

**APPROVAL OF SPECIAL PURCHASE FOR STRYKER CARDIAC MONITORS FOR  
NOBLESVILLE FIRE DEPARTMENT**

**WHEREAS**, in accordance with Ind. Code § 5-22-10, et. seq., the City of Noblesville (“City”) may make a purchase without soliciting bids or proposals under certain circumstances (“Special Purchase”);

**WHEREAS**, the City is seeking to purchase two (2) Stryker Cardiac Monitors for the Noblesville Fire Department as shown on the attached **Exhibit A**, incorporated herein;

**WHEREAS**, pursuant to Ind. Code § 5-22-10-8, a purchasing agent may make a Special Purchase when (1) the compatibility of equipment, accessories, or replacement parts is a substantial consideration in the purchase; and (2) only one (1) source meets the using agency's reasonable requirements;

**WHEREAS**, the Noblesville Fire Department has previously sourced its cardiac monitors from Stryker and has provided quality equipment and responsive customer service to the City;

**WHEREAS**, in order to provide the necessary and on-going preventative maintenance necessary to service the existing equipment, the City has entered into an existing preventative maintenance agreement with Stryker;

**WHEREAS**, the Noblesville Fire Department has indicated that preventative maintenance is an important service to offer on this equipment to extend its useful life and compatibility of the equipment is a substantial consideration to match the existing service contract to avoid additional costs and services.

**WHEREAS**, the Noblesville Fire Department currently has two (2) outdated and end of life cycle cardiac monitors and the need to transition to the new models of the cardiac monitors is imperative;

**WHEREAS**, Stryker is the only source of Stryker Cardiac Monitors that will both fit with the Fire Department’s existing training and the City’s existing service contract;

**WHEREAS**, the City now desires to purchase two (2) Stryker Cardiac Monitors in an amount totaling \$70,151.72 as shown by **Exhibit A**.

**NOW, THEREFORE**, be it resolved by the City of Noblesville Board of Public Works & Safety meeting in regular session as follows:

- Section 1. Based on representations from the Noblesville Fire Department, the Board understands that the Stryker Cardiac Monitors are the only device capable of meeting the Noblesville Fire Department’s reasonable requirements.
- Section 2. The Board hereby approves the Special Purchase of two (2) Stryker Cardiac Monitors from Stryker, as further shown by **Exhibit A**, at a cost of \$70,151.72, attached hereto and incorporated herein.

Section 3. The Board hereby authorizes the Fire Chief to execute any and all documents necessary to effectuate the purchase.

Section 4. This Resolution shall be of full force and effect from and upon its adoption and in accordance with Indiana law.

SO RESOLVED, this 13<sup>th</sup> day of February, 2024 by the City of Noblesville Board of Public Works & Safety.



\_\_\_\_\_  
JACK MARTIN, PRESIDENT



\_\_\_\_\_  
JOHN DITSLEAR, MEMBER

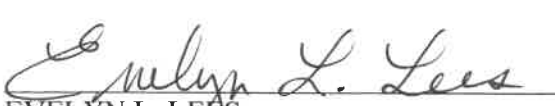
\_\_\_\_\_  
LAURIE DYER, MEMBER



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ROBERT J. ELMER, MEMBER

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RICK L. TAYLOR, MEMBER

ATTEST:



\_\_\_\_\_  
EVELYN L. LEES,  
CLERK CITY OF NOBLESVILLE, INDIANA

**Exhibit A**

# Purchase Order Form



Account Manager Mandy O'Grady  
 Cell Phone 317-709-0198

Purchase Order Date 2/05/2024  
 Expected Delivery Date \_\_\_\_\_  
 Stryker Quote Number 10834822

BILL TO		CUSTOMER #20127653
Company Name	City of Noblesville Fire	
Contact or Department	James Macky	
Street Address	135 S 9th St.	
Add'l Address Line		
City, ST ZIP	Noblesville, IN. 46060	
Phone	317-770-1419	

SHIP TO		CUSTOMER #20127653
Company Name	City of Noblesville Fire	
Contact or Department	James Macky	
Street Address	135 S 9th St.	
Add'l Address Line		
City, ST ZIP	Noblesville, IN. 46060	
Phone	317-770-1419	

Authorized Customer Initials jm

Authorized Customer Initials jm

DESCRIPTION	QTY	TOTAL
Reference Quote: 10834822	1	\$70,151.72
<b>TOTAL*</b>		<b>\$70,151.72</b>

**Accounts Payable Contact Information**

Name: Cara Culp  
 Email: nfdbilling@noblesville.in.us  
 Phone: 317-776-6336

**Authorized Customer Signature**

Printed Name: Jack Martin  
 Title: President, Board of Public Works + Safety  
 Signature: [Handwritten Signature]  
 Date: 2-13-2024

Attachment: Stryker Quote Number 10834822

Stryker Terms and Conditions  
[www.strykeremergencycare.com/terms](http://www.strykeremergencycare.com/terms)

\* Sales or use taxes on domestic (USA) deliveries will be invoiced in addition to the price of the goods and services on the Stryker Quote



