	Quantity Purchase Agreement With The State Of Indiana		ent QPA Number 0013760	Page 1 of 2
) (a a da a		Requisition Nbr.:	Feminine Care Proc	lucts
Vendor	PAUL HEMMING	Effective Date:	06/24/2015	
Remit to:	PACIFIC CARE PRODUCTS	Expiration Date:	08/30/2019	
	540 HOWARD ST	Agency Number:		
	SAN FRANCISCO CA 94105	Facility:	ASA-15-058	
		Vendor ID:	0000269961	
		Vendor Telephone Nb	r:	
Name and	PAUL HEMMING	Name Of Contact Pers	5:	
Address	PACIFIC CARE PRODUCTS	Contact Email:		
of Vendor:	540 HOWARD ST	FAX Number:		
	SAN FRANCISCO CA 94105			

In accordance with your bid, submitted in response to the above referenced solicitation, the Vendor agrees that the Indiana Department of Administration, Procurement Division, has the option to purchase the items listed below under the terms of this agreement.

The Vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration of the QPA but issued prior to the expiration date. The quantity listed herein is an estimate of the requirements. The state may order substantially more or substantially less pursuant to the terms of this agreement. Orders are to be delivered only upon receipt of properly approved Quantity Purchase Award Release.

Line Number Quantity UNIT

**Article and Description** 

**Unit Price** 

This is an award of a Quantity Purchase Agreement for Feminine Care Products.

The company is Paul Hemming -- doing business as Pacific Care Products.

Vendor Contact Information: Company Representative: Wendy Phone: 415.543.4999 Fax: 415.543.4994 E-mail: PCProducts@yahoo.com

State of Indiana QPA Contact Information: Contract Manager: Ann Walker Phone: 317.234.2142 E-mail: anwalker2@idoa.in.gov

The vendor agrees to charge these prices for any products ordered on any QPA release received after the expiration date, but issued prior to the expiration date, and postmarked no later than 14 business days after the QPA's expiration date.

Quantities were estimated and actual usage could be substantially more or less.

The awarded vendor must maintain, at a minimum the information listed below in excel format and supplied to the State within one week of the request.

The report must include purchases from State Agencies and any Political Subdivision's purchases.

Entity Name

\* Entity Address

\* Date of Order

- \* Purchase Order Number
- \* Description of Goods Ordered

\* Quantity

\* Order Total

Delivery will be 15-30 days after receipt of order.

1	99,999,999.00 CS	00000000100231654 Pad,Maxi,Non-Vended,Super, Total Absorbency,134-160 Grams,Overall Weight 11.6-15 Grams,Overall Length 9"-9.6",Width 2.5"-3",Thickness .34"-7 Straight,non-idividually wrapped, 12/pkg (288/cs)	13.4106
2	99,999,999.00 CS	00000000100231655 Pad,Maxi,Non-Vended,Super,Total Absorbency 134-160 Grams,Overall Weight 11.6-15 Grams,Overall Length 9"-9.6",Width 2.5"-3",Thickness .34"7",Straight and Individually Packaged,12/pkg (288/cs)	13.5857
3	99,999,999.00 CS	00000000100231656 Pad, Super Plus/Maximum Protection, Non-Vended, Total Absorbency, 150-180 Grams, Overall Weight 13-16 Grams, Overall Length 9"-10.5",Width 2.5"-3", Minimum Thickness 0.6"- 0.9" Straight, 12/pkg (288/cs)	15.4500
4	99,999,999.00 CS	00000000100231657 Pad, Super Plus/Maximum Protection, Non-Vended, Total Absorbency, 150-180 Grams, Overall Weight 13-16 Grams, Overall Length 9"-10.5",Width 2.5"-3", Minimum Thickness 0.6"- 0.9", Straight and Individually Packaged, Packed 12/pkg (288/cs)	16.9126
5	99,999,999.00 CS	00000000100231659 Tampon, Regular Absorbency, Cardboard	44.2900

Vendor Remit to:	Quantity Purchase Agreemen With The State Of Indiana PAUL HEMMING PACIFIC CARE PRODUCTS 540 HOWARD ST SAN FRANCISCO CA 94105	Qty Purchase Agreement QPA Number00000000000000000000000013760Requisition Nbr.:Feminine Care PrEffective Date:06/24/2015Expiration Date:08/30/2019Agency Number:Facility:Facility:ASA-15-058Vendor ID:0000269961Vendor Telephone Nbr:		Page 2 of 2 roducts
Name and Address of Vendor:	PAUL HEMMING PACIFIC CARE PRODUCTS 540 HOWARD ST SAN FRANCISCO CA 94105	Name Of Contact Pers Contact Email: FAX Number:		

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Line Number Quantity	<b>UNIT</b> Applicator,IndivWrapped	Article and Description	Unit Price
	The following UN/CEFACT L Common Codes are used in CS Case		

Signature of Purchasing Officer		Typed Name	Signature Of Approval Office Of the State Attorney General	
		Date Signed	Typed Name	Date Signed
Authorized Signature Authorized Signature Procurement Division 402 West Washington Street, Rm W468 Indianapolis, Indiana 46204 Telephone: (317) 232-3150			I	