

## GENESEE COUNTY PURCHASING

A Division of the Genesee County Controller's Office
COUNTY ADMINISTRATION BLDG
1101 BEACH STREET, ROOM 343,
FLINT, MICHIGAN 48502
Phone: (810) 257-3030 Fax (810)257-3380

www.gc4me.com

April 17, 2017

## **ADDENDUM #1**

## Quotation for Histology Laboratory and General Clinical Laboratory Services 17-107 RFQ

1. The second paragraph of Page 1 of the RFQ reads as follows:

Sealed quotes for **Histology Laboratory and General Clinical Laboratory Services.** Quotes will be received until **3:00 p.m. (EDT), Wednesday, April 19, 2017**, at the Genesee County Purchasing Department, 1101 Beach Street, Room 343, Flint, MI, 48502. The Genesee County Purchasing Department hours of operation are 8:00 a.m. to 12:00 p.m. and 1:00 p.m. to 5:00 p.m., closed noon to 1:00 p.m. for lunch, closed holidays and furlough days, check website for closed days. Label the envelope containing the proposal response as described on page 1. **LATE QUOTES AND QUOTES SENT BY FACSIMILE OR E-MAIL WILL NOT BE ACCEPTED.** 

This paragraph has been changed to read as follows:

Sealed quotes for **Histology Laboratory and General Clinical Laboratory Services.** Quotes will be received until <u>11:00 a.m. (EDT), Wednesday, May 3, 2017</u>, at the Genesee County Purchasing Department, 1101 Beach Street, Room 343, Flint, MI, 48502. The Genesee County Purchasing Department hours of operation are 8:00 a.m. to 12:00 p.m. and 1:00 p.m. to 5:00 p.m., closed noon to 1:00 p.m. for lunch, closed holidays and furlough days, check website for closed days. Label the envelope containing the proposal response as described on page 1. **LATE QUOTES AND QUOTES SENT BY FACSIMILE OR E-MAIL WILL NOT BE ACCEPTED.** 

Indicate on the Signature Page item #6 and on the exterior of the envelope containing your proposal:

**ADDENDUM #1 RECEIVED** 

ALL PROPOSALS MUST BE RECEIVED AT: GENESEE COUNTY PURCHASING DEPARTMENT 1101 BEACH STREET, ROOM 343, FLINT, MI 48502

Cindy Carnes, Purchasing Manager G:/bid2/2016/17-072add1

## **REVISED COST SUMMARY PAGE**

•	Quote Request from Genesee County: Histology Laboratory and General Clinical aboratory Services					
Department: (	Department: Genesee County Medical Examiner's Office					
Contact Name	Contact Name: Ms. Cindy Carnes, Purchasing Manager					
Contact email	Contact email: ccarnes@co.genesee.mi.us					
Due Date and Time: 11:00 a.m. (EDT), Wednesday, May 3, 2017						
Attachment _	yesno					
<b>Contact inform</b>	ation					
Refere	nce at the seller (person)					
	Company name					
	Street address					
	City and Zip					
	Phone number					
Commercial terms for the quote						
Number of days the quote is valid						
	Payment term					
	Delivery term					
	Delivery address(es)					
	Other terms					
Complete the following and/or attach complete price and services information						
Item number	Item description		Currency	Unit price		
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Complete	e trie io	llowing	j and/o	rallach	complete	price and	services inioi	mation
				4.5				

Item number	Item description	Currency	Unit price