

# Event Details

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	1
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>		<b>Finish Time</b>	
09/05/2024 13:32:15 CDT		09/26/2024 14:00:00 CDT	

**Bidder:** PUBLIC EVENT DETAILS

**Submit To:** Dept of Disability and Aging  
Call for Shipping Information  
United States

**Contact:** Parker Birt  
**Phone:**  
**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

## Event Description

The Tennessee Department of Disability and Aging is seeking a Contractor to provide drug screening services. This Contractor must be able to provide testing locations and be available to respond on-site upon request. The prospective Contractor must be able to accommodate the Agency throughout the entire State.

All questions and comments are due in accordance with Terms & Conditions 1.3.

Specifications and terms & conditions are attached.

**Procurement Contact:**  
Parker Birt  
Parker.Birt@tn.gov  
615-291-5948

READ THE ENTIRE BID, including the Event Details, Specifications, and Terms and Conditions and any other attachments.

If the Review and bid on this event link included in the e-mail notification does not work, please go to <http://www.edison.tn.gov/> and click the link to the Supplier Portal Home Page. Log in with your vendor ID and password in order to search bid opportunities.

NOTE: Internet Explorer and Firefox are the recommended browsers to access the Supplier Portal and bid on events. Google Chrome is not supported and should not be used. Need help with EDISON? Call the Edison HELP Desk at 866-376-0104 or 615-741-4357

Please do not wait until the last day to POST YOUR BID. The Edison system will sign you out after 30 minutes of inactivity. Your password expires EVERY 90 DAYS. It is the responsibility of the Edison User (bidder/vendor) to maintain their own profile information (Email address, phone numbers, address or contacts) and to continue to keep it current by logging into the Supplier Portal and making changes as needed.

Supplier Portal link: <http://www.edison.tn.gov> (Maintain supplier information)

Central Procurement Office Website: <https://www.tn.gov/generalservices/procurement>

The website is constantly being updated with information to assist the agencies and vendors; you are encouraged to visit the website frequently.

## General Questions

Question	UOM	Best	Worst	Response
Please enter the number of days, from the bid opening date, after which your bid offer will expire:		0		<input type="text"/>

Required: Yes Mandatory ResponseNo

## Response Comments

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	2
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>	<b>Finish Time</b>		
09/05/2024 13:32:15 CDT	09/26/2024 14:00:00 CDT		

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Question	UOM	Best	Worst	Response
----------	-----	------	-------	----------

Please list the following information:

- List the Contract Administrator's Name
- List the Contract Administrator's Address
- List the Contract Administrator's Phone Number
- List the Respondent's Toll Free Phone Number
- List the Contract Administrator's Pager or Cell Number
- List the Contract Administrator's Email Address
- List the Respondent's Website

Required: Yes Mandatory ResponseNo

### Response Comments

Please attach documentation that reflects you are registered with the Department of Revenue for sales and use tax, as stated in the Terms and Conditions. If you are exempt, please provide a copy of the communication from the Department of Revenue supporting this exemption.

Required: Yes Mandatory ResponseNo

### Response Comments

Please complete the attached form, included with the Terms and Conditions document, and attach all pertinent documentation regarding your company's efforts to achieve diversity business participation. This information must be submitted with the bid document and monthly thereafter until a reasonable level of diversity business participation is achieved. Confirm below that you have completed this attached form by choosing, "Yes."

Required: Yes Mandatory ResponseNo

### Response Comments

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	3
<b>Event Round</b>	<b>Version</b>		
1	1		
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Clinical Laboratory Drug Testing Services			
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09/05/2024 13:32:15 CDT		09/26/2024 14:00:00 CDT	

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Question	UOM	Best	Worst	Response
----------	-----	------	-------	----------

The Respondent affirms the following statement, as required by the Iran Divestment Act Tenn. Code Ann. § 12-12-111: "By submission of this response, each Respondent and each person signing on behalf of any Respondent certifies, and in the case of a joint response each party thereto certifies as to its own organization, under penalty of perjury, that to the best of its knowledge and belief that each Respondent is not on the list created pursuant to Tenn. Code Ann. § 12-12-106." For reference purposes, the list is currently available online at:  
<https://www.tn.gov/generalservices/procurement/central-procurement-office--cpo-/library-public-information-library.html>

