Authorize the first of three one-year renewal options for a one-year master agreement for laboratory supplies, IFB No. 2019-036-6800, with Fisher Scientific Company, LLC - Estimated amount - $344,020.92

Briefing Date: Jun 2 2020
Funding Source: General Fund and Grant Fund
Originating Department: Purchasing
Prepared by: Debra Morris,
Recommended by: Michael Frosch, Director of Purchasing

BACKGROUND INFORMATION:
This action does not encumber funds; the purpose of a master agreement is to establish firm pricing for goods, for a specific term, which are ordered on an as needed basis. The estimated amount is intended as guidance rather than a cap on spending under the agreement so that actual need combined with the amount budgeted will determine the amount spent under this agreement.

Dallas County Health and Human Services (HHS) and Southwest Institute of Forensic Science (SWIFS) are the user departments of this agreement. Items purchased allow for the timely response of testing specimens received in the HHS and SWIFS laboratories ensuring Dallas County to continue to provide a safe and healthy environment for our citizens.

A master agreement allows for the acquisition of laboratory items to be procured in a more efficient and cost effective manner.

Prior Action
On June 18, 2019, Commissioners Court authorized a one-year master agreement with three one-year renewal options through Court Order 2019-0622.

OPERATIONAL IMPACT:
N/A

FINANCIAL IMPACT:
Fiscal year 2019 spend total - $1,189,280.00 General Fund and Grant Fund subject to annual appropriations.

LEGAL IMPACT:
N/A

PROJECT SCHEDULE:
The master agreement is effective from June 24, 2020 through June 23, 2021. There are two additional renewal options in this master agreement.

**SBE PARTICIPATION:**

The original contract was approved with 0% SBE Participation. No goals are assigned to the contract extension.

**ADMINISTRATIVE PLAN COMPLIANCE:**

This request is consistent with the County Administrative Plan Vision No. 2 as it strives to keep Dallas County a healthy community, by providing laboratory testing to Dallas County communities and residents.

**RECOMMENDATION:**

Authorize the first of three one-year renewal options for a one-year master agreement for laboratory supplies, IFB No. 2019-036-6800, with Fisher Scientific Company, LLC - Estimated amount - $344,020.92

**MOTION:**

On a motion made by TBD, and seconded by TBD, the following order will be voted on by the Commissioners Court of Dallas County, State of Texas:

Be it resolved and ordered that the Dallas County Commissioners Court does hereby authorize the first of three one-year renewal options for a one-year master agreement for laboratory supplies, IFB No. 2019-036-6800, with Fisher Scientific Company, LLC - Estimated amount - $344,020.92

**CONTRACT DETAILS:**

- **Contract Title:** Master Agreement for Laboratory Supplies and Related Items
- **Description:** Master Agreement for Laboratory Supplies and Related Items
- **Transaction Type:** Change/Amendment
- **Contract Number:** 2019-036-6800
- **Total Cost:** $344,020.92
- **Start Date:** June 24, 2020
- **Expiration Date:** June 23, 2021
- **Vendor:** Fisher Scientific Company, LLC

**ATTACHMENTS:**

- Fisher letter - 2020 - 1st. Extension
- Spargo amended Fisher evaluation April 2020
- IFB No. 2019-036-6800 -Huang
- Fisher forms
- Fisher EEO1 form
April 17, 2020

Fisher Scientific Company, LLC
Attn.: Mr. Jim Var
jim.var@thermofisher.com


Dear Mr. Var,

The aforementioned contract between Dallas County Fisher Scientific Company, LLC, will expire on June 23, 2020. The Dallas County Purchasing Department would like to exercise the extension option of this contract for an additional twelve (12) month period to include terms and conditions set forth in the original contract award. If you are interested in extending the current contract, please complete the form below and return no later than April 3, 2020. If you desire to extend this contract we will also need an updated EEO1 form, insurance certificate, 2270 form, 2252 form and 1295 Form. (Forms are attached)

Please check one:

Yes [✓] I agree to extend the contract with Dallas County at the original terms and agreements of aforementioned contract for a twelve (12) month period (June 24, 2020 through June 23, 2021)

No ______ I cannot extend the contract beyond June 23, 2020

Signed by: [Signature]

Company Name: Fisher Scientific Company, LLC

Email: angela.rivera@thermofisher.com

Should you have any questions, please feel free to contact my office.

