

SCANNED 3/1/22  
(5)

**WHATCOM COUNTY CONTRACT INFORMATION SHEET**

Whatcom County Contract No.  
**202011005-1**

Originating Department:	Executive
Division/Program: (i.e. Dept, Division and Program)	Emergency Medical Services
Contract or Grant Administrator:	Mike Hilley EMS Manager
Contractor's / Agency Name:	Stryker Corp.
Is this a New Contract? If not, is this an Amendment or Renewal to an Existing Contract? Yes <input checked="" type="radio"/> No <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #: _____	
Does contract require Council Approval? Yes <input checked="" type="radio"/> No <input type="radio"/> If No, include WCC: _____ Already approved? Council Approved Date: _____ (Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100)	
Is this a grant agreement? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, grantor agency contract number(s): _____ CFDA#: _____	
Is this contract grant funded? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, Whatcom County grant contract number(s): _____	
Is this contract the result of a RFP or Bid process? Yes <input type="radio"/> No <input checked="" type="radio"/> If yes, RFP and Bid number(s): Sole Source _____ Contract _____ Cost Center: 130100	
Is this agreement excluded from E-Verify? No <input type="radio"/> Yes <input checked="" type="radio"/> If no, include Attachment D Contractor Declaration form.	
If YES, indicate exclusion(s) below: <input type="checkbox"/> Professional services agreement for certified/licensed professional. <input type="checkbox"/> Goods and services provided due to an emergency <input type="checkbox"/> Contract work is for less than \$100,000. <input checked="" type="checkbox"/> Contract for Commercial off the shelf items (COTS). <input type="checkbox"/> Contract work is for less than 120 days. <input type="checkbox"/> Work related subcontract less than \$25,000. <input type="checkbox"/> Interlocal Agreement (between Governments). <input type="checkbox"/> Public Works - Local Agency/Federally Funded FHWA.	
Contract Amount:(sum of original contract amount and any prior amendments): \$ 468,316.48 per year 10 year (w/o tax)	Council approval required for; all property leases, contracts or bid awards <b>exceeding \$40,000</b> , and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, <b>except when:</b> 1. Exercising an option contained in a contract previously approved by the council. 2. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance. 3. Bid or award is for supplies. 4. Equipment is included in Exhibit "B" of the Budget Ordinance. 5. Contract is for manufacturer's technical support and hardware maintenance of electronic systems and/or technical support and software maintenance from the developer of proprietary software currently used by Whatcom County.
This Amendment Amount: \$ 12,966.67 per year 9 years (\$116,700.03 w/o tax)	
Total Amended Amount: \$ 481,283.15 per year w/o tax	
Summary of Scope: _____	
This is an amendment that corrects and adds two gurney's not previously included in the 2020 Master Contract as part of the maintenance and lease agreement for the EMS ALS360 Stryker Equipment Program. This amendment increases the contract by a total of \$116,700.03 (w/o tax).	
Term of Contract: January 1 to December 31 2022      Expiration Date: December 31, 2022	

Contract Routing:	1. Prepared by: Hilley	Date: 11-12-21
	2. Attorney signoff: Christopher Quinn	Date: 12/4/2021
	3. AS Finance reviewed: M Caldwell	Date: 1/5/22
	4. IT reviewed (if IT related):	Date: _____
	5. Contractor signed:	Date: _____
	6. Submitted to Exec.:	Date: _____
	7. Council approved (if necessary):	Date: _____
	8. Executive signed: _____	Date: 2-25-22
	9. Original to Council: _____	Date: 3-2-22

## Memorandum

Whatcom County Emergency Medical Services  
800 E. Chestnut St. Suite 3C  
Bellingham, WA 98282



### **Amendment No. 001 to Stryker Master Agreement 2110108727 ALS 360 Program**

This amendment to the Stryker Master Agreement is to increase the annualized contract amount from \$468,316.48 to \$481,283.00 for the remaining 9 Annualized payments. This is an annual increase of \$12,966.52 that adds (2) two additional gurneys already delivered but not included in the original contract amount.

This is an increase of the total gurney count from 54 to 56. The original order delivered 54 gurneys where two additional Stryker gurneys were already in service since November 2019 for a total of 56. However, upon delivery of the 54 new gurneys, it was not realized by Stryker that two gurneys' already in use and obtained in 2019 were not included in the original Master contract amount when the demonstration loaner gurneys were replaced with new gurneys. This increased contract amount includes maintenance, installation and replacement costs as part of the Master contract.

The two (2) additional gurney's and associated costs are shown in the yellow highlighted area on the updated Master Contract from Stryker.