Required: Yes Mandatory ResponseNo

### Response Comments

Please answer yes or no to the following. If YES, describe using additional pages and attach to the Response including any relevant details:

(a) is the Respondent presently debarred, suspended, proposed for debarment, or voluntarily excluded from covered transactions by any federal or state department or agency;

(b) has the Respondent within the past three (3) years, been convicted of, or had a civil judgment rendered against the contracting party from commission of fraud, or a criminal offence in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or grant under a public transaction; violation of federal or state antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;

(c) is the Respondent presently indicted or otherwise criminally or civilly charged by a government entity (federal, state, or local) with commission of any of the offenses detailed above; and

(d) has the Respondent within a three (3) year period preceding the contract had one or more public transactions (federal, state, or local) terminated for cause or default.

Required: Yes Mandatory ResponseNo

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	4
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>		<b>Finish Time</b>	
09/05/2024 13:32:15 CDT		09/26/2024 14:00:00 CDT	

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United States  
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**Contact:**  
**Phone:**  
**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

### Response Comments

Question	UOM	Best	Worst	Response
----------	-----	------	-------	----------

Please answer yes or no. Does the Respondent have laboratories or collection sites that are within fifty (50) miles of each Agency Location listed in the Specifications in accordance with A.5.b.?

Required: Yes Mandatory ResponseNo

### Response Comments

Please answer yes or no. Can the Respondent facilitate on-site random testing events at the listed Agency locations provided in Specification A.5. upon request?

Required: Yes Mandatory ResponseNo

### Response Comments

Please answer yes or no. Can the Respondent accommodate post-accident testing within three (3) hours in accordance with Specification A.1.a.2.ii.?

Required: Yes Mandatory ResponseNo

### Response Comments

Please answer yes or no. Does the Respondent have an online or web-based option for setting up appointments for testing in accordance with A.1.c.?

Required: Yes Mandatory ResponseNo

### Response Comments

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	5
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>		<b>Finish Time</b>	
09/05/2024 13:32:15 CDT		09/26/2024 14:00:00 CDT	

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United States  
Parker Birt

**Contact:**  
**Phone:**  
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**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

Question	UOM	Best	Worst	Response
----------	-----	------	-------	----------

Please answer yes or no. Does the Respondent have a location within an hour drive of Martin, Tennessee in accordance with A.5.c.?

Required: Yes Mandatory ResponseNo

### Response Comments

I (we) agree to strictly abide by all the statutes and terms contained in the rules of the Department of General Services, Central Procurement Office, which are by reference made a part hereof, in addition to the special terms, conditions and specifications embodied in the invitation to bid.

**IMPORTANT:** By Selecting YES, the bidder certifies compliance with the above and further certifies that this bid is made without collusion or fraud.

Yes

Required: Yes Mandatory ResponseYes

### Response Comments

We ask that you take a few short minutes to complete this survey. The purpose of this survey is to capture Respondents' assessments of CPO procurement processes. Your responses will remain anonymous, and will have no bearing or consideration on contract award.

<https://www.surveymonkey.com/r/stateoftncpocustomer>

Required: No Mandatory ResponseNo

### Response Comments

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	6
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>	<b>Finish Time</b>		
09/05/2024 13:32:15 CDT	09/26/2024 14:00:00 CDT		

**Bidder:** PUBLIC EVENT DETAILS  
**Submit To:** Dept of Disability and Aging  
Call for Shipping Information  
United States  
Parker Birt  
**Contact:**  
**Phone:**  
**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

### Line Details

**Line:** 1 **Item ID:** **Line Qty:** 400 **UOM:** Each **Bid Qty:**   
**Required:** Yes **Reserve Price:** No

**Description:** "Five (5) Panel Drug Screen with GC/MS Confirmation" (Performed at supplier's location)

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>
Required: No Mandatory Response: No				

#### Response Comments

**Line:** 2 **Item ID:** **Line Qty:** 400 **UOM:** Each **Bid Qty:**   
**Required:** Yes **Reserve Price:** No

**Description:** "Six (6) Panel Drug Screen with GC/MS Confirmation" (Performed at supplier's location)

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>
Required: No Mandatory Response: No				

#### Response Comments

**Line:** 3 **Item ID:** **Line Qty:** 400 **UOM:** Each **Bid Qty:**   
**Required:** Yes **Reserve Price:** No

**Description:** Alcohol Screening and confirmation (Performed at supplier's location)

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>
Required: No Mandatory Response: No				