Sincere regards,

Debra Morris
Debra Morris,
Contracts Specialist
Dallas County Purchasing Department
Ph#214-653-7933
Rev. 1
3.11.19
Extension Ltr. to Vendor
January 27, 2020

TO: Dr. Erin Spargo, Southwest Institute of Forensic Sciences
   Dr. Philip Huang, Health and Human Services

FROM: Laura Ortiz, Buyer

SUBJECT: IFB No. 2019-036-6800 – Purchase of laboratory items and related products – First Renewal Option

The aforementioned master contract awarded to Fisher Scientific Company, LLC is due to expire on June 18, 2020. This is the first renewal option on this contract, your department has three options: (Please initial one only and sign below).

Option 1: [ ] Exercise the renewal option for a twelve (12) month period based on existing terms and conditions, no changes are required or allowed to the master contract. Services currently performed by the Contractor are in compliance with contract requirements.

Option 2: [ ] Re-bid this master contract. If your department chooses to re-bid the contract, please update any required revisions to the specifications, terms, conditions, and requirements.

Option 3: [ ] The services and/or goods stated in this master contract are no longer required by this department. Please cancel all future solicitation requests relating to this contract.

Please sign and return this form with all comments and/or revisions (if any) to the Purchasing Department, fax number 214-653-7449, Attn: Laura Ortiz, no later than January 31, 2020. Should you have any questions, please contact me at 214-653-5639.

Your cooperation is greatly appreciated.

Laura Ortiz, Buyer
Dallas County Purchasing Dept.
Founders Square
900 Jackson Street Ste. 680
Dallas, TX 75202
O: 214.653.7431 | F: 214.653.7449
laura.ortiz@dallascounty.org
Note: If your department chooses to extend, how would you rate vendor performance for the requested services and/or products over the past twelve (12) months? (This survey information is required for each contract per Commissioners Court).

Fisher Scientific Company, LLC

<table>
<thead>
<tr>
<th>QUESTION</th>
<th>RATING</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Was the service provided compliant with the contractual terms, conditions, and pricing?</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>2. Was the product or service delivered in a timely manner?</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>3. How would you rate each vendor's quality of work performed?</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>4. Was the vendor responsive to Dallas County questions, inquires, or problems?</td>
<td>1</td>
<td>X</td>
</tr>
<tr>
<td>5. How would you rate each vendor's overall quality of work performed?</td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>YES NO</td>
<td></td>
<td>X</td>
</tr>
</tbody>
</table>

6. Have you had any problems or issues with the current vendor? If yes, please state the problem or issue.

Have had issues with responsiveness over the course of the contract, but this has greatly improved over the past couple of months.

Please elaborate on any areas of concern or indicate improvements that may be required.

Attachment: Only if necessary.

CC: IFB No. 2019-036-6800 – Purchase of laboratory items and related products – First Renewal Option
January 27, 2020

TO: Dr. Erin Spargo, Southwest Institute of Forensic Sciences  
   Dr. Philip Huang, Health and Human Services

FROM: Laura Ortiz, Buyer

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Your cooperation is greatly appreciated.

Laura Ortiz, Buyer  
Dallas County Purchasing Dept.  
Founders Square  
900 Jackson Street Ste. 680  
Dallas, TX 75202  
O: 214.653.7431 | F: 214.653.7449  
laura.ortiz@dallascounty.org
Note: If your department chooses to extend, how would you rate vendor performance for the requested services and/or products over the past twelve (12) months? (This survey information is required for each contract per Commissioners Court).

