

ABSTRACT OF PROPOSAL  
FOR  
DEPARTMENT OF BUDGET AND FISCAL SERVICES - DIVISION OF PURCHASING

PROPOSAL NO. RFB-ESD-0800253  
OPENED: February 5, 2008  
Reqn No.: RQM-ESD-0700093

|  |              |                   |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |
|--|--------------|-------------------|----------|--------------|-------------|-------------------|------|------------|----------|--------------|-------------|-----------------|------|------------|----------|--------------|--|-----------------|------|--------------|----------|---|--|
| <p>For the furnishing of all necessary facilities, equipment, services and personnel to provide EMERGENCY AMBULANCE SERVICES ON O'AHU for a twelve-month period to the Honolulu Emergency Services Department, Emergency Medical Services Division - Ambulance Section, City and County of Honolulu, Honolulu, Hawaii</p> <p>Item No.</p> <p style="text-align: center;"><u>A. BASIC LIFE SUPPORT SERVICES</u></p> <p>1) Basic Rate Per Call [One (1) Patient]; Staffed by Two (2) EMTs; based on only one (1) patient being picked up at a specific pickup point.<br/>Bid Price:</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: right;">Unit</td> <td style="text-align: center;">10 services</td> <td style="text-align: right;">\$518.40</td> </tr> <tr> <td style="text-align: right;"><b>Total</b></td> <td style="text-align: center;">per patient</td> <td style="text-align: right;"><b>\$5,184.00</b></td> </tr> </table> <p>2) One-Half the Basic Call Rate, for Each and Every Patient in Excess of One (1) Picked Up on a Basic Call; based on each and every patient in excess of the one (1) patient picked up on a basic call under Item No. 1.<br/>Bid Price:</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: right;">Unit</td> <td style="text-align: center;">2 services</td> <td style="text-align: right;">\$259.20</td> </tr> <tr> <td style="text-align: right;"><b>Total</b></td> <td style="text-align: center;">per patient</td> <td style="text-align: right;"><b>\$518.40</b></td> </tr> </table> <p>3) One-Half the Basic Call Rate, for each "Non-Transport Call"; this term shall refer to each trip where the call is canceled or where no patient is transported<br/>Bid Price:</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: right;">Unit</td> <td style="text-align: center;">2 services</td> <td style="text-align: right;">\$259.20</td> </tr> <tr> <td style="text-align: right;"><b>Total</b></td> <td></td> <td style="text-align: right;"><b>\$518.40</b></td> </tr> </table> <p style="text-align: center;"><u>B. ADVANCED LIFE SUPPORT SERVICES</u></p> <p>4) Basic Rate Per Call [One (1) Patient]; Staffed by One (1) EMT and One (1); MICT personnel; based on only one (1) patient being picked up at a specific pickup point.<br/>Bid Price:</p> <table style="width: 100%; border: none;"> <tr> <td style="text-align: right;">Unit</td> <td style="text-align: center;">425 services</td> <td style="text-align: right;">\$576.00</td> </tr> </table> | Unit         | 10 services       | \$518.40 | <b>Total</b> | per patient | <b>\$5,184.00</b> | Unit | 2 services | \$259.20 | <b>Total</b> | per patient | <b>\$518.40</b> | Unit | 2 services | \$259.20 | <b>Total</b> |  | <b>\$518.40</b> | Unit | 425 services | \$576.00 | <p>International Life Support, Inc. dba American Medical Response</p> |  |
| Unit   | 10 services  | \$518.40          |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |
| <b>Total</b>   | per patient  | <b>\$5,184.00</b> |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |
| Unit   | 2 services   | \$259.20          |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |
| <b>Total</b>   | per patient  | <b>\$518.40</b>   |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |
| Unit   | 2 services   | \$259.20          |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |
| <b>Total</b>   |              | <b>\$518.40</b>   |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |
| Unit   | 425 services | \$576.00          |          |              |             |                   |      |            |          |              |             |                 |      |            |          |              |  |                 |      |              |          |   |  |

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| <p>For the furnishing of all necessary facilities, equipment, services and personnel to provide EMERGENCY AMBULANCE SERVICES ON O'AHU for a twelve-month period to the Honolulu Emergency Services Department, Emergency Medical Services Division - Ambulance Section, City and County of Honolulu, Honolulu, Hawaii</p> | <p>International Life Support, Inc. dba American Medical Response</p> |  |
| <p>Item No.</p> <p style="text-align: right;"><b>Total</b> per patient</p>  | <p><b>\$244,800.00</b></p>  |  |
| <p>5) One-Half the Basic Call Rate, for Each and Every Patient in Excess of One (1) Picked Up on a Basic Call; based on each and every patient in excess of the one (1) patient picked up on a basic call under Item No. 4.<br/>Bid Price:</p>  | <p>Unit 10 services \$288.00</p>                                      |  |
| <p style="text-align: right;"><b>Total</b> per patient</p>  | <p><b>\$2,880.00</b></p>  |  |
| <p>6) One-Half the Basic Call Rate, for each "Non-Transport Call"; this term shall refer to each trip where the call is canceled or where no patient is transported<br/>Bid Price:</p>  | <p>Unit 100 services \$288.00</p>                                     |  |
| <p style="text-align: right;"><b>Total</b></p> <p><b>TOTAL SUM BID FOR A. AND B. ITEM NOS. 1 THRU 6</b></p>   | <p><b>\$28,800.00</b></p> <p><b>\$282,700.80</b></p>                  |  |