



**RETURN BIDS TO:  
RETOURNER LES SOUMISSIONS À:**

**Bid Receiving - PWGSC / Réception des  
soumissions - TPSGC**  
**11 Laurier St. / 11, rue Laurier**  
**Place du Portage , Phase III**  
**Core 0B2 / Noyau 0B2**  
**Gatineau, Québec K1A 0S5**  
**Bid Fax: (819) 997-9776**

**REQUEST FOR PROPOSAL  
DEMANDE DE PROPOSITION**

**Proposal To: Public Works and Government  
Services Canada**

We hereby offer to sell to Her Majesty the Queen in right of Canada, in accordance with the terms and conditions set out herein, referred to herein or attached hereto, the goods, services, and construction listed herein and on any attached sheets at the price(s) set out therefor.

**Proposition aux: Travaux Publics et Services  
Gouvernementaux Canada**

Nous offrons par la présente de vendre à Sa Majesté la Reine du chef du Canada, aux conditions énoncées ou incluses par référence dans la présente et aux annexes ci-jointes, les biens, services et construction énumérés ici sur toute feuille ci-annexée, au(x) prix indiqué(s).

**Comments - Commentaires**

**Vendor/Firm Name and Address**

**Raison sociale et adresse du  
fournisseur/de l'entrepreneur**

**Issuing Office - Bureau de distribution**

Drugs, Vaccines and Biologics Division/Div.des produits  
pharmaceutiques,biologiques et de vaccins  
11 Laurier St. / 11, rue Laurier  
6B3, Place du Portage III  
Gatineau  
Quebec  
K1A 0S5

|   |  |
|---|--|
| <b>Title - Sujet</b><br>MULTI-SOURCE DRUGS  |  |
| <b>Solicitation No. - N° de l'invitation</b><br>E60PH-16DRUG/A  | <b>Date</b><br>2016-04-21  |
| <b>Client Reference No. - N° de référence du client</b><br>E60PH-16DRUG   |  |
| <b>GETS Reference No. - N° de référence de SEAG</b><br>PW-\$\$PH-895-70825  |  |
| <b>File No. - N° de dossier</b><br>ph895.E60PH-16DRUG   | <b>CCC No./N° CCC - FMS No./N° VME</b>   |
| <b>Solicitation Closes - L'invitation prend fin</b><br><b>at - à 02:00 PM</b><br><b>on - le 2016-05-09</b>  | <b>Time Zone</b><br><b>Fuseau horaire</b><br>Eastern Daylight Saving<br>Time EDT |
| <b>F.O.B. - F.A.B.</b> Specified Herein - Précisé dans les présentes<br><b>Plant-Usine:</b> <input type="checkbox"/> <b>Destination:</b> <input type="checkbox"/> <b>Other-Autre:</b> <input checked="" type="checkbox"/> |  |
| <b>Address Enquiries to: - Adresser toutes questions à:</b><br>Bissonnette(ph895), Suzanne  | <b>Buyer Id - Id de l'acheteur</b><br>ph895                                      |
| <b>Telephone No. - N° de téléphone</b><br>(819) 420-2961 ( )  | <b>FAX No. - N° de FAX</b><br>( ) -  |
| <b>Destination - of Goods, Services, and Construction:</b><br><b>Destination - des biens, services et construction:</b><br>SEE HEREIN   |  |

**Instructions: See Herein**

**Instructions: Voir aux présentes**

|  |  |
|--|--|
| <b>Delivery Required - Livraison exigée</b>  | <b>Delivery Offered - Livraison proposée</b> |
| <b>Vendor/Firm Name and Address</b><br><b>Raison sociale et adresse du fournisseur/de l'entrepreneur</b>   |  |
| <b>Telephone No. - N° de téléphone</b><br><b>Facsimile No. - N° de télécopieur</b>   |  |
| <b>Name and title of person authorized to sign on behalf of Vendor/Firm</b><br><b>(type or print)</b><br><b>Nom et titre de la personne autorisée à signer au nom du fournisseur/<br/>de l'entrepreneur (taper ou écrire en caractères d'imprimerie)</b> |  |
| <b>Signature</b>   | <b>Date</b>                                  |

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Solicitation No. - N de l'invitation  
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Amd. No. - N de la modif.

Buyer ID - Id de l'acheteur  
ph895

Client Ref. No. - N de rf. du client

File No. - N du dossier

E60PH-16DRUG

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**List of Annexes:**

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**Form:**

|        |                |
|--------|----------------|
| Form 1 | Bid Submission |
|--------|----------------|

## **TITLE: TO SUPPLY PHARMACEUTICALS ON AN AS REQUESTED BASIS**

### **PART 1 - GENERAL INFORMATION**

#### **1.1 Security Requirement**

There is no security requirement associated with this bid solicitation.

#### **1.2 Requirement**

The requirement is detailed under Article 6.2 of the resulting contract clauses.

#### **1.3 Debriefings**

Bidders may request a debriefing on the results of the bid solicitation. Bidders should make the request to the Contracting Authority within 15 working days from receipt of the results of the bid solicitation process. The debriefing may be provided in writing, by telephone or in person.

#### **1.4 Trade Agreements**

The requirement is subject to the Agreement on Internal Trade (AIT).

### **PART 2 - BIDDER INSTRUCTIONS**

#### **2.1 Standard Instructions, Clauses and Conditions**

- (a) All instructions, clauses and conditions identified in the bid solicitation by number, date and title are set out in the Standard Acquisition Clauses and Conditions Manual (<http://buyandsell.gc.ca/policy-and-guidelines/standard-acquisition-clauses-and-conditions-manual>) issued by Public Works and Government Services Canada.
- (b) Bidders who submit a bid agree to be bound by the instructions, clauses and conditions of the bid solicitation and accept the clauses and conditions of the resulting contract.
- (c) The 2003 (2016-04-04) Standard Instructions - Goods or Services - Competitive Requirements, are incorporated by reference into and form part of the bid solicitation.

#### **2.2 Submission of Bids**

Bids must be submitted only to PWGSC Bid Receiving Unit by the date, time and place indicated on page 1 of the bid solicitation.

#### **2.3 Enquiries - Bid Solicitation**

All enquiries must be submitted in writing to the Contracting Authority no later than five (5) calendar days before the bid closing date. Enquiries received after that time may not be answered.

Bidders should reference as accurately as possible the numbered item of the bid solicitation to which the enquiry relates. Care should be taken by Bidders to explain each question in sufficient detail in order to enable Canada to provide an accurate answer. Technical enquiries that are of a proprietary nature must be clearly marked "proprietary" at each relevant item. Items identified as "proprietary" will be treated as such except where Canada determines that the enquiry is not of a proprietary nature. Canada may edit

the question(s) or may request that the Bidder do so, so that the proprietary nature of the question(s) is eliminated, and the enquiry can be answered to all Bidders. Enquiries not submitted in a form that can be distributed to all Bidders may not be answered by Canada.

## 2.4 Applicable Laws

Any resulting contract must be interpreted and governed, and the relations between the parties determined, by the laws in force in the province of Ontario.

Bidders may, at their discretion, substitute the applicable laws of a Canadian province or territory of their choice without affecting the validity of their bid, by deleting the name of the Canadian province or territory specified and inserting the name of the Canadian province or territory of their choice. If no change is made, it acknowledges that the applicable laws specified are acceptable to the Bidders.

## 2.5 Offers from Agents, Dealers or other Resale Outlets

If the Bidder is not the manufacturer of the items offered, but is bidding on behalf of a prime manufacturer, in addition to the other requirements of this bid solicitation, it is mandatory upon request that the Bidder submit a letter of authorization, confirming that the Offeror is in fact the Authorized Agent, from the manufacturer it claims to represent. The letter must be an original, under the letterhead of the prime manufacturer. The Bidder will be required to submit the original letter within five (5) calendar days from date of written request. Failure to submit the letter of authorization within the required time frame will result in the bid being declared non-responsive.