**Fisher Scientific Company, LLC**

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<th>RATING</th>
<th>COMMENTS</th>
</tr>
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<tbody>
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<td>X</td>
<td></td>
</tr>
<tr>
<td>2. Was the product or service delivered in a timely manner?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>3. How would you rate each vendor's quality of work performed?</td>
<td>X</td>
<td>Delayed responses for quotes since Covid-19</td>
</tr>
<tr>
<td>4. Was the vendor responsive to Dallas County questions, inquires, or problems?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>5. How would you rate each vendor's overall quality of work performed?</td>
<td>X</td>
<td></td>
</tr>
<tr>
<td>6. Have you had any problems or issues with the current vendor? If yes, please state the problem or issue.</td>
<td>X</td>
<td></td>
</tr>
</tbody>
</table>

Please elaborate on any areas of concern or indicate improvements that may be required.

Signature: ___________________________  Date: 1/29/2020

Printed Name: Philip Huang

Attachment: Only if necessary.

CC: IFB No. 2019-036-6800 – Purchase of laboratory items and related products – First Renewal Option
CERTIFICATE OF INTERESTED PARTIES

Complete Nos. 1 - 4 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

1 Name of business entity filing form, and the city, state and country of the business entity’s place of business.
   Fisher Scientific Company L.L.C.
   Pittsburgh, PA United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
   Dallas County Purchasing Department

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
   IFB No. 2019-036-6800
   Laboratory Items and Related Items 1st Contract Extension

4 Name of Interested Party                  City, State, Country (place of business)                  Nature of interest (check applicable)
                                                                                      Controlling  Intermediary

5 Check only if there is NO Interested Party.  

6 UNSWORN DECLARATION

My name is ________________________________, and my date of birth is _____________.

My address is _________________________, _________________________, _________________________, _________________________.

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _________________________County, State of _________________________, on the ______day of _____________, 20_____.

Signature of authorized agent of contracting business entity (Declarant)

Karen Morton
TEXAS GOVERNMENT CODE CHAPTER 2270 VERIFICATION FORM

1. _________________________________(Person name), the undersigned representative of (Company or Business name) Fisher Scientific Company L.L.C. _________________________________ (hereafter referred to as “company”) being an adult over the age of eighteen (18) years of age, do hereby depose and verify under oath that the company named-above, under the provisions of Subtitle F, Title 10, Government Code Chapter 2270:

1. Does not boycott Israel currently; and

2. Will not boycott Israel during the term of the contract between company and-Dallas County, Texas.

Pursuant to Section 2270.001, Texas Government Code:

1. “Boycott Israel” means refusing to deal with, terminating business activities with, or otherwise taking any action that is intended to penalize, inflict economic harm on, or limit commercial relations specifically with Israel, or with a person or entity doing business in Israel or in an Israeli-controlled territory, but does not include an action made for ordinary business purposes; and

2. “Company” means a for-profit sole proprietorship, organization, association, corporation, partnership, joint venture, limited partnership, limited liability partnership, or any limited liability company, including a wholly owned subsidiary, majority-owned subsidiary, parent company or affiliate of those entities or business associations that exist to make a profit.

Signature
Karen Morton
Government Contracts Specialist
Title

Karen Morton
Printed Name
April 30, 2020
Date

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Karen Morton, this the 30th day of April, 2020, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Donna Beck
Printed name of officer administering oath

Title of officer administering oath

Commonwealth of Pennsylvania - Notary Seal
Donna L. Beck, Notary Public
Allegheny County
My commission expires July 9, 2023
Commission number 1200780
Member, Pennsylvania Association of Notaries
TEXAS GOVERNMENT CODE CHAPTER 2252 CERTIFICATION FORM