#### Response Comments

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	7
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>		<b>Finish Time</b>	
09/05/2024 13:32:15 CDT		09/26/2024 14:00:00 CDT	

**Bidder:** PUBLIC EVENT DETAILS

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United States  
Parker Birt

**Contact:**  
**Phone:**  
**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Line: 4**   **Item ID:**                      **Line Qty:** 400                      **UOM:** Each                      **Bid Qty:**

**Required:** Yes   **Reserve Price:** No

**Description:** Synthetic Cannabinoid Drug Screen

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>

Required: No   Mandatory Response: No

**Response Comments**

**Line: 5**   **Item ID:**                      **Line Qty:** 400                      **UOM:** Each                      **Bid Qty:**

**Required:** Yes   **Reserve Price:** No

**Description:** Synthetic Cathinones Drug Screen

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>

Required: No   Mandatory Response: No

**Response Comments**

**Line: 6**   **Item ID:**                      **Line Qty:** 100                      **UOM:** Each                      **Bid Qty:**

**Required:** Yes   **Reserve Price:** No

**Description:** On-site Collection (\*Cost in addition to testing) for accidents or random (Per Visit)

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>

Required: No   Mandatory Response: No

**Response Comments**

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b> 34401-0000013451	<b>Format</b> Sell	<b>Type</b> RFx	<b>Page</b> 8
<b>Event Round</b> 1	<b>Version</b> 1		
<b>Event Name</b> Clinical Laboratory Drug Testing Services			
<b>Start Time</b> 09/05/2024 13:32:15 CDT		<b>Finish Time</b> 09/26/2024 14:00:00 CDT	

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Call for Shipping Information  
United States  
Parker Birt  
**Contact:**  
**Phone:**  
**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Line: 7** **Item ID:** **Line Qty:** 100 **UOM:** Each **Bid Qty:**   
**Required:** Yes **Reserve Price:** No

**Description:** Court Affidavit (each case)

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>
Required: No Mandatory Response: No				

### Response Comments

**Line: 8** **Item ID:** **Line Qty:** 100 **UOM:** Each **Bid Qty:**   
**Required:** Yes **Reserve Price:** No

**Description:** In Court Testimony (per hour)

Question	UOM	Best	Worst	Response
What is the unit price of this item?				<input type="text"/>
Required: No Mandatory Response: No				

### Response Comments



# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	9
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>	<b>Finish Time</b>		
09/05/2024 13:32:15 CDT	09/26/2024 14:00:00 CDT		

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Call for Shipping Information  
United States  
Parker Birt

**Contact:**  
**Phone:**  
**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

## Bidder Information

<b>Firm Name:</b>		
<b>Name:</b>	<b>Signature:</b>	<b>Date:</b>
<b>Phone #:</b>	<b>Fax #:</b>	
<b>Street Address:</b>		
<b>City &amp; State:</b>	<b>Zip Code:</b>	
<b>Email:</b>		

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	10
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
<b>Start Time</b>		<b>Finish Time</b>	
09/05/2024 13:32:15 CDT		09/26/2024 14:00:00 CDT	

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**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar

**Bids allowed in other currency:** No

## Appendix A - Line Specifications

**Line:** 1 **Item ID:** **Line Qty:** 400 **UOM:** Each  
**Description:** "Five (5) Panel Drug Screen with GC/MS Confirmation" (Performed at supplier's location)

### Item Specifications

<b>Manufacturer:</b>		<b>Item Height:</b>	0
<b>Mfg Item ID:</b>		<b>Dimension UOM:</b>	
<b>Item Length:</b>	0	<b>Volume UOM:</b>	
<b>Item Width:</b>	0	<b>Weight UOM:</b>	
<b>Item Volume:</b>	0	<b>Item Color:</b>	
<b>Item Weight:</b>	0		
<b>Item Size:</b>			

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	State of TN - DIDD
<b>Quantity:</b>	400		315 DEADERICK ST
<b>Due Date:</b>	10/01/2024		UBS TOWER, 8TH FLOOR
<b>Freight Terms:</b>			NASHVILLE TN 37243
<b>Ship Via:</b>	Best Option Available		United States