#### **Original Master Contract**



WhatcomCountyW  
ashington-SCH001 (

#### **Updated Master Contract**



WhatcomCountyW  
ashington-UA001 to

Sincerely,

Mike Hilley  
Whatcom County EMS Manager



## Amendment No. 001 to Equipment Schedule No. 001 to Master Agreement Number 2110108727

Owner: Flex Financial, a division of  
Stryker Sales, LLC  
Address: 1901 Romence Road Parkway  
Portage, MI 49001

Customer: Whatcom County, Washington  
Address: 800 East Chestnut Street Suite 3C  
Bellingham, Washington 98225

**Check if applicable:**

<input checked="" type="checkbox"/>	Restated equipment:	See Part I on attached Exhibit A
<input checked="" type="checkbox"/>	Restated service coverage:	See Part II on attached Exhibit A
<input type="checkbox"/>	Additional term in months:	
<input checked="" type="checkbox"/>	New payment amount:	9 Annual Payments of \$481,283.15 (Plus applicable sales/use taxes)

Amendment Effective Date: Signature Date

Amendment proposal valid through last business day of November, 2021

Owner and Customer desire to amend the agreement described above (the "Agreement"), as follows:

- Restated equipment:** If checked above, the equipment described in Part I on Exhibit A is hereby restated as the "Equipment" subject to the terms and conditions of the Agreement, which if adding Equipment such added Equipment shall be shipped to Customer within a reasonable time after this Amendment is signed by Customer and returned to Owner.
- Restated service coverage:** If checked above, the service described in Part II-Service Coverage in the attached Exhibit A shall supersede and replace Part I-Service Coverage set forth in the original Exhibit A to the Agreement, effective as of the Amendment Effective Date.
- Additional term in months:** If checked above, the term of the Agreement is extended for the number of additional months described above and payments (as modified herein) shall continue to be due during such extension. If not checked above, the term of the Agreement will not be extended and the payments (as modified herein) shall be due during the remainder of the Term.
- New payment amount:** If checked above, commencing on the first date a payment is due under the Agreement subsequent to the Amendment Effective Date, the payments due under the Agreement shall be the New Payment Amount.
- New payment amount adjustment:** The New Payment Amount was calculated by Owner based, in part, on a rate reported in the "Interest rate swaps" section of Federal Reserve Statistical Release H-15 and in the event the Amendment Effective Date starts more than 30 days after Owner sends this Amendment to Customer, Owner may adjust the New Payment Amount once to compensate it, in good faith, for any increase in such rate.
- Insurance:** Customer agrees to provide proof of insurance with respect to any added Equipment in accordance with the terms of the Agreement.
- Miscellaneous:** All capitalized terms used but not defined in this Amendment will have the meanings given to them in the Agreement. The terms of this Amendment shall be effective for all purposes as of the Amendment Effective Date. Except to the extent modified by this Amendment, the terms and conditions of the Agreement will remain unchanged and shall continue in full force and effect. All terms and conditions of the Agreement are incorporated herein by reference thereto.

DocuSigned by: <b>Customer signature</b>	
Signature: <i>Satpal Singh Sidhu</i>	Date: 2/25/2022
Print name: 1192C7C18B664E3... Satpal Sidhu	
Title: County Executive	

DocuSigned by: <b>Accepted by Flex Financial, a division of Stryker Sales, LLC</b>	
Signature: <i>Devon Ivy</i>	Date: 2/25/2022
Print name: 272A1F94357543D... Devon Ivy	
Title: Financial Rep	

## Exhibit A to Amendment No. 001 to Equipment Schedule No. 001 to Master Agreement No. 2110108727

Customer name: Whatcom County, Washington

Delivery address: 800 East Chestnut Street Suite 3C Bellingham, Washington 98225, Bellingham, Washington 98225

### Part I - Equipment

#### Current equipment

Model No.	Description	Qty
650600000	POWER PRO AMBULANCE COT	54
639005550001	MTS POWER LOAD	7
99577-001957	LP15,EN,SPO2CO,3L/12L,EX,NIBP,CO2,TR,VR,BT,V4	18
41577-000288	LP15 ACCRY SHIPKIT,AHA,S	18
11577-000004	LI-ION CHARGER, STATION, STD POWER CORD	18
21330-001176	BATTERY PACK-LI-ION	54
11171-000082	RC-4, EMS, RAINBOW, PATIENT CABLE, 4FT, REF 4481	18
11171-000050	RAINBOW DCIP PED REUSABLE SENSOR, REF 2697,ROHS	18
11160-000019	NIBP CUFF- REUSEABLE,X-LARGE ADULT, BAYONET	18
11160-000017	NIBP CUFF-REUSEABLE,LARGE ADULT, BAYONET	18
11160-000013	NIBP CUFF-REUSEABLE,CHILD, BAYONET	18
11577-000002	KIT - CARRY BAG, MAIN BAG	18
11220-000028	TOP POUCH	18
11260-000039	KIT - CARRY BAG, REAR POUCH, 3RD EDITION	18
99576-000063	LUCAS 3, 3.1, IN SHIPPING BOX, EN	10
11576-000060	LUCAS BATTERY CHARGER,MAINS PLUG,US-CAN-JA	10
11576-000071	LUCAS POWER SUPPLY WITHCORD,REDEL,CANADA,US	10
11576-000080	BATTERY,LUCAS,DARK GRAY	10
6252000000	STAIR PRO - MODEL 6252	7