1. Karen Morton _____________________________ (Person name), the undersigned representative of (Company or Business name) Fisher Scientific Company L. L. C. _____________________________ (hereafter referred to as “company”) being an adult over the age of eighteen (18) years of age, do hereby depose and verify under oath that the company named above, under the provisions of Subtitle F, Title 10, Government Code Chapter 2252:

1. IS NOT listed on the website of the Comptroller of the State of Texas concerning the listing of companies that are identified under Section 806.051, 807.051 or Section 2253.153; and

2. Will not be listed during the term of the contract between company and Dallas County, Texas.

Pursuant to Section 2252.152 and 2252.153, Texas Government Code:

Sec. 2252.152. CONTRACTS WITH COMPANIES ENGAGED IN BUSINESS WITH IRAN, SUDAN, OR FOREIGN TERRORIST ORGANIZATION PROHIBITED. A governmental entity may not enter into a governmental contract with a company that is identified on a list prepared and maintained under Section 806.051, 807.051, or 2252.153.

Sec. 2252.153. LISTED COMPANIES. The comptroller shall prepare and maintain, and make available to each governmental entity, a list of companies known to have contracts with or provide supplies or services to a foreign terrorist organization.

Karen Morton _____________________________
Signature

Government Contracts Specialist _____________________________
Printed Name

April 30, 2020 _____________________________
Date

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

Karen Morton _____________________________
Signature of authorized agent of contracting business entity

Sworn to and subscribed before me, by the said Karen Morton _____________________________, this the 30th day of April, 2020, to certify which, witness my hand and seal of office.

Donna L. Beck _____________________________
Signature of officer administering oath

Karen L. Beck, Notary Public
Allegheny County
My commission expires July 9, 2023
Commission number 1208780

Donna L. Beck, Notary Public
Allegheny County
My commission expires July 9, 2023
Commission number 1208780

NOTARY
## Section D - Employment Data

Employment at this establishment. Report all permanent full and part-time employees including apprentices and on-the-job trainees unless specifically excluded as set forth in the instructions. Enter the appropriate figures on all lines and in all columns. Blank spaces will be considered as zeros.

### Number of Employees (Report employees in only one category)

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Male</th>
<th>Female</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not-Hispanic or Latino</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hispanic or Latino</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>Female</td>
<td>White</td>
</tr>
<tr>
<td></td>
<td>A</td>
<td>B</td>
</tr>
<tr>
<td>Executives/Senior Level officials and Managers</td>
<td>1.1</td>
<td>0</td>
</tr>
<tr>
<td>First/Mid-Level Officials and Managers</td>
<td>1.2</td>
<td>3</td>
</tr>
<tr>
<td>Professionals</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Technicians</td>
<td>3</td>
<td>0</td>
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<tr>
<td>Sales Workers</td>
<td>4</td>
<td>0</td>
</tr>
<tr>
<td>Administrative Support Workers</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Craft Workers</td>
<td>6</td>
<td>0</td>
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<tr>
<td>Operatives</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>Laborers and Helpers</td>
<td>8</td>
<td>0</td>
</tr>
<tr>
<td>Service Workers</td>
<td>9</td>
<td>0</td>
</tr>
<tr>
<td>TOTAL</td>
<td>10</td>
<td>4</td>
</tr>
<tr>
<td>PREVIOUS YEAR TOTAL</td>
<td>11</td>
<td></td>
</tr>
</tbody>
</table>

1. Date(s) of payroll period used: ____________ (Omit on the Consolidated Report.)

## Section E - Establishment Information (Omit on the Consolidated Report)

What is the major activity of this establishment? (Be specific, i.e., manufacturing steel casings, retail grocer, wholesale plumbing supplies, title insurance, etc. Include the specific type of product or type of service provided, as well as the principal business or industrial activity.)

## Section F - Remarks

Use this item to give any identification data appearing on the last EEO-1 report which differs from that given above, explain major changes in composition of reporting units and other pertinent information.

## Section G - Certification

Check 1. All reports are accurate and were prepared in accordance with the instructions. (Check on Consolidated Report only.)