**Line:** 2 **Item ID:** **Line Qty:** 400 **UOM:** Each  
**Description:** "Six (6) Panel Drug Screen with GC/MS Confirmation" (Performed at supplier's location)

### Item Specifications

<b>Manufacturer:</b>		<b>Item Height:</b>	0
<b>Mfg Item ID:</b>		<b>Dimension UOM:</b>	
<b>Item Length:</b>	0	<b>Volume UOM:</b>	
<b>Item Width:</b>	0	<b>Weight UOM:</b>	
<b>Item Volume:</b>	0	<b>Item Color:</b>	
<b>Item Weight:</b>	0		
<b>Item Size:</b>			

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	State of TN - DIDD
<b>Quantity:</b>	400		315 DEADERICK ST
<b>Due Date:</b>	10/01/2024		UBS TOWER, 8TH FLOOR
<b>Freight Terms:</b>			NASHVILLE TN 37243
<b>Ship Via:</b>	Best Option Available		United States

**Line:** 3 **Item ID:** **Line Qty:** 400 **UOM:** Each  
**Description:** Alcohol Screening and confirmation (Performed at supplier's location)

# Event Details (cont.)

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34401-0000013451	Sell	RFX	11
<b>Event Round</b>	<b>Version</b>		
1	1		
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Clinical Laboratory Drug Testing Services			
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**Phone:**

**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar

**Bids allowed in other currency:** No

### Item Specifications

**Manufacturer:**

**Mfg Item ID:**

**Item Length:** 0

**Item Width:** 0

**Item Volume:** 0

**Item Weight:** 0

**Item Size:**

**Item Height:** 0

**Dimension UOM:**

**Volume UOM:**

**Weight UOM:**

**Item Color:**

### Shipping Information

**Schedule:** 1

**Quantity:** 400

**Due Date:** 10/01/2024

**Freight Terms:**

**Ship Via:** Best Option Available

**Ship To:** State of TN - DIDD  
315 DEADERICK ST  
UBS TOWER, 8TH FLOOR  
NASHVILLE TN 37243  
United States

**Line:** 4 **Item ID:** **Line Qty:** 400 **UOM:** Each

**Description:** Synthetic Cannabinoid Drug Screen

### Item Specifications

**Manufacturer:**

**Mfg Item ID:**

**Item Length:** 0

**Item Width:** 0

**Item Volume:** 0

**Item Weight:** 0

**Item Size:**

**Item Height:** 0

**Dimension UOM:**

**Volume UOM:**

**Weight UOM:**

**Item Color:**

### Shipping Information

**Schedule:** 1

**Quantity:** 400

**Due Date:** 10/01/2024

**Freight Terms:**

**Ship Via:** Best Option Available

**Ship To:** State of TN - DIDD  
315 DEADERICK ST  
UBS TOWER, 8TH FLOOR  
NASHVILLE TN 37243  
United States

**Line:** 5 **Item ID:** **Line Qty:** 400 **UOM:** Each

**Description:** Synthetic Cathinones Drug Screen

### Item Specifications

**Manufacturer:**

**Mfg Item ID:**

**Item Length:** 0

**Item Width:** 0

**Item Volume:** 0

**Item Weight:** 0

**Item Size:**

**Item Height:** 0

**Dimension UOM:**

**Volume UOM:**

**Weight UOM:**

**Item Color:**

# Event Details (cont.)

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<b>Event ID</b>	<b>Format</b>	<b>Type</b>	<b>Page</b>
34401-0000013451	Sell	RFx	12
<b>Event Round</b>	<b>Version</b>		
1	1		
<b>Event Name</b>			
Clinical Laboratory Drug Testing Services			
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<b>Quantity:</b>	400		315 DEADERICK ST
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<b>Freight Terms:</b>			NASHVILLE TN 37243
<b>Ship Via:</b>	Best Option Available		United States

**Line:** 6 **Item ID:** **Line Qty:** 100 **UOM:** Each  
**Description:** On-site Collection (\*Cost in addition to testing) for accidents or random (Per Visit)

### Item Specifications

<b>Manufacturer:</b>		<b>Item Height:</b>	0
<b>Mfg Item ID:</b>		<b>Dimension UOM:</b>	
<b>Item Length:</b>	0	<b>Volume UOM:</b>	
<b>Item Width:</b>	0	<b>Weight UOM:</b>	
<b>Item Volume:</b>	0	<b>Item Color:</b>	
<b>Item Weight:</b>	0		
<b>Item Size:</b>			

