



STATE OF NEW JERSEY
 PROCUREMENT BUREAU
 33 WEST STATE ST 9TH FL TRENTON, NJ 08625-0230
 TERM CONTRACT

CLIA WAVED BLOOD LEAD
 ANALYZER

NUMBER : A87487
 DATE : 07/31/14
 BUYER : PAT LOCANE
 PHONE : (609) 633-6098
 EFFECTIVE DATE : 08/01/14
 EXPIRATION DATE : 07/30/17
 T-NUMBER : T2991
 CONTRACTOR : MAGELLAN DIAGNOSTIS INC

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MAGELLAN DIAGNOSTIS INC
 22 ALPHA ROAD
 CHELMSFORD MA 01824-4171

VENDOR NO. : [REDACTED]
 VENDOR PHONE : (978)250-7121
 FEIN/SSN : [REDACTED]
 REQ AGENCY : 822050
 PROCUREMENT BUREAU
 AGENCY REQ NO. :
 PURCH REQ NO. : 1042051
 FISCAL YEAR : 15
 COMMODITY CODE : 49043
 SOLICITATION # : 23521
 BID OPEN DATE : 06/11/14

TERM CONTRACT FROM: 08/01/14 TO: 07/30/17 ESTIMATED AMOUNT: \$ 1,700,000.00

1. ORDERING PERIOD: CONTRACT BEGINNING ORDERING PERIOD IS:08/01/14
 CONTRACT ENDING ORDERING PERIOD DATE IS:07/30/17
2. F.O.B. POINT: DESTINATION
3. DELIVERY DELIVERY WILL BE MADE WITHIN007 DAYS ARO UNLESS
 SPECIFIED DIFFERENTLY ON EACH LINE OR UNLESS AN ALTERNATE
 DELIVERY SCHEDULE IS INDICATED. AN ALTERNATE DELIVERY
 SCHEDULE IS ENCLOSED HEREIN:NO
4. CASH DISCOUNT TERMS: CASH DISCOUNT TERMS ARE00.00% DAYS.
5. PERFORMANCE BOND: PERFORMANCE BOND REQUIRED:NO ; DATE REQUIRED00/00/00
 AMOUNT \$0 ; PERCENT OF CONTRACT 0.00%
6. RETAINAGE: RETAINAGE PERCENT IS 0.00%
7. COOPERATIVE PROC: THIS CONTRACT IS AVAILABLE FOR POLITICAL SUBDIVISION USE UNDER
 THE COOPERATIVE PROCUREMENT PROGRAMYES
8. BID REFERENCE NO: YOUR BID REFERENCE NUMBER IS:
9. AWARDED LINES: YOU WERE AWARDED 2 LINES FROM THE SOLICITATION NUMBER23521 .
 THESE LINES ARE INCLUDED AS A PART OF THIS CONTRACT.

ALL TERMS AND CONDITIONS AS A PART OF SOLICITATION NUMBER23521 INCLUDING ANY ADDENDA
 THERETO AND ALSO INCLUDING THE BIDDER'S PROPOSAL AS ACCEPTED BY THE STATE ARE
 INCLUDED HEREIN BY REFERENCE AND MADE PART HEREOF EXCEPT AS SPECIFIED HEREIN

THIS IS NOTICE OF ACCEPTANCE BY THE DIRECTOR OF THE DIVISION OF PURCHASE AND
 PROPERTY ACTING FOR AND ON BEHALF OF THE STATE OF NEW JERSEY, OF THE OFFER
 REFERENCED ABOVE BY YOUR FIRM WHOSE NAME AND ADDRESS APPEAR ABOVE.


 BUYER


 DATE

*** ORIGINAL SIGNED ***

 FOR DIRECTOR DATE
 DIVISION OF PURCHASE AND PROPERTY

USING AGENCIES CANNOT PROCESS INVOICES FOR PAYMENT OF DELIVERED
 GOODS AND/OR SERVICES UNTIL THE PROPERLY EXECUTED BOND HAS BEEN
 RECEIVED AND ACCEPTED BY THE PURCHASE BUREAU.

PURCHASE BUREAU (FILE COPY)

PRICE SHEET	TERM CONTRACT
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PROCUREMENT BUREAU PURCHASE BUREAU STATE OF NEW JERSEY 33 WEST STATE ST 9TH FL PO BOX 230 TRENTON NJ 08625-0230	NUMBER : A87467 T-NUMBER : T2991 CONTRACTOR: MAGELLAN DIAGNOSTIS INC	PAGE 2
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	ESTIMATED QUANTITY	UNIT	UNIT PRICE OR PERCENT DISCOUNTS	EXTENDED AMT IF APPLICABLE
00001	UNLESS SPECIFIED OTHERWISE BELOW: SHIP TO: R1 STATE-WIDE ONLY COMMODITY CODE: 490-43-086875 [LABORATORY EQUIPMENT, ACCESSORIES AND...] ITEM DESCRIPTION: ALL INCLUSIVE COST FOR ONE CLIA-WAIVED LEADCARE II BLOOD LEAD ANALYZER BRAND: MAGELLAN MODEL: LEADCARE II	1	EACH	\$ 1,751.00	
00002	COMMODITY CODE: 490-43-086876 [LABORATORY EQUIPMENT, ACCESSORIES AND...] ITEM DESCRIPTION: ALL INCLUSIVE COST FOR ONE COMPLETE LEADCARE II TEST KIT 48 PER BOX	1	BOX	\$ 306.00	