\_\_\_\_\_  
Bidder Name (printed)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Manufacturer Name(s)

## 2.6 Distribution by a Third Party

If the Bidder has an agreement(s) in place with a Third Party Distributor(s) (e.g. a logistics company) with whom the Identified Users may place orders for the products contained in any resulting contract, please indicate the following for each distributor:

- (a) the name of the distributor;
- (b) the complete address including postal code;
- (c) name of local contact and local telephone/facsimile numbers;
- (d) the minimum order per call up required by the distributor;

Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone No.: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Minimum order: \_\_\_\_\_

Who would be responsible for:

|                     |             |                  |             |
|---------------------|-------------|------------------|-------------|
| Accepting Orders:   | Bidder ____ | Distributor ____ | Either ____ |
| Invoicing:          | Bidder ____ | Distributor ____ | Either ____ |
| Receipt of Payment: | Bidder ____ | Distributor ____ | Either ____ |

## **2.7 Disclosure of Information - Federal Government Quantities and Pharmaceutical Prime Vendor Standing Offer Holder**

Identified Users procure most of their pharmaceutical supplies through a Pharmaceutical Prime Vendor Standing Offer.

The Bidder must, in the event of a resulting contract, agree and consent to the disclosure of its contracted unit prices to the Pharmaceutical Prime Vendor, or to another prime distributor as may be necessitated by a change in current arrangements, by Canada strictly for the use by the Pharmaceutical Prime Vendor (or by the other Pharmaceutical Prime Vendor Standing Offer Holder) in fulfilling its requirements under the NMSO with the Identified Users, and further agrees that it will have no right to claim against Canada, the Minister, the Identified User, their employees, agents or servants, or any of them, in relation to such disclosure.

The Bidder agrees to appoint the Pharmaceutical Prime Vendor, or another prime distributor as may be the case, as an Authorized Agent for the purposes of:

- (i) receiving and fulfilling orders under the Standing Offer, and
- (ii) receiving payment.

## **PART 3 - BID PREPARATION INSTRUCTIONS**

### **3.1 Bid Preparation Instructions**

- (a) Canada requests that bidders provide their bid in separately bound sections as follows:

- (i) Section I: Technical Bid (1 hard copy)
- (ii) Section II: Financial Bid (1 hard copy and 1 soft copy on a CD or USB)
- (iii) Section III: Certifications (1 hard copy)

An electronic copy of the spreadsheet contained in Annex A-1 can be requested from the Contracting Authority by sending an e-mail to: [suzanne.bissonnette@pwgsc.gc.ca](mailto:suzanne.bissonnette@pwgsc.gc.ca)

Prices must appear in the financial bid only. No prices must be indicated in any other section of the bid.

If there is a discrepancy between the wording of the soft copy and the hard copy, the wording of the hard copy will have priority over the wording of the soft copy.

- (b) Canada requests that Bidders follow the format instructions described below in the preparation of their bid:

- (i) use 8.5 x 11 inch (216 mm x 279 mm) paper;
- (ii) use a numbering system that corresponds to the bid solicitation.

- (c) In April 2006, Canada issued a policy directing federal departments and agencies to take the necessary steps to incorporate environmental considerations into the procurement process Policy on Green Procurement (<http://www.tpsgc-pwgsc.gc.ca/ecologisation-greening/Achats-Procurement/politique-policy-eng.html>). To assist Canada in reaching its objectives, bidders should:
- (i) use 8.5 x 11 inch (216 mm x 279 mm) paper containing fibre certified as originating from a sustainably-managed forest and containing minimum 30% recycled content; and
  - (ii) use an environmentally-preferable format including black and white printing instead of colour printing, printing double sided/duplex, using staples or clips instead of cerlox, duotangs or binders.

### 3.2 Section I: Technical Bid

- (a) In their technical bid, bidders should explain and demonstrate how they propose to meet the requirements and how they will carry out the Work.
- (b) For each drug proposed, the Bidder must provide:
- (i) Drug Identification Number (DIN); or
  - (ii) Evidence that the Bidder has submitted a duly completed New Drug Submission to Health Canada, Biologics and Genetic Therapies Directorate (BGTD), no later than the closing date of this RFP and that BGTD has accepted the submission for review. A copy of the application and proof of acceptance of the submission for review by BGTD must be included.
- (c) The bidder is required to provide full details on its policy for exchanges/credits for returned merchandise, including the return of expired or damaged products, and the return of pharmaceuticals for destruction.
- (d) **Bid Submission Form:** Bidders are requested to include the Bid Submission Form – Form 1 with their bids. It provides a common form in which bidders can provide information required for evaluation and contract award, such as a contact name and the Bidder's Procurement Business Number, etc. Using the form to provide this information is not mandatory, but it is recommended. If Canada determines that the information required by the Bid Submission Form is incomplete or requires correction, Canada will provide the Bidder with an opportunity to do so.

### 3.3 Section II: Financial Bid

- (a) Bidders must submit their financial bid in accordance with the Basis of Payment. The total amount of Applicable Taxes must be shown separately.
- (b) The quantities provided in Annex A-1 are only an approximation of requirements given in good faith and do not represent any firm commitment by Canada. The quantities specified herein are subject to change prior to Contract award. Each Identified User reserves the right to alter quantities or to withdraw from participation for any given item. The final total contracted quantity for each item will be confirmed with the proposed Contractor (s) prior to award. A quantity change which represents a significant change in the Requirement for an item may result in a decision to re-tender that item.
- (c) Bidders should submit a soft copy of Annex A-1 in an unchanged format.

- (d) Bidders are to note the unit of measure (U of M) requested for each item and submit their prices accordingly.
- (e) Where the U of M used is per tablet or capsule, Bidders must submit one price per single tablet or capsule.
- (f) Where the U of M used is a bottle, vial or tube, Bidders must submit one price per single bottle, vial or tube in accordance with the item description in the spreadsheet in Annex A-1.
- (g) The Bidder should make every effort to quote on the format size indicated in the item description for bottles, tubes and jars. However, if the Bidder cannot supply the format requested, the Bidder is requested to quote the closest format size available. The Bidder must indicate which format size is being quoted with a note in the "Format Sizes Available" column of the spreadsheet. If necessary, pricing for these items will be evaluated based on one millilitre, one gram, etc.

### **3.3.1 SACC Manual Clauses**

- (a) C3011T (2013-11-06) - Exchange Rate Fluctuation
- (b) A9033T (2012-07-16) - Financial Capability

### **3.4 Section III: Certifications**

Bidders must submit the certifications required under Part 5.

## **PART 4 - EVALUATION PROCEDURES AND BASIS OF SELECTION**

### **4.1 Evaluation Procedures**

- (a) Bids will be assessed in accordance with the entire requirement of the bid solicitation including the technical and financial evaluation criteria.
- (b) An evaluation team composed of representatives of Canada will evaluate the bids.

#### **4.1.1 Technical Evaluation - Mandatory Technical Criteria**

As specified under the Mandatory Technical in Annex E.

#### **4.1.2 Financial Evaluation**

As specified under the Financial Offer in Annex F.

### **4.2 Basis of Selection**

- (a) A bid must comply with the requirements of the bid solicitation and meet all mandatory evaluation criteria to be declared responsive.
- (b) If there are two or more bids with identical lowest evaluated prices, the names of all Bidders with identical lowest bid prices will be placed in a hat and the winner will be the first name drawn from it. All Bidders with the lowest bid price will be invited to witness the event.



- (c) Recommendation for contract award will be based on the lowest responsive price per item as indicated at Annex A-1. Multiple contracts may be awarded from this solicitation.

## **PART 5 - CERTIFICATIONS AND ADDITIONAL INFORMATION**

Bidders must provide the required certifications and additional information to be awarded a contract.

The certifications provided by Bidders to Canada are subject to verification by Canada at all times. Canada will declare a bid non-responsive, or will declare a contractor in default if any certification made by the Bidder is found to be untrue whether made knowingly or unknowingly, during the bid evaluation period or during the contract period.

The Contracting Authority will have the right to ask for additional information to verify the bidder's certification. Failure to comply and to cooperate with any request or requirement imposed by the Contracting Authority will render the bid non-responsive or constitute a default under the Contract.

### **5.1 Certifications Required with the Bid**

Bidders must submit the following duly completed certifications as part of their bid.

#### **5.1.1 Declaration of Convicted Offences**

As applicable, pursuant to subsection Declaration of Convicted Offences of section 01 of the Standard Instructions, the Bidder must provide with its bid, a completed Declaration Form (<http://www.tpsgc-pwgsc.gc.ca/ci-if/formulaire-form-eng.html>), to be given further consideration in the procurement process.

