dimension UOM:**  
**Volume UOM:**  
**Weight UOM:**  
**Item Color:**

### Shipping Information

**Schedule:** 1  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Ship To:**

**Line:** 6 **Item ID:**  
**Description:** Pajama Tops M-L

**UOM:** Each

# Event Details (cont.)

## State of Ohio

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DAS01-OT00908347	Sell	RFx	13
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1	1		
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**Contact:**  
**Phone:**  
**Email:**

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 7 **Item ID:**  
**Description:** Pajama Bottoms M-L

**UOM:** Each

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 8 **Item ID:**  
**Description:** Blankets

**UOM:** Each

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

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### Shipping Information

**Schedule:** 1 **Ship To:**  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Line:** 9 **Item ID:** **UOM:** Each  
**Description:** Laundry Bags

### Item Specifications

**Manufacturer:** **Mfg Item ID:**  
**Item Length:** 0 **Item Height:** 0  
**Item Width:** 0 **Dimension UOM:**  
**Item Volume:** 0 **Volume UOM:**  
**Item Weight:** 0 **Weight UOM:**  
**Item Size:** **Item Color:**

### Shipping Information

**Schedule:** 1 **Ship To:**  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Line:** 10 **Item ID:** **UOM:** Each  
**Description:** Curtains (Laundry Only)

### Item Specifications

**Manufacturer:** **Mfg Item ID:**  
**Item Length:** 0 **Item Height:** 0  
**Item Width:** 0 **Dimension UOM:**  
**Item Volume:** 0 **Volume UOM:**  
**Item Weight:** 0 **Weight UOM:**  
**Item Size:** **Item Color:**

### Shipping Information

**Schedule:** 1 **Ship To:**  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Line:** 11 **Item ID:** **UOM:** Each  
**Description:** REPLACE Flat Sheets

# Event Details (cont.)

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### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 12 **Item ID:**  
**Description:** REPLACE Fitted Sheets

**UOM:** Each

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 13 **Item ID:**  
**Description:** REPLACE Pillow Cases

**UOM:** Each

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

# Event Details (cont.)

## State of Ohio

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
DAS01-OT00908347	Sell	RFx	16
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
<b>Start Time</b>		<b>Finish Time</b>	
10/31/2014 08:00:00 EST		11/26/2014 13:00:00 EST	

**Bidder:** KAPS GOLD LLC  
LIQUOR AGENCY 757  
358 ENON RD  
ENON OH 45323  
United States

**Submit To:** Electronic Submission online at  
<https://sourcing.fin.oaks.ohio.go>

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Contact:**  
**Phone:**  
**Email:**

### Shipping Information

**Schedule:** 1 **Ship To:**  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Line:** 14 **Item ID:**  
**Description:** REPLACE Wash Cloths

**UOM:** Each

### Item Specifications

**Manufacturer:** **Mfg Item ID:**  
**Item Length:** 0 **Item Height:** 0  
**Item Width:** 0 **Dimension UOM:**  
**Item Volume:** 0 **Volume UOM:**  
**Item Weight:** 0 **Weight UOM:**  
**Item Size:** **Item Color:**

### Shipping Information

**Schedule:** 1 **Ship To:**  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Line:** 15 **Item ID:**  
**Description:** REPLACE Bath Towels

**UOM:** Each

### Item Specifications

**Manufacturer:** **Mfg Item ID:**  
**Item Length:** 0 **Item Height:** 0  
**Item Width:** 0 **Dimension UOM:**  
**Item Volume:** 0 **Volume UOM:**  
**Item Weight:** 0 **Weight UOM:**  
**Item Size:** **Item Color:**

### Shipping Information

**Schedule:** 1 **Ship To:**  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Line:** 16 **Item ID:**  
**Description:** REPLACE Pajama Tops M-L

**UOM:** Each

# Event Details (cont.)

## State of Ohio

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
DAS01-OT00908347	Sell	RFx	17
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
<b>Start Time</b>		<b>Finish Time</b>	
10/31/2014 08:00:00 EST		11/26/2014 13:00:00 EST	

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ENON OH 45323  
United States

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**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Contact:**  
**Phone:**  
**Email:**

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 17 **Item ID:** **UOM:** Each  
**Description:** REPLACE Pajama Bottoms M-L

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	
<b>Quantity:</b>	1		
<b>Due Date:</b>			
<b>Freight Terms:</b>			
<b>Ship Via:</b>			

**Line:** 18 **Item ID:** **UOM:** Each  
**Description:** REPLACE Blankets

### Item Specifications

<b>Manufacturer:</b>		<b>Mfg Item ID:</b>	
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

# Event Details (cont.)

## State of Ohio

<b>Event ID</b> DAS01-OT00908347	<b>Format</b> Sell	<b>Type</b> RFx	<b>Page</b> 18
<b>Event Round</b> 1	<b>Version</b> 1		
<b>Event Name</b> Laundry Services for Northcoast Behavioral Healthc			
<b>Start Time</b> 10/31/2014 08:00:00 EST		<b>Finish Time</b> 11/26/2014 13:00:00 EST	

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**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Contact:**  
**Phone:**  
**Email:**

### Shipping Information

**Schedule:** 1  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Ship To:**

**Line:** 19 **Item ID:**  
**Description:** REPLACE Laundry Bags

**UOM:** Each

### Item Specifications

**Manufacturer:**  
**Item Length:** 0  
**Item Width:** 0  
**Item Volume:** 0  
**Item Weight:** 0  
**Item Size:**

**Mfg Item ID:**  
**Item Height:** 0  
**Dimension UOM:**  
**Volume UOM:**  
**Weight UOM:**  
**Item Color:**

### Shipping Information

**Schedule:** 1  
**Quantity:** 1  
**Due Date:**  
**Freight Terms:**  
**Ship Via:**

**Ship To:**

# Event Details (cont.)

## State of Ohio

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
DAS01-OT00908347	Sell	RFx	19
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Laundry Services for Northcoast Behavioral Healthc			
<b>Start Time</b>		<b>Finish Time</b>	
10/31/2014 08:00:00 EST		11/26/2014 13:00:00 EST	

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**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Contact:**  
**Phone:**  
**Email:**

## Appendix B - Terms & Conditions

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1. DAS will provide notice of intended purchases via e-mail. It is imperative that you provide and maintain the correct e-mail address.

Documents to all eBid events contain a time that reflects a 24 hour time format. (Example: 16:59:00).

All information transmitted and received via the Internet shall be considered public record, subject to public release and inspection. DAS makes no representations as to the confidentiality of such information.

In no event shall the State be liable for any damages whatsoever arising out of or in connection with the use or performance of information transmitted and received between the State and any user. The publication of your information could include technical inaccuracies or typographical errors.

The Department of Administrative Services reserves the right to request any information regarding the financial status of any applicant or company, and may request references deemed necessary for registration and/or awarding of the contract(s).

The Department of Administrative Services will provide up-to-date training and reference materials on its website ([www.procure.ohio.gov](http://www.procure.ohio.gov)). It is your responsibility to review these materials in the Help & Reference Materials section (<http://www.procure.ohio.gov/proc/help.asp>) for the most current eBid system procedures.