

# SOLE SOURCE CERTIFICATION

VENDOR NAME: Stryker Sales Corporation

COMMODITY: (General Description): Medical Equipment (Stretchers)

INITIAL ALL ENTRIES BELOW THAT APPLY TO THE PROPOSED PURCHASE. ATTACH ADDITIONAL DATA OR SUPPORT DOCUMENTATION IF NECESSARY (MORE THAN ONE ENTRY WILL APPLY TO MOST SOLE SOURCE PRODUCTS OR SERVICES).

SOLE SOURCE CERTIFICATION:

1.  PARTS/EQUIPMENT CAN ONLY BE OBTAINED FROM ORIGINAL MANUFACTURER - NOT AVAILABLE THROUGH DISTRIBUTORS. (ITEMS 3,4,5, OR 6 MUST ALSO BE COMPLETED)
2.  ONLY AUTHORIZED AREA DISTRIBUTOR OF THE ORIGINAL MANUFACTURER. (ITEMS 3,4,5, OR 6 MUST ALSO BE COMPLETED)
3.  PROPRIETARY ITEM/SERVICE (EXPLAIN BELOW)
4.  PARTS/EQUIPMENT NOT INTERCHANGEABLE WITH SIMILAR PARTS OF ANOTHER MANUFACTURER (EXPLAIN BELOW)
5.  THIS IS THE ONLY KNOWN ITEM/SOURCE THAT WILL MEET THE SPECIALIZED NEEDS OF THIS DEPARTMENT OR PERFORM THE INTENDED FUNCTION. (EXPLAIN BELOW)
6.  PARTS/EQUIPMENT ARE REQUIRED FROM THIS VENDOR TO PROVIDE STANDARDIZATION (EXPLAIN BELOW)
7.  NONE OF THE ABOVE APPLY. EXPLANATION FOR SOLE SOURCE REQUEST IS DETAILED BELOW:

COMMENTS/EXPLANATIONS: (USE REVERSE SIDE IF NECESSARY)

We currently have 24 Stryker Ambulance Cots (power and manual). We purchased these to meet the specifications of the department to provide safety precautions to our employees and to the patient while being transported in an emergency situation.

THE BASIS OF THE FOREGOING, I RECOMMEND THAT COMPETITIVE PROCUREMENT BE WAIVED AND THAT THE SERVICE OR MATERIAL ON THE ATTACHED REQUISITION BE PURCHASED AS A SOLE SOURCE COMMODITY.

SIGNED: Cheryl Ellis  
DEPARTMENT DIRECTOR

DEPT/DIV: 001-5450

APPROVED: Larry M. Holt  
PURCHASING MANAGER

DATE: 8/13/2019

APPROVED: Jelly  
ASSISTANT COUNTY MANAGER BUDGET & FISCAL SERVICES

DATE: 8/14/19

\*\*PURCHASE OVER \$50,000

APPROVED: \_\_\_\_\_  
CHAIRMAN OF THE BOARD

DATE: \_\_\_\_\_