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<b>Quantity:</b>	100		315 DEADERICK ST
<b>Due Date:</b>	10/01/2024		UBS TOWER, 8TH FLOOR
<b>Freight Terms:</b>			NASHVILLE TN 37243
<b>Ship Via:</b>	Best Option Available		United States

**Line:** 7 **Item ID:** **Line Qty:** 100 **UOM:** Each  
**Description:** Court Affidavit (each case)

### Item Specifications

<b>Manufacturer:</b>		<b>Item Height:</b>	0
<b>Mfg Item ID:</b>		<b>Dimension UOM:</b>	
<b>Item Length:</b>	0	<b>Volume UOM:</b>	
<b>Item Width:</b>	0	<b>Weight UOM:</b>	
<b>Item Volume:</b>	0	<b>Item Color:</b>	
<b>Item Weight:</b>	0		
<b>Item Size:</b>			

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	State of TN - DIDD
<b>Quantity:</b>	100		315 DEADERICK ST
<b>Due Date:</b>	10/01/2024		UBS TOWER, 8TH FLOOR
<b>Freight Terms:</b>			NASHVILLE TN 37243
<b>Ship Via:</b>	Best Option Available		United States

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34401-0000013451	Sell	RFx	13
<b>Event Round</b>	<b>Version</b>		
1	1		
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Parker Birt

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**Phone:**  
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**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

**Line:** 8 **Item ID:** **Line Qty:** 100 **UOM:** Each  
**Description:** In Court Testimony (per hour)

### Item Specifications

<b>Manufacturer:</b>			
<b>Mfg Item ID:</b>			
<b>Item Length:</b>	0	<b>Item Height:</b>	0
<b>Item Width:</b>	0	<b>Dimension UOM:</b>	
<b>Item Volume:</b>	0	<b>Volume UOM:</b>	
<b>Item Weight:</b>	0	<b>Weight UOM:</b>	
<b>Item Size:</b>		<b>Item Color:</b>	

### Shipping Information

<b>Schedule:</b>	1	<b>Ship To:</b>	State of TN - DIDD
<b>Quantity:</b>	100		315 DEADERICK ST
<b>Due Date:</b>	10/01/2024		UBS TOWER, 8TH FLOOR
<b>Freight Terms:</b>			NASHVILLE TN 37243
<b>Ship Via:</b>	Best Option Available		United States

# Event Details (cont.)

## PeopleSoft Strategic Sourcing

Event ID	Format	Type	Page
34401-0000013451	Sell	RFx	14
Event Round	Version		
1	1		
Event Name			
Clinical Laboratory Drug Testing Services			
Start Time	Finish Time		
09/05/2024 13:32:15 CDT	09/26/2024 14:00:00 CDT		

**Bidder:** PUBLIC EVENT DETAILS

**Submit To:** Dept of Disability and Aging  
Call for Shipping Information  
United States

**Contact:** Parker Birt

**Phone:**

**Email:** parker.birt@tn.gov

**Event Currency:** US Dollar  
**Bids allowed in other currency:** No

## Appendix B - Terms & Conditions

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1. The undersigned acknowledges that all submitted information and documentation will become the property of the state of Tennessee. The undersigned also affirms that the information given above is true, accurate, and includes pertinent information necessary to identify and explain the operation of this organization to the best of my knowledge and is in no way misleading.
2. Should any data change in the future, the Supplier agrees to immediately submit the correct information electronically through the State's Supplier Portal.

If the information will be submitted in writing please mail to the following address:

Department of Finance and Administration  
312 Rosa L. Parks Ave.  
21st Floor Tennessee Tower  
ATTN: Supplier Maintenance  
Nashville, TN 37243

3. No person on the grounds of handicap or disability, age, race, color, religion, sex, national origin, creed, or any other classification protected by Federal and/or Tennessee State constitutional and/or statutory law shall be excluded from participation in, or denied benefits of, or be otherwise subjected to discrimination in the performance of the Contract or in the employment practices of the Contractor. The Contractor shall, upon request, show proof of such non-discrimination, and shall post in conspicuous places, available to employees and applicants, notices of non-discrimination.

Last Updated: 08/30/2016