### **5.2 Certifications Precedent to Contract Award and Additional Information**

The certifications and additional information listed below should be submitted with the bid, but may be submitted afterwards. If any of these required certifications or additional information is not completed and submitted as requested, the Contracting Authority will inform the Bidder of a time frame within which to provide the information. Failure to provide the certifications or the additional information listed below within the time frame provided will render the bid non-responsive.

#### **5.2.1 Integrity Provisions - List of Names**

- a) Bidders who are incorporated, including those bidding as a joint venture, must provide a complete list of names of all individuals who are currently directors of the Bidder.
- b) Bidders bidding as sole proprietorship, as well as those bidding as a joint venture, must provide the name of the owner(s).
- c) Bidders bidding as societies, firms or partnerships do not need to provide lists of names.

#### **5.2.2 Federal Contractors Program for Employment Equity - Bid Certification**

- (a) By submitting a bid, the Bidder certifies that the Bidder, and any of the Bidder's members if the Bidder is a Joint Venture, is not named on the Federal Contractors Program (FCP) for employment equity "[FCP Limited Eligibility to Bid](http://www.labour.gc.ca/eng/standards_equity/eq/emp/fcp/list/inelig.shtml)" ([http://www.labour.gc.ca/eng/standards\\_equity/eq/emp/fcp/list/inelig.shtml](http://www.labour.gc.ca/eng/standards_equity/eq/emp/fcp/list/inelig.shtml)) list available from [Employment and Social Development Canada \(ESDC\) - Labour's](http://www.labour.gc.ca/eng/standards_equity/eq/emp/fcp/index.shtml) ([http://www.labour.gc.ca/eng/standards\\_equity/eq/emp/fcp/index.shtml](http://www.labour.gc.ca/eng/standards_equity/eq/emp/fcp/index.shtml)) website.

- (b) Canada will have the right to declare a bid non-responsive if the Bidder, or any member of the Bidder if the Bidder is a Joint Venture, appears on the "FCP Limited Eligibility to Bid" list at the time of contract award.
- (c) Canada will also have the right to terminate the Contract for default if a Contractor, or any member of the Contractor if the Contractor is a Joint Venture, appears on the "FCP Limited Eligibility to Bid" ([http://www.labour.gc.ca/eng/standards\\_equity/eq/emp/fcp/list/inelig.shtml](http://www.labour.gc.ca/eng/standards_equity/eq/emp/fcp/list/inelig.shtml)) list during the period of the Contract.
- (d) The Bidder must provide the Contracting Authority with a completed annex Federal Contractors Program for Employment Equity - Certification (Annex G to Part 5), before contract award. If the Bidder is a Joint Venture, the Bidder must provide the Contracting Authority with a completed annex Federal Contractors Program for Employment Equity - Certification, for each member of the Joint Venture.

### 5.2.3 Additional Certifications Precedent to Contract Award

The certifications listed below should be completed and submitted with the bid, but may be completed and submitted afterwards. If any of these required certifications is not completed and submitted as requested, the Contracting Authority will inform the Bidder of a time frame within which to provide the information. Failure to comply with the request of the Contracting Authority and to provide the certifications within the time frame will render the bid non-responsive.

## PART 6 - RESULTING CONTRACT CLAUSES

### 6.1 Security Requirement

There is no security requirement applicable to this Contract.

### 6.2 Requirement

The Contractor must provide the items detailed under the Requirement at Annex A-1 to the Identified Users as listed in Annex B.

### 6.3 Standard Clauses and Conditions

All clauses and conditions identified in the Contract by number, date and title are set out in Standard Acquisition Clauses and Conditions Manual(<http://buyandsell.gc.ca/policy-and-guidelines/standard-acquisition-clauses-and-conditions-manual>) issued by Public Works and Government Services Canada.

#### 6.3.1 General Conditions

2010A (2016-04-04) General Conditions - Goods - Medium Complexity, apply to and form part of the Contract.

#### 6.3.2 Warranty - Amendment to General Conditions 2010A

Section 09, paragraph 1, of General Conditions 2010A, which forms part of the Contract will not apply to Work with a specified expiry date. The following paragraph replaces section 9, paragraph 1, General Conditions 2010A for Work with a specified expiry date:

- 
- (a) Despite inspection and acceptance of the Work by or on behalf of Canada and without restricting any other provision of the Contract or any condition, warranty or provision implied or imposed by law, the Contractor warrants that the Work conforms to the specifications until the expiration date required by the Requirement. The Contractor must, upon the request of Canada, replace at its own expense including costs of returns and delivery of replacement Work as soon as possible any supplies that fail to conform or that deteriorates prior to the expiration date required by the Requirement.
- (b) If full replacement is not available in a timeframe acceptable to Canada, then Canada may, in addition to and without prejudice to any other remedy available, choose from one of the following options for the quantity and Contract value of the Work affected:
- (i) Full and immediate reimbursement;
  - (ii) Equivalent full credit against future purchases under the Contract; or
  - (iii) Partial replacement and partial reimbursement or partial credit.

#### **6.4 Term of Contract**

##### **6.4.1 Period of Contract**

The period for placing orders and rendering services against the Contract will be from July 1, 2016 up to and including June 30, 2017.

##### **6.4.2 Option to Extend the Contract**

- (a) The Contractor grants to Canada the irrevocable option to extend the term of the Contract by up to 2 (two) additional one (1) year period(s) from July 1, 2017 to June 30, 2018 and from July 1, 2018 to June 30, 2019 under the same conditions. The Contractor agrees that, during the extended period of the Contract, it will be paid in accordance with the applicable provisions as set out in the Basis of Payment.
- (b) Canada may exercise this option at any time by sending a written notice to the Contractor from contract award up to and including the expiry date of the contract. The option may only be exercised by the Contracting Authority, and will be evidenced for administrative purposes only, through a contract amendment.

##### **6.4.3 Option - Add Identified User**

Subject to the mutual agreement of the Contractor and Canada, additional Identified Users may be added to the Contract at a price not to exceed the Contract price and subject to the same conditions.

#### **6.5 Authorities**

##### **6.5.1 Contracting Authority**

- (a) The Contracting Authority for this Contract is:
- Suzanne Bissonnette  
Supply Specialist  
Public Works and Government Services Canada  
Drugs, Vaccines & Biologics  
Place du Portage, Phase III, 6B3  
11 Laurier Street  
Gatineau, QC K1A 0S5

Telephone: (819) 420-2961  
Facsimile: (819) 956-7340  
Email address: suzanne.bissonnette@pwgsc.gc.ca

- (b) The Contracting Authority is responsible for the management of the Contract and the Contracting Authority must authorize any changes to the Contract in writing. The Contractor must not perform work in excess of or outside the scope of the Contract based on verbal or written requests or instructions from anybody other than the Contracting Authority.

#### 6.5.2 Identified Users

- (a) The list of Identified Users is provided in Annex B.
- (b) The Identified Users are the representatives of the department, agency, province or territory for whom the Work is being carried out under the Contract. The Identified Users have no authority to authorize changes to the scope of the Work. Changes to the scope of the Work can only be made through a contract amendment issued by the Contracting Authority.
- (c) The Contractor understands and agrees that each Identified User may specify multiple authorized representatives and destination points and may change and/or add to the authorized representatives and destinations specified on Annex B.

#### 6.5.3 Other Users

Other users include other Federal Government Departments and Agencies and/or other Provinces/Territories not currently included on Annex B.

#### 6.5.4 Canada and Public Works and Government Services as Agent

- (a) The Contractor acknowledges that Canada is acting as an agent for Identified Users. Canada will only be funding and paying for Orders placed on behalf of a Federal Government Department or Agency.
- (b) Orders placed by or on behalf of an Identified User under the Contract are the responsibility of the Identified User for whom or by whom the Order is placed. To the extent that the Contract involves orders placed by Canada on behalf of an Identified User, Canada is acting as an agent for the Identified User only and the Identified User is solely liable and responsible for funding and payment of those orders.
- (c) The Contractor acknowledges and agrees that, unless otherwise specified, Canada is not liable under the Contract to the extent that it involves Orders placed on or on behalf of an Identified User, and the Contractor agrees that it must not make any claim or take any proceeding against Canada for any loss, damages, or non-payment in any way related to or arising out of such Orders.