### Quick Quote 12/13/2023 2:08 PM

Quote Number: 10834822

Remit to: **Stryker Medical**

Version: 1

P.O. Box 93308  
Chicago, IL 60673-3308

Prepared For: CITY OF NOBLESVILLE FIRE  
Attn:

Rep: Mandy O'Grady  
Email: amanda.ogrady@stryker.com  
Phone Number:

Quote Date: 02/05/2024

Expiration Date: 02/26/2024

Contract Start: 12/13/2023

Contract End: 12/12/2024

Delivery Address		Sold To - Shipping		Bill To Account	
Name:	CITY OF NOBLESVILLE FIRE	Name:	CITY OF NOBLESVILLE FIRE	Name:	CITY OF NOBLESVILLE FIRE
Account #:	20127653	Account #:	20127653	Account #:	20127653
Address:	135 S 9TH ST NOBLESVILLE Indiana 46060-2620	Address:	135 S 9TH ST NOBLESVILLE Indiana 46060-2620	Address:	135 S 9TH ST NOBLESVILLE Indiana 46060-2620

### Equipment Products:

#	Product	Description	U/M	Qty	Sell Price	Total
1.0	99577-001957	LIFEPAK 15 V4 Monitor/Defib - Manual & AED, Trending, Noninvasive Pacing, SpO2, SpCO, NIBP, 12-Lead ECG, EtCO2, BT. Incl at N/C: 2 pr QC Electrodes (11996-000091) & 1 Test Load (21330-001365) per device, 1 Svc Manual CD (26500-003612) per order	PCE	2	\$35,707.66	\$71,415.33
2.0	41577-000288	LP15 ACCRY SHIPKIT, AHA, S	PCE	2	\$0.00	\$0.00
Equipment Total:						\$71,415.34

### Trade In Credit:

Product	Description	Qty	Credit Ea.	Total Credit
TR-15V1V2-LP15	TRADE-IN-STRYKER LP15V1V2 TOWARDS PURCHASE OF LIFEPAK 15	2	-\$6,500.00	-\$13,000.00

### ProCare Products:

#	Product	Description	Qty	Sell Price	Total
4.1	LIFEPAK-FLD-PROCARE	Lifepak 15 for LIFEPAK 15 V4 Monitor/Defib - Manual & AED, Trending, Noninvasive Pacing, SpO2, SpCO, NIBP, 12-Lead ECG, EtCO2, BT. Incl at N/C: 2 pr QC Electrodes (11996-000091) & 1 Test Load (21330-001365) per device, 1 Svc Manual CD (26500-003612) per order  12/14/2023 - 12/13/2026  √Parts, Labor, Travel √Preventative & Intensive √Onsite Service	2	\$5,421.84	\$10,843.68
ProCare Total:					\$10,843.68



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Chicago, IL 60673-3308

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Rep: Mandy O'Grady

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Email: amanda.ogrady@stryker.com

Phone Number:

Quote Date: 02/05/2024

Expiration Date: 02/26/2024

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Contract End: 12/12/2024

**Price Totals:**

Estimated Sales Tax (0.000%):	\$0.00
Freight/Shipping:	\$892.70
Grand Total:	\$70,151.72

Prices: In effect for 30 days

Terms: Net 30 Days

**Terms and Conditions:**

Deal Consummation: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule. Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker's prior written approval, except as may be requested by law or by lawful order of any applicable government agency. A copy of Stryker Medical's terms and conditions can be found at [https://techweb.stryker.com/Terms\\_Conditions/Index.html](https://techweb.stryker.com/Terms_Conditions/Index.html).



FINANCE & ACCOUNTING

Funding Verification/Encumbrance Request Form

Date to be submitted to BoW/Park Board: N/A (put N/A if not submitting to BoW/Park Board)

Vendor name: Stryker

Vendor Address: 1601 P.O. Box 93308; Chicago, IL 60673-3308

Brief description of purchase: 2 LP15 cardiac monitors

Source of Funding:

- Current Year Operational Budget
Subsequent Year Operational Budget
Funding not yet finalized (attach explanation)
Loan or debt proceeds
Non-Appropriated Fund

Table with columns: Fund #, Department #, Project #, Expense Object #, Amount. Row 1: #1, 445.200, \$ 70,161.72

- 1) This option may only be selected AFTER the adoption of the subsequent year budget.
2) This option may only be selected in unusual circumstances.
3) These funds are not appropriated through the annual budget process.

Are you requesting that a Purchase Order (PO) be created for this expenditure?

- Yes Select for all purchases/contracts that will not be paid immediately
No Select ONLY if department plans to initiate payment immediately

The Department certifies that sufficient appropriation authority exists in the stated fund and expense series to obligate the expense for future payment.

Department Director

[Handwritten Signature]

(Signature)

Uriah Eddingfield

(Printed Name)

2/5/24

(Date)

Please email completed form to OFA bud.get@noblesville.in.us

FOR OFFICE OF FINANCE AND ACCOUNTING USE ONLY

OFA Action Taken

- Purchase Order Created
Reviewed Availability of funds (Contract/Purchase of over \$50k or paid with debt proceeds only)
No Action Taken (Department should still include this form in purchase/contract approval submission)

PO # (if applicable) 240039

OFA Signature [Handwritten Signature]

Comments:

Initials: HE

Date: 2/5/24