

**SOLE SOURCE INFORMATION FORM
TO ACCOMPANY LEGISLATION
(LIMIT YOUR RESPONSE TO THIS SHEET)**

1. Verification of sole source:
(why no other individual or business entity is capable of supplying the needed item)
- sole manufacturer/distributor
- sole company offering this unique service (manufacturer's warranty/product support)
- other:
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2. Describe efforts to determine that the company was a sole source:

Medtronic Emergency Response Systems is the only source for LIFEPAK equipment which is mandatory for standardization of equipment in use for Emergency Medical Services. This is also the sole source for supplies and product support service necessary to keep the LIFEPAK units operating on a daily basis in order that personnel responding to an emergency medical situation be fully equipped with the supplies and equipment necessary for the EMS personnel to assess and deal with the injury or life-threatening situation at the scene.

3. Describe any effort to bid for alternate item (service or product) that is not provided by a sole source that would meet this need:

Several years ago this type of equipment was tested and evaluated by Division of Fire Emergency Medical personnel. LIFEPAK equipment was found to be the only type of equipment for our use. Supplies for the LIFEPAK units must be purchased from Medtronic Emergency Response Systems in order to comply with manufacturer's warranty and repair requirements. Product support service must also be established with and purchased from Medtronic Emergency Response Systems in order to adhere to manufacturer's warranty regulations and equipment repair specifications requirements.

4. Indicate how the price or fee structure was determined:

Product support service orders issued by Medtronic Emergency Response Systems provide coverage costs based on listing of specific equipment covered in attached schedules provided with the service orders. One-time or multiple-year installment payments are specified on the service orders as a part of the terms of the support service documentation.

Approved By: _____ Date: _____
Procurement Manager