#### 6.5.5 Contractor Representative

**NOTE TO BIDDER: Please include the requested information on "FORM 1 - BID SUBMISSION".**

- (a) General enquiries:

Name: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Facsimile No.: \_\_\_\_\_

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Amd. No. - N de la modif.

Buyer ID - Id de l'acheteur  
ph895

Client Ref. No. - N de rf. du client  
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File No. - N du dossier  
ph895E60PH-16DRUG

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E-mail address: \_\_\_\_\_

(b) Delivery follow-up:

Name: \_\_\_\_\_  
Telephone No.: \_\_\_\_\_  
Facsimile No.: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

#### 6.5.6 Authorized Agents

The Third Party Distributor(s) listed herein have been appointed by the Contractor as an Authorized Agent(s) for the purpose of:

- i. receiving and fulfilling orders under the contract; and
- ii. for the purpose of receiving payment.

**Authorized Agent(s):** \_\_\_\_\_  
\_\_\_\_\_

Receipt by the Authorized Agent of payment for any order filled by that Authorized Agent will be deemed to be receipt by the Contractor of such payment. This arrangement does not remove the Contractor from any of their responsibilities under this Contract. The Contractor agrees and understands that it will be solely responsible for ensuring that all Authorized Agents are aware of and comply with the terms and conditions of the contract. The Contractor must provide a complete copy of the Contract to each Authorized Agent for reference.

The Contractor is responsible for delivery in the event of default by the Authorized Agent(s) for those products only that are normally offered by the Contractor.

The Contractor agrees that if the Authorized Agent defaults on one or more items, the order cannot be terminated in whole, but only for those portions relating to goods or services specified in the particular Contract to which the default relates and only after the Contractor has been provided with a reasonable opportunity to remedy the default. If during the contract period there is a change in the list of Agents as initially indicated in the contract, the Contractor must immediately inform the PWGSC Contracting Authority listed herein, in writing, of this change.

#### 6.5.7 Disclosure of Information - Contracts (Multiple)

The Contractor agrees and accepts that its Agent(s) listed on this contract may represent the holder of a contract other than itself. The Contractor further agrees and accepts that its prices, along with those prices offered by those other Contractors, will appear on the multiple order form, thereby making the prices specified public information.

#### 6.5.8 Disclosure of Information - Federal Government Prime Vendor

The Federal Departments procures most of its pharmaceutical supplies through a Pharmaceutical Prime Distributor.

In order to facilitate this process, the Contractor must supply a copy of the Contract, **within 5 working days** of receiving the Contract award, to: To be provided at contract award.

### 6.6 Ordering

#### 6.6.1 Order against Contract

- (a) The Work to be performed under the Contract will be on an "as and when requested basis" using an Order against Contract ("Order").
- (b) **Process for Issuing an Order:** If a requirement is identified, an Order will be prepared by the Identified User and sent to the Contractor by letter, by e-mail, or by telephone, or any other means agreed to by the parties and evidenced in writing.
- (c) **Contents of an Order:** The Order must contain the following information, if applicable:
  - (i) An order number;
  - (ii) price, quantity and description of goods being ordered;
  - (iii) delivery location;
  - (iv) invoicing address; and
  - (v) any other constraints that might affect the work.
- (d) **Delivery:** Unless otherwise indicated in the Order, delivery must be made within seven (7) calendar days from receipt of an Order.
- (e) **Charges for Work under an Order:** The Contractor must not charge the Identified User anything more than the price set out in the Order unless the Identified User has issued an Order amendment authorizing the increased expenditure. The Identified User will not pay the Contractor for any design changes, modifications or interpretations of the Work unless they have been approved, in writing, by the Contracting Authority before being incorporated into the Work.
- (f) **Consolidation of Orders for Administrative Purposes:** The Contract may be amended from time to time to reflect all Orders issued to date, to document the Work performed under those Orders for administrative purposes.

#### 6.6.2 Minimum Work Guarantee - All the Work

- (a) In this clause,

"Maximum Contract Value" means the amount specified in the "Limitation of Expenditure" clause set out in the Contract; and

"Minimum Contract Value" means \$ to be inserted at contract award.
- (b) Canada's obligation under the Contract is to request Work in the amount of the Minimum Contract Value or, at Canada's option, to pay the Contractor at the end of the Contract in accordance with paragraph (c). In consideration of such obligation, the Contractor agrees to stand in readiness throughout the Contract period to perform the Work described in the Contract. Canada's maximum liability for work performed under the Contract must not exceed the Maximum Contract Value, unless an increase is authorized in writing by the Contracting Authority.
- (c) In the event that Canada does not request Work in the amount of the Minimum Contract Value during the period of the Contract, Canada must pay the Contractor the difference between the Minimum Contract Value and the total cost of the Work requested.
- (d) Canada will have no obligation to the Contractor under this clause if Canada terminates the Contract in whole or in part for default.

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### 6.6.3 Point of Manufacturing and Shipping

**NOTE TO BIDDER: Please include the requested information on "FORM 1 - BID SUBMISSION".**

Contractor's Point of Manufacturing is located at: \_\_\_\_\_

Contractor's Shipping Facilities are located at: \_\_\_\_\_

### 6.6.4 Packaging

Packaging is to be in accordance with good commercial standards to ensure safe arrival at destination. In addition to the Contract Requirement, the Contractor must ensure that all goods are properly labeled and packaged in compliance with the Biologics and Genetic Therapies Directorate (BGTD) Regulations.

### 6.6.5 Shipping Instructions

Goods must be consigned to the destinations specified in the Contract and delivered DDP Delivered Duty Paid (per order/call-up document), Incoterms 2000 for shipments from a commercial contractor.

### 6.6.6 Dangerous Goods/Hazardous Products

- (a) The Contractor must ensure proper labeling and packaging in the supply and shipping of dangerous goods/hazardous products to the Identified User.
- (b) The Contractor will be held liable for any damages caused by improper packaging, labeling or carriage of dangerous goods/hazardous products.
- (c) The Contractor must clearly mark all merchandise labels with the percentage of volume that is a hazardous item. Failure to do so will result in the Contractor being held responsible for damages caused in the movement of goods/products by government vehicles or government personnel.
- (d) The Contractor must adhere to all applicable laws regarding dangerous goods/hazardous products.

### 6.6.7 Shipment of Hazardous Materials

The Contractor must label and ship goods falling within the Hazardous Products Act, R.S.C. 1985, c. H-3 and regulation(s) in accordance with the said Act and regulation(s) accompanied by the required material safety data sheet(s) completed in either English or French. The label must clearly identify the contents of the hazardous material and the material safety data sheet must explain what those hazards are.

## 6.7 Payment

### 6.7.1 Basis of Payment - Firm Unit Price(s)

In consideration of the Contractor satisfactorily completing all of its obligations under the Contract, the Contractor will be paid a firm unit price as specified in Annex A-1. Customs duties are included and Applicable Taxes are extra.

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**6.7.2 Limitation of Expenditure - Cumulative Total of all Orders**

- (a) Canada's total liability to the Contractor under the Contract for all Orders, inclusive of any revisions, must not exceed the sum of \$ to be inserted at contract award. Customs duties are included and Applicable Taxes are extra.
- (b) No increase in the total liability of Canada will be authorized or paid to the Contractor unless an increase has been approved, in writing, by the Contracting Authority.

**6.7.3 SACC Manual Clauses**

- (a) H1001C (2008-05-12), Multiple Payments

**6.8 Invoicing Instructions**

- (a) The Contractor must submit invoices in accordance with the section entitled "Invoice Submission" of the general conditions. Invoices cannot be submitted until all work identified in the invoice is completed.
- (b) The original and one copy of all invoices are to be forwarded to the Identified User specified on the Order for certification and payment.