2. This report is accurate and was prepared in accordance with the instructions.

Name of Certifying Official: ____________
Title: Sr. Diversity & Inclusion Analyst
Signature: ____________
Date: ____________

Name of person to contact regarding this report: ____________
Title: ____________
Address (Number and Street): ____________
City and State: San Diego, CA
Zip Code: 92008
Telephone No. (including area code and extension): 760-918-3017
Email address: ____________

All reports and information obtained from individual reports will be kept confidential as required by Section 709(c) of Title VII.

WILLFULLY FALSE STATEMENTS ON THIS REPORT ARE PUNISHABLE BY LAW, U.S. CODE, TITLE 18, SECTIONS 1001-1005.

**Section D - EMPLOYMENT DATA**

**Number of Employees (Report employees in only one category)**

<table>
<thead>
<tr>
<th>Job Categories</th>
<th>Hispanic or Latino</th>
<th>Male</th>
<th>Female</th>
<th>Not-Hispanic or Latino</th>
<th>Female</th>
<th>Total Col. A-N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Executive/Senior Level</td>
<td>1</td>
<td>A</td>
<td>B</td>
<td>C</td>
<td>D</td>
<td>E</td>
</tr>
<tr>
<td>officials and Managers</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>F</td>
</tr>
<tr>
<td>First/Mid-Level Officials</td>
<td>1.2</td>
<td>G</td>
<td>H</td>
<td>I</td>
<td>J</td>
<td>K</td>
</tr>
<tr>
<td>and Managers</td>
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<tr>
<td>Professionals</td>
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<td>M</td>
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<td>Technicians</td>
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<tr>
<td>Sales Workers</td>
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<td>Workers</td>
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<tr>
<td>Craft Workers</td>
<td>6</td>
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<td>8</td>
<td></td>
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<td></td>
<td></td>
<td>W</td>
</tr>
<tr>
<td>Service Workers</td>
<td>9</td>
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<td>TOTAL</td>
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<td>Y</td>
<td>Z</td>
<td>AA</td>
<td>BB</td>
<td>CC</td>
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<tr>
<td>PREVIOUS YEAR TOTAL</td>
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</tr>
<tr>
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<td>11</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>EE</td>
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</tbody>
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1. Date(s) of payroll period used: ____________________________ (Omit on the Consolidated Report.)

**Section E - ESTABLISHMENT INFORMATION (Omit on the Consolidated Report)**

What is the major activity of this establishment? (Be specific, i.e., manufacturing steel casings, retail grocer, wholesale plumbing supplies, title insurance, etc. Include the specific type of product or type of service provided, as well as the principal business or industrial activity.)

**Section F - REMARKS**

Use this item to give any identification data appearing on the last EEO-1 report which differs from that given above, explain major changes in composition of reporting units and other pertinent information.

**Section G - CERTIFICATION**

Check One

1. All reports are accurate and were prepared in accordance with the instructions. (Check on Consolidated Report only.)

2. This report is accurate and was prepared in accordance with the instructions.

Name of Certifying Official: Letia Adeyemo
Title: Sr. Diversity & Inclusion Analyst
Signature: 
Date: 5/20/2009

Name of person to contact regarding this report: Letia Adeyemo
Title: 
Address (Number and Street): 
City and State: San Diego, CA
Zip Code: 92008
Telephone No. (including area code and extension): 760-918-3017
Email address: Letia.adeyemo@thermofisher.com

All reports and information obtained from individual reports will be kept confidential as required by Section 709(c) of Title VII WILLFULLY FALSE STATEMENTS ON THIS REPORT ARE PUNISHABLE BY LAW, U.S. CODE, TITLE 18, SECTION 1001

Description of Race and Ethnic Identification and Job Categories are found at http://www.eeoc.gov/employers/eeo1survey/2007instructions.cfm / Appendix 4, Race and Ethnic Identification / and Appendix 5, Description of Job Categories