#### Restated equipment

Model No.	Description	Qty
650600000	POWER PRO AMBULANCE COT	54
639005550001	MTS POWER LOAD	7
99577-001957	LP15,EN,SPO2CO,3L/12L,EX,NIBP,CO2,TR,VR,BT,V4	18
41577-000288	LP15 ACCRY SHIPKIT,AHA,S	18
11577-000004	LI-ION CHARGER, STATION, STD POWER CORD	18
21330-001176	BATTERY PACK-LI-ION	54
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11160-000017	NIBP CUFF-REUSEABLE,LARGE ADULT, BAYONET	18
11160-000013	NIBP CUFF-REUSEABLE,CHILD, BAYONET	18
11577-000002	KIT - CARRY BAG, MAIN BAG	18
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11576-000060	LUCAS BATTERY CHARGER,MAINS PLUG,US-CAN-JA	10
11576-000071	LUCAS POWER SUPPLY WITHCORD,REDEL,CANADA,US	10
11576-000080	BATTERY,LUCAS,DARK GRAY	10
6252000000	STAIR PRO - MODEL 6252	7
6252000000	STAIR PRO - MODEL 6252	2
<b>6506000000</b>	<b>POWER PRO AMBULANCE COT</b>	<b>2</b>
<b>6085033000</b>	<b>PR COT RETAINING POST OPTION</b>	<b>2</b>
<b>7777881669</b>	<b>3 YR X-FRAME POWERTRAIN WRRNTY</b>	<b>2</b>
<b>7777881670</b>	<b>2 YR BUMPER TO BUMPER WARRANTY</b>	<b>2</b>



<u>6506026000</u>	<u>STANDARD COMPONENT 6506PWR PRO</u>	<u>2</u>
<u>6500001430</u>	<u>X-RESTRAINT PACKAGE</u>	<u>2</u>
<u>54030000</u>	<u>DOM SHIP (NOT HI,AKPRGM)</u>	<u>2</u>
<u>6506600000</u>	<u>ONE PER UNIT MANUAL,ENG OPT</u>	<u>2</u>
<u>6500082000</u>	<u>KNEE GATCH/TRENDELENBURG</u>	<u>2</u>
<u>6506038000</u>	<u>STEER LOCK OPTION</u>	<u>2</u>
<u>6092036018</u>	<u>J-HOOK</u>	<u>2</u>
<u>6506127000</u>	<u>POWER LOAD COMPATIBLE OPTION</u>	<u>2</u>
<u>6500028000</u>	<u>SMRT 120V AC NORTH AMERICA</u>	<u>2</u>
<u>6500003130</u>	<u>KNEE GATCH BOLSTER MATRSS,XPS</u>	<u>2</u>
<u>6506040000</u>	<u>XPS OPTION</u>	<u>2</u>
<u>6085046000</u>	<u>RETRCTBLE HDSCCTN O2 HLDR OPTN</u>	<u>2</u>
<u>54200994</u>	<u>NO RUNNER</u>	<u>2</u>
<u>6500315000</u>	<u>3 STAGE IV POLE PR OPTION</u>	<u>2</u>
<u>6506012003</u>	<u>STANDARD FOWLER</u>	<u>2</u>
<u>6500130000</u>	<u>BACKREST STORAGE POUCH OPTION</u>	<u>2</u>
<u>6500128000</u>	<u>H/E STORAGE FLAT OPTION</u>	<u>2</u>
<u>6500147000</u>	<u>EQUIPMENT HOOK OPTION</u>	<u>2</u>

## Part II - Service coverage

## Current service coverage

Model No.	Description	Yrs	Qty
71061PT	PREVENT - Power Cot	10	54
11996-000480	ASSEMBLY,GATEWAY,4G,WIFI,VOICE		18
76011PT	PREVENT - PowerLOAD	10	7
78000008	LP15 On Site Prevent w batt	10	18
78000020	LUC On Site Prevent w batt	10	10
73071PT	PREVENT - Stair Chair	10	7
78000171	LIFENET Asset		28
11600-000030	CODE-STAT 11 DATA REVIEWSEAT LICENSE		3

## Restated service coverage

Model No.	Description	Yrs	Qty
71061PT	PREVENT - Power Cot	10.00	54
11996-000480	ASSEMBLY,GATEWAY,4G,WIFI,VOICE		18
76011PT	PREVENT - PowerLOAD	10.00	7
0078-000-008	LP15 On Site Prevent w batt	10.00	18
0078-000-020	LUC On Site Prevent w batt	10.00	10
73071PT	PREVENT - Stair Chair	10	7
0078-000-171	LIFENET Asset		28
11600-000030	CODE-STAT 11 DATA REVIEWSEAT LICENSE		3
<u>0078-000-171</u>	<u>Lifenet Asset (Per Device)</u>		<u>2</u>
<u>71061PT</u>	<u>Power-PRO Prevent Service</u>	<u>10</u>	<u>2</u>
<u>0077-100-003</u>	<u>Cot Upgrade or Install</u>	<u>10</u>	<u>2</u>