**6.9 Product Recall or Withdrawal**

- (a) In the event of a recall or a withdrawal of Work, the Contractor must notify the Contracting Authority and all Identified Users who have been delivered the recalled or withdrawn Work and must collect and destroy the delivered, recalled, or withdrawn Work at their own cost.
- (b) The Contractor must, upon the request of Canada or an Identified User, replace as soon as possible any recalled or withdrawn Work at their own cost.
- (c) If full replacement is not available in a timeframe acceptable to Canada or an Identified User, then Canada or the Identified User may, in addition to and without prejudice to any other remedy available, choose from one of the following options for the quantity and Contract value of the Work affected:
  - (i) Full and immediate reimbursement;
  - (ii) Equivalent full credit against future purchases under the Contract; or
  - (iii) Partial replacement and partial immediate reimbursement or partial credit under the Contract.

**6.10 Returns**

In addition to and without prejudice to any other remedy available, for work:

- (a) Damaged during shipment from Contractor, the Contractor must provide full credit or replacement or refund for all returned Work where Contractor was contacted within 5 days of delivery to and acceptance by the Identified User. Damaged Work will be returned FCA Free Carrier (Identified user) Incoterms 2000 to the address specified below. The Contractor is responsible for shipping costs.
- (b) Contractor's Return Facilities:

**NOTE TO BIDDER: Please include the requested information on "FORM 1 - BID SUBMISSION".**



Address:  
Contact Name:  
Telephone:  
Facsimile:  
Email:

#### **6.11 Notice of Anticipated Shortage**

- (a) The Contractor must notify the Contracting Authority when it becomes aware of a potential problem, delay, or event that may lead to a shortage of any of the quantities listed in Annex B. Such notice must include a description of the nature of the problem or delay or event, the anticipated impact on the requirements of the Contract, the steps being taken by the Contractor to rectify the situation or to minimize the impact on this Contract, and the expected date by which the shortage will be fully corrected.
- (b) For the purpose of this clause "shortage" is defined as the inability to meet an Order in full or the failure to maintain the minimum stockpile.

#### **6.12 Inability to Supply**

- (a) In the event that the Contractor is unable to supply the Work in accordance with the terms and conditions of the Contract, whether as the result of drug discontinuation or for any other reason, the Contractor will provide a substitute product acceptable to the Identified User at a price no greater than firm unit price specified in Annex A-1.
- (b) Should the Identified User be required to purchase the Work from an alternate source at a higher price, the Contractor must reimburse the Identified User for the difference between the price paid to the alternate source and the firm unit price specified in Annex A-1.
- (c) Should the Identified User be required to purchase the Work from an alternate source, Canada reserves the right to adjust the final total estimated quantity in the Contract.

#### **6.13 Reporting**

##### **6.13.1 Periodic Usage Reports**

The Contractor must compile and maintain records on its provision of the Work under the Contract. This data must include all purchases by the Identified Users listed in Annex B.

The Contractor must provide this data in accordance with the reporting requirements detailed in Annex C. If some data is not available, the reason must be indicated. If no goods or services are provided during a given period, the Supplier must still provide a "NIL" report.

The data must be submitted in electronic format to the Contracting Authority on a biannual basis for the duration of the Contract.

The reporting periods are defined as follows:

July 1 to December 31;  
January 1 to June 30.

The data must be submitted to the Contract Authority no later than 7 calendar days after the end of the reporting period.

### **6.13.2 Reports - Fiscal Year-End Usage Report - Upon Request**

In addition to the reporting requirements above, the Contractor must provide usage report for all purchases by the Identified User listed in Annex B for the Federal Government's fiscal year-end.

The Contractor must provide this data in accordance with the reporting requirements detailed in Annex C. If some data is not available, the reason must be indicated. If no goods or services are provided during a given period, the Supplier must still provide a "NIL" report.

The data must be submitted in electronic format on a yearly basis to the Contract Authority.

The fiscal reporting periods are defined as follows:

1st year: Contract Award to March 31, 2017;  
Option year one: April 1, 2017 to March 31, 2018;  
Option year two: April 1, 2018 to March 31, 2019.

The data must be submitted to the Contract Authority no later than 7 calendar days after the end of the reporting period.

### **6.13.3 Adverse Event Following Immunization (AEFI) Reporting Requirement**

The Contractor must comply with all Identified Users' AEFI reporting requirements.

## **6.14 Certifications**

### **6.14.1 Compliance**

The continuous compliance with the certifications provided by the Contractor in its bid and the ongoing cooperation in providing additional information are conditions of the Contract. Certificates are subject to verification by Canada during the entire period of the Contract. If the Contractor does not comply with any certification, fails to provide the additional information, or if it is determined that any certification made by the Contractor in its bid is untrue, whether made knowingly or unknowingly, Canada has the right, pursuant to the default provision of the Contract, to terminate the Contract for default.

### **6.14.2 Federal Contractors Program for Employment Equity - Default by the Contractor**

The Contractor understands and agrees that, when an Agreement to Implement Employment Equity (AIEE) exists between the Contractor and Employment and Social Development Canada (ESDC) - Labour, the AIEE must remain valid during the entire period of the Contract. If the AIEE becomes invalid, the name of the Contractor will be added to the "FCP Limited Eligibility to Bid" list. The imposition of such a sanction by ESDC will constitute the Contractor in default as per the terms of the Contract.

## **6.15 Applicable Laws**

The Contract must be interpreted and governed, and the relations between the parties determined, by the laws in force in the province of Ontario.

## **6.16 Priority of Documents**

If there is a discrepancy between the wording of any documents that appear on the list, the wording of the document that first appears on the list has priority over the wording of any document that subsequently appears on the list.

- (a) the Articles of Agreement;
- (b) the general conditions 2010A (2016-04-04) Goods (Medium Complexity);
- (c) Annex A: Statement of Requirement, Pricing and Deliverables;
- (d) Annex B: Identified Users and Delivery Points;
- (e) Annex C: Example of Periodic Report
- (f) Annex D: Return Policy
- (g) Annex E: Technical Mandatory Criteria
- (h) Annex F: Financial Offer
- (i) Annex G: Federal Contractors Program for Employment Equity - Certification
- (j) the Contractor's bid dated\_\_\_\_\_.

**6.17 Defence Contract**

- (a) The Contract is a defence contract within the meaning of the Defence Production Act, R.S.C. 1985, c. D-1, and must be governed accordingly.
- (b) Title to the Work or to any materials, parts, work-in-process or finished work must belong to Canada free and clear of all claims, liens, attachments, charges or encumbrances. Canada is entitled, at any time, to remove, sell or dispose of the Work or any part of the Work in accordance with section 20 of the Defence Production Act.

**6.18 Insurance**

SACC Manual Clause G1005C (2016-01-28), Insurance – No Specific Requirement

## **Annex A**

### **STATEMENT OF REQUIREMENT, PRICING AND DELIVERABLES**

#### **1. Requirement:**

To supply pharmaceuticals in accordance with the item descriptions listed in the attached Annex A-1.

#### **2. Price Proposal**

All prices must be in Canadian dollars, DDP Delivered Duty Paid (per order/call-up document), transportation charges included. Customs duties are included and Applicable Taxes are extra. Each firm unit price is applicable for all destinations in Canada.

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## **Annex A-1**

(Please see list of products at the end of the solicitation)

## Annex A-2 Ontario's format requirements

| Description  | Format required                |
|--|--------------------------------|
| ACETAMINOPHEN TABLET 325 MG ORAL                           | Bottle of 100 tablets          |
| ACETAMINOPHEN TABLET 325 MG ORAL                           | Bottle of 1000 tablets         |
| ACETAMINOPHEN TABLET 500 MG ORAL                           | Bottle of 100 tablets          |
| ACETAMINOPHEN TABLET 500 MG ORAL                           | Bottle of 1000 tablets         |
| AMITRIPTYLINE HCL TABLET 50 MG ORAL                        | Bottle of 100 tablets          |
| AMOXICILLIN CAPSULE 500 MG ORAL                            | Bottle of 100 capsules         |
| ATORVASTATIN CALCIUM TABLET 10 MG ORAL                     | Bottle of 100 tablets          |
| ATORVASTATIN CALCIUM TABLET 40 MG ORAL                     | Bottle of 100 tablets          |
| AZITHROMYCIN TABLET 250 MG ORAL                            | Pack of 6 tablets              |
| BACITRACIN <b>ZN</b> /POLYMX B SULF OINT.(G) 500-10K/G TOP | 30 G tube                      |
| BECLOMETHASONE DIPROPIONATE SPRAY 50 MCG NASAL             | 200 dose nasal spray           |
| BISACODYL TABLET EC (ENTERIC COATED) 5 MG ORAL             | Bottle of 100 tablets          |
| BUPROPION HCL TAB ER 24H 150 MG ORAL                       | Bottle of 90 tablets           |
| BUPROPION HCL TAB ER 24H 300 MG ORAL                       | Bottle of 90 tablets           |
| BUSPIRONE HCL TABLET 10 MG ORAL                            | Bottle of 100 tablets          |
| CETIRIZINE HCL TABLET 10 MG ORAL                           | Bottle of 100 tablets          |
| CITALOPRAM HYDROBROMIDE TABLET 20 MG ORAL                  | Bottle of 100 tablets          |
| CLINDAMYCIN HCL CAPSULE 300 MG ORAL                        | Bottle of 100 capsules         |
| CLONIDINE HCL TABLET 0.1 MG ORAL                           | Bottle of 100 tablets          |
| CLOTRIMAZOLE CREAM (G) 1% TOPICAL                          | 30 G tube                      |
| CYCLOBENZAPRINE HCL TABLET 10 MG ORAL                      | Bottle of 100 tablets          |
| DEXTROMETHORPHAN HBR LIQUID 15 MG/5 ML ORAL                | Bottle of 250 ML               |
| DIPHENHYDRAMINE HCL 25 MG ORAL                             | Bottle of 100 tablets/capsules |
| DIPHENHYDRAMINE HCL 50 MG ORAL                             | Bottle of 100 tablets/capsules |
| DOCUSATE SODIUM CAPSULE 100 MG ORAL                        | Bottles of 100 capsules        |
| DOXYCYCLINE HYCLATE 100 MG ORAL                            | Bottle of 100 tablets/capsules |
| FLUTICASONE PROPIONATE SPRAY SUSP 50 MCG NASAL             | 120 dose nasal spray           |
| GABAPENTIN CAPSULE 300 MG ORAL                             | Bottle of 100 capsules         |
| GABAPENTIN CAPSULE 400 MG ORAL                             | Bottle of 100 capsules         |
| IBUPROFEN TABLET 400 MG ORAL                               | Bottle of 100 tablets          |
| IBUPROFEN TABLET 600 MG ORAL                               | Bottle of 100 tablets          |
| METFORMIN HCL TABLET 500 MG ORAL                           | Bottle of 100 tablets          |
| MIRTAZAPINE TABLET 30 MG ORAL                              | Bottle of 100 tablets          |
| MOMETASONE FUROATE SPRAY/PUMP 50 MCG NASAL                 | 140 dose nasal spray           |
| NAPROXEN TABLET 250 MG ORAL                                | Bottle of 100 tablets          |

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|  |                              |
|--|------------------------------|
| NAPROXEN TABLET 500 MG ORAL                      | Bottle of 100 tablets        |
| NITROGLYCERIN AEROSOL 0.4MG/DOSE TRANSLING       | 200 dose nasal spray         |
| OLANZAPINE TAB RAPDIS 10 MG ORAL                 | Box of 30 tabs               |
| OLANZAPINE TAB RAPDIS 15 MG ORAL                 | Box of 30 tabs               |
| OLANZAPINE TAB RAPDIS 20 MG ORAL                 | Box of 30 tabs               |
| OLANZAPINE TAB RAPDIS 5 MG ORAL                  | Box of 30 tabs               |
| OLANZAPINE TABLET 10 MG ORAL                     | Bottle of 100 tablets        |
| PREGABALIN CAPSULE 150 MG ORAL                   | Bottle of 100 capsules       |
| PREGABALIN CAPSULE 75 MG ORAL                    | Bottle of 100 capsules       |
| QUETIAPINE FUMARATE TAB ER 24H 50 MG ORAL        | Bottles of 60 or 100 tablets |
| QUETIAPINE FUMARATE TABLET 100 MG ORAL           | Bottle of 100 tablets        |
| QUETIAPINE FUMARATE TABLET 200 MG ORAL           | Bottle of 100 tablets        |
| QUETIAPINE FUMARATE TABLET 25 MG ORAL            | Bottle of 100 tablets        |
| RANITIDINE HCL TABLET 150 MG ORAL                | Bottles of 100 tablets       |
| RIFAMPIN CAPSULE 150 MG ORAL                     | Bottle of 100 capsules       |
| RIFAMPIN CAPSULE 300 MG ORAL                     | Bottle of 100 capsules       |
| RISPERIDONE TAB RAPDIS 2 MG ORAL                 | Box of 30 tabs               |
| ROSUVASTATIN CALCIUM TABLET 10 MG ORAL           | Box of 30 tabs               |
| SALBUTAMOL SULFATE HFA AER AD 100 MCG INHALATION | 200 dose inhaler             |
| SERTRALINE HCL CAPSULE 100 MG ORAL               | Bottle of 100 capsules       |
| TRAZODONE HCL TABLET 100 MG ORAL                 | Bottle of 100 tablets        |
| TRAZODONE HCL TABLET 50 MG ORAL                  | Bottle of 100 tablets        |
| VALSARTAN TABLET 80 MG ORAL                      | Bottle of 100 tablets        |
| VENLAFAXINE HCL CAP ER 24H 150 MG ORAL           | Bottle of 100 capsules       |
| VENLAFAXINE HCL CAP ER 24H 75 MG ORAL            | Bottle of 100 capsules       |
| ZOPICLONE TABLET 7.5 MG ORAL                     | Bottle of 100 tablets        |

## Annex B Identified Users and Delivery Points

| Department of National Defence   |  |
|--|--|
| Billing Addresses  | Delivery Addresses   |
| CANADIAN FORCES HEALTH SERVICES UNIT (PACIFIC)<br>PHARMACY<br>1200 COLVILLE ROAD<br>VICTORIA, BC V9A 7N2   | CANADIAN FORCES HEALTH SERVICES UNIT (PACIFIC)<br>PHARMACY<br>1200 COLVILLE ROAD<br>VICTORIA, BC V9A 7N2   |
| MEDICAL PROVISION POINT ESQUIMALT<br>C/O CANADIAN FORCES HEALTH SERVICES UNIT (PACIFIC)<br>1200 COLVILLE ROAD<br>VICTORIA, BC V9A 7N2                              | MEDICAL PROVISION POINT ESQUIMALT<br>C/O CANADIAN FORCES HEALTH SERVICES UNIT (PACIFIC)<br>1200 COLVILLE ROAD<br>VICTORIA, BC V9A 7N2                              |
| 21 CANADIAN FORCES HEALTH SERVICES CENTRE<br>COMOX<br>19 WING CFB COMOX<br>BUILDING 27<br>LAZO, BC V0R 2K0   | 21 CF HEALTH SERVICES CENTRE COMOX<br>19 WING CFB COMOX<br>BUILDING 27<br>LAZO, BC V0R 2K0   |
| 22 CANADIAN FORCES HEALTH SERVICES CENTRE<br>COLD LAKE<br>4 WING CFB COLD LAKE<br>BUILDING 69<br>COLD LAKE, AB T9M 2C6   | 22 CF HEALTH SERVICES CENTRE COLD LAKE<br>4 WING CFB COLD LAKE<br>BUILDING 69<br>COLD LAKE, AB T9M 2C6   |
| 1 FIELD AMBULANCE CLINIC PHARMACY<br>CANADIAN FORCES BASE EDMONTON GARRISON<br>BUILDING 162, LANCASTER PARK<br>PO BOX 10500 STATION FORCES<br>EDMONTON, AB T5J 4J5 | 1 FIELD AMBULANCE CLINIC PHARMACY<br>CANADIAN FORCES BASE EDMONTON GARRISON<br>BUILDING 162, LANCASTER PARK<br>PO BOX 10500 STATION FORCES<br>EDMONTON, AB T5J 4J5 |
| 1 FIELD AMBULANCE BRIGADE PHARMACY<br>BUILDING 175 LANCASTER PARK<br>P.O. BOX 9700 STN FORCES<br>EDMONTON, AB T5J 4J5  | 1 FIELD AMBULANCE BRIGADE PHARMACY<br>BUILDING 175 LANCASTER PARK<br>P.O. BOX 9700 STN FORCES<br>EDMONTON, AB T5J 4J5  |
| 1 FIELD AMBULANCE DETACHMENT WAINWRIGHT<br>BUILDING 633<br>DENWOOD, AB T0B 1B0   | 1 FIELD AMBULANCE DETACHMENT<br>WAINWRIGHT PHARMACY<br>BUILDING 633<br>DENWOOD, AB T0B 1B0   |
| CF H SVCS C PHARMACY MAPLE RESOLVE<br>BLDG 633 PERIMETER RD<br>DENWOOD AB T0B 1B0  | CF H SVCS C PHCY MAPLE RESOLVE<br>BLDG 633 PERIMETER RD<br>DENWOOD AB T0B 1B0  |
| 1 FD AMB DET SUFFIELD<br>PO BOX 6000 STN MAIN<br>MEDICINE HAT AB T1A 8K8   | 1 FD AMB DET SUFFIELD<br>PO BOX 6000 STN MAIN<br>MEDICINE HAT AB T1A 8K8   |
| 23 CF HEALTH SERVICES CENTRE DET MOOSE JAW<br>15 WING CFB MOOSE JAW<br>BUILDING 143 NATO DRIVE<br>PO BOX 5000<br>MOOSE JAW, SK S6H 7Z8                             | 23 CF HEALTH SERVICES CENTRE DET MOOSE JAW<br>15 WING CFB MOOSE JAW<br>BUILDING 143 NATO DRIVE<br>PO BOX 5000<br>MOOSE JAW, SK S6H 7Z8                             |
| 23 CANADIAN FORCES HEALTH SERVICES CENTRE<br>WINNIPEG<br>17 WING MEDICAL SQN CFB WINNIPEG<br>BUILDING 62<br>PO BOX 17000 STATION FORCES<br>WINNIPEG, MB R3J 0T0    | 23 CANADIAN FORCES HEALTH SERVICES CENTRE<br>WINNIPEG<br>17 WING MEDICAL SQN CFB WINNIPEG<br>BUILDING 62<br>PO BOX 17000 STATION FORCES<br>WINNIPEG, MB R3J 0T0    |



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| 11 CANADIAN FORCES HEALTH SERVICES CENTRE SHILO<br>CANADIAN FORCES BASE SHILO<br>BUILDING L-158<br>SHILO, MB R0K 2A0   | 11 CF HEALATH SERVICES CENTRE SHILO<br>CANADIAN FORCES BASE SHILO<br>BUILDING L-158<br>SHILO, MB R0K 2A0   |
| TWOVP UMT 11 CF HSVCS C<br>BLDG L158 BOX 5000 ST MAIN<br>SHILO MB R0K 2A0  | TWOVP UMT 11 CF HSVCS C<br>BLDG L158 BOX 5000 ST MAIN<br>SHILO MB R0K 2A0  |
| CANADIAN FORCES HEALTH SERVICES CENTER (OTTAWA)<br>PHARMACY<br>1745 ALTA VISTA DRIVE<br>OTTAWA, ON K1A 0K6   | CANADIAN FORCES HEALTH SERVICES CENTER (OTTAWA)<br>PHARMACY<br>1745 ALTA VISTA DRIVE<br>OTTAWA, ON K1A 0K6   |
| 24 CANADIAN FORCES HEALTH SERVICES CENTRE<br>TRENTON<br>8 WING CFB TRENTON<br>50 YUKON ST<br>ASTRA, ON K0K 1B0   | 24 CANADIAN FORCES HEALTH SERVICES CENTRE<br>TRENTON<br>8 WING CFB TRENTON<br>50 YUKON ST, BLDG 20<br>ASTRA, ON K0K 1B0  |
| CMED DET TRENTON<br>54 PORTAGE AVE BLDG 416<br>8 WING TRENTON<br>ASTRA ON K0C 3W0  | CMED DET TRENTON<br>54 PORTAGE AVE BLDG 416<br>8 WING TRENTON<br>ASTRA ON K0C 3W0  |
| 24 CANADIAN FORCES HEALTH SERVICES CENTRE<br>DETACHMENT NORTH BAY<br>22 WING CFB NORTH BAY<br>HORNELL HEIGHTS, ON P0H 1P0  | 24 CF HEALTH SERVICES CENTRE DET NORTH BAY<br>95 MANTSON CRES<br>22 WING CFB NORTH BAY<br>HORNELL HEIGHTS, ON P0H 1P0  |
| 33 CANADIAN FORCES HEALTH SERVICES CENTRE<br>KINGSTON<br>CANADIAN FORCES BASE KINGSTON<br>BLDG B62<br>1 ENTRETIEN AVE<br>PO BOX 17000 STATION FORCES<br>KINGSTON, ON K7K 7B4 | 33 CANADIAN FORCES HEALTH SERVICES CENTRE<br>KINGSTON<br>CANADIAN FORCES BASE KINGSTON<br>BLDG B62<br>1 ENTRETIEN AVE<br>PO BOX 17000 STATION FORCES<br>KINGSTON, ON K7K 7B4 |
| 32 CANADIAN FORCES HEALTH SERVICES CENTRE<br>TORONTO<br>DENISON ARMOURY<br>1 YUKON LANE<br>NORTH YORK, ON M3K 0A1  | 32 CANADIAN FORCES HEALTH SERVICES CENTRE<br>TORONTO<br>DENISON ARMOURY<br>1 YUKON LANE<br>NORTH YORK, ON M3K 0A1  |
| 2 FIELD AMBULANCE CLINIC PHARMACY<br>CANADIAN FORCES BASE PETAWAWA<br>BUILDING N-109<br>PETAWAWA, ON K8H 2X3   | 2 FIELD AMBULANCE CLINIC PHARMACY<br>CANADIAN FORCES BASE PETAWAWA<br>BUILDING N-109<br>PETAWAWA, ON K8H 2X3   |
| 2 FIELD AMBULANCE BRIGADE PHARMACY<br>MED COY, BUILDING BB-130<br>CANADIAN FORCES BASE PETAWAWA<br>PETAWAWA, ON K8H 2X3  | 2 FIELD AMBULANCE BRIGADE PHARMACY<br>MED COY, BUILDING BB-130<br>CANADIAN FORCES BASE PETAWAWA<br>PETAWAWA, ON K8H 2X3  |
| 1 CANADIAN FIELD HOSPITAL PHARMACY<br>CANADIAN FORCES BASE PETAWAWA<br>PETAWAWA, ON K8H 2X3  | 1 CANADIAN FIELD HOSPITAL PHARMACY<br>147 FLANDERS ROW<br>CANADIAN FORCES BASE PETAWAWA<br>PETAWAWA, ON K8H 2X3  |
| CENTRAL MEDICAL EQUIPMENT DEPOT<br>CANADIAN FORCES BASE PETAWAWA<br>BUILDING BB-104<br>CANADIAN FORCES BASE PETAWAWA<br>PETAWAWA, ON K8H 2X3                                 | CENTRAL MEDICAL EQUIPMENT DEPOT<br>CANADIAN FORCES BASE PETAWAWA<br>BUILDING BB-104<br>CANADIAN FORCES BASE PETAWAWA<br>PETAWAWA, ON K8H 2X3                                 |

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| CF H SVCS C (OTTAWA) DET GEILENKIRCHEN<br>PO BOX 5053, STN FORCES<br>BELLEVILLE, ON K8N 5W6  | CANADIAN FORCES BASE PETAWAWA<br>105 MONTGOMERY RD<br>CENTRAL MEDICAL EQUIPMENT DEPOT<br>PETAWAWA, ON K8H 2X3  |
| CSOR UMS,<br>CFB PETAWAWA,<br>46 CENTURION RD, BLDG Z-127,<br>PETAWAWA ONT K8H 2X3   | CSOR UMS,<br>CFB PETAWAWA,<br>46 CENTURION RD, BLDG Z-127,<br>PETAWAWA ONT K8H 2X3   |
| 31 CF H SVCS C Det MEAFORD<br>4TH CDN DIVISION TRG CENTRE<br>RR#1 GREY RD 112<br>MEAFORD ON N4L 0A1  | 31 CF H SVCS C Det MEAFORD<br>4TH CDN DIVISION TRG CENTRE<br>RR#1 GREY RD 112<br>MEAFORD ON N4L 0A1  |
| 31 CANADIAN FORCES HEALTH SERVICES CENTRE<br>BORDEN PHARMACY<br>CANADIAN FORCES BASE BORDEN<br>BUILDING O-166<br>BORDEN, ON L0M 1C0                                | 31 CF HEALTH SERVICES CENTRE BORDEN PHARMACY<br>CANADIAN FORCES BASE BORDEN<br>BUILDING O-166<br>BORDEN, ON L0M 1C0  |
| CF HEALTH SERVICES TRAINING CENTRE<br>CFB BORDEN<br>PO BOX 1000 STN MAIN<br>BORDEN ON L0M 1C0  | CF HEALTH SERVICES TRAINING CENTRE<br>CFB BORDEN,<br>30 ORTONA RD, BLDG. 0-166, RM 1563<br>BORDEN ON, L0M 1C0  |
| 25 CANADIAN FORCES HEALTH SERVICES CENTRE<br>BAGOTVILLE<br>3 WING BFC BAGOTVILLE<br>3E ESCADRE PHARMACIE, BLDG 66<br>ALOUETTE, PQ G0V 1A0                          | 25 CF HEALTH SERVICES CENTRE BAGOTVILLE<br>3 WING BFC BAGOTVILLE<br>3E ESCADRE PHARMACIE, BLDG 66<br>ALOUETTE, PQ G0V 1A0  |
| 5e AMB de C PHARMACIE<br>CANADIAN FORCES BASE VALCARTIER<br>BUILDING 109<br>COURCELETTE, PQ G0A 1R0  | 5e AMB de C PHARMACIE<br>CANADIAN FORCES BASE VALCARTIER<br>BUILDING 109<br>COURCELETTE, PQ G0A 1R0  |
| DEPOT MATERIEL MEDICAL 5 AMB de C<br>BATISSE 10<br>CP 1000 SUCC FORCES<br>COURCELETTE PQ G0A 4Z0   | DEPOT MATERIEL MEDICAL 5 AMB de C<br>BATISSE 10<br>COURCELETTE PQ G0A 4Z0  |
| 41 CANADIAN FORCES HEALTH SERVICES CENTRE SAINT<br>JEAN PHARMACY<br>CANADIAN FORCES BASE SAINT JEAN<br>BUILDING 150<br>RICHELAIN, PQ J0J 1R0                       | 41 CANADIAN FORCES HEALTH SERVICES CENTRE SAINT<br>JEAN PHARMACY<br>CANADIAN FORCES BASE SAINT JEAN<br>BUILDING 150<br>RICHELAIN, PQ J0J 1R0                       |
| 42 CANADIAN FORCES HEALTH SERVICES CENTRE<br>GAGETOWN PHARMACY<br>CANADIAN FORCES BASE GAGETOWN<br>BUILDING A-47<br>PO BOX 17000 STN FORCES<br>ORMOCTO, NB E2V 4J5 | 42 CANADIAN FORCES HEALTH SERVICES CENTRE<br>GAGETOWN PHARMACY<br>CANADIAN FORCES BASE GAGETOWN<br>BUILDING A-47<br>PO BOX 17000 STN FORCES<br>ORMOCTO, NB E2V 4J5 |
| CANADIAN FORCES HEALTH SERVICES CENTRE<br>(ATLANTIC) PHARMACY<br>MCCALLUM FACILITY, BLDG BLDG S-80<br>P.O. BOX 99000 STN FORCES<br>HALIFAX, NS B3K 5X5             | CANADIAN FORCES HEALTH SERVICES CENTRE<br>(ATLANTIC) PHARMACY<br>MCCALLUM FACILITY, BLDG BLDG S-80<br>P.O. BOX 99000 STN FORCES<br>HALIFAX, NS B3K 5X5             |
| SHEARWATER MEDICAL CLINIC PHARMACY<br>12 WING CFB SHEARWATER<br>WARRIOR BLOCK, BUILDING 100<br>SHEARWATER, NS B0J 3A0  | SHEARWATER MEDICAL CLINIC PHARMACY<br>12 WING CFB SHEARWATER<br>WARRIOR BLOCK, BUILDING 100<br>SHEARWATER, NS B0J 3A0  |

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| MEDICAL PROVISION POINT HALIFAX<br>C/O FORMATION HEALTH SERVICES UNIT (ATLANTIC)<br>MCCALLUM FACILITY, BUILDING S-80<br>HALIFAX, NS B3K 5X5       | MEDICAL PROVISION POINT HALIFAX<br>C/O CF HEALTH SERVICES CENTRE (ATLANTIC)<br>MCCALLUM FACILITY, BUILDING S-80<br>HALIFAX, NS B3K 5X5  |
| 26 CANADIAN FORCES HEALTH SERVICES CENTRE<br>GREENWOOD<br>14 WING CFB GREENWOOD<br>BUILDING 13<br>GREENWOOD, NS B0P 1N0                           | 26 CF HEALTH SERVICES CENTRE<br>GREENWOOD PHARMACY<br>14 WING CFB GREENWOOD<br>BUILDING 13<br>GREENWOOD, NS B0P 1N0                     |
| STATION MEDICAL SECTION ST JOHN'S<br>CANADIAN FORCES STATION ST. JOHN'S<br>BUILDING 309<br>PO BOX 2028<br>ST JOHN'S, NL A1C 6B5                   | STATION MEDICAL SECTION ST JOHN'S<br>CANADIAN FORCES STATION ST. JOHN'S<br>BUILDING 309<br>PO BOX 2028<br>ST JOHN'S, NL A1C 6B5         |
| BASE PHARMACY CFB GANDER<br>PO BOX STN MAIN<br>GANDER NL A1V 1X1  | BASE PHARMACY CFB GANDER<br>PO BOX STN MAIN<br>GANDER NL A1V 1X1  |
| 27 CANADIAN FORCES HEALTH SERVICES CENTRE<br>GOOSE BAY<br>CANADIAN FORCES BASE GOOSE BAY<br>GOOSE BAY AIRPORT, STATION A<br>GOOSE BAY, NL A0P 1S0 | 27 CF HEALTH SERVICES CENTRE<br>GOOSE BAY<br>CANADIAN FORCES BASE GOOSE BAY<br>GOOSE BAY AIRPORT, STATION A<br>GOOSE BAY, NL A0P 1S0    |
| 1 FD AMB DET YELLOWKNIFE<br>J TOBIE BLDG<br>5020 48 ST<br>YELLOWKNIFE NWT X1A 1N3   | 1 FD AMB DET YELLOWKNIFE<br>J TOBIE BLDG<br>5020 48 ST<br>YELLOWKNIFE NWT X1A 1N3   |
| <b>Correctional Services Canada</b>   |   |
| <b>Billing Addresses</b>  | <b>Delivery Addresses</b>   |
| PACIFIC REGIONAL PHARMACY<br>33344 KING ROAD<br>PO BOX 3000<br>ABBOTSFORD, BRITISH COLUMBIA V2S 4P4   | PACIFIC REGIONAL PHARMACY<br>33344 KING ROAD<br>PO BOX 3000<br>ABBOTSFORD, BRITISH COLUMBIA V2S 4P4<br>ATTN: JASON WONG                 |
| REGIONAL PHARMACY PRA<br>3427 FAITHFUL AVE<br>SASKATOON, SASKATCHEWAN S7K 8H6   | REGIONAL PHARMACY PRA<br>3427 FAITHFUL AVE<br>SASKATOON, SASKATCHEWAN S7K 8H6   |
| ONTARIO REGIONAL PHARMACY FRONTENAC<br>INSTITUTION<br>1455 BATH ROAD<br>PO BOX 190<br>KINGSTON, ONTARIO K7L 4V9                                   | ONTARIO REGIONAL PHARMACY FRONTENAC<br>INSTITUTION<br>1455 BATH ROAD<br>PO BOX 190<br>KINGSTON, ONTARIO K7L 4V9<br>ATTN: PAMELA LINDSAY |
| REGIONAL RECEPTION CENTRE<br>246 MONTÉE GAGNON<br>SAINTE-ANNE-DES-PLAINES, QUEBEC J0N 1H0   | REGIONAL RECEPTION CENTRE<br>246 MONTÉE GAGNON<br>SAINTE-ANNE-DES-PLAINES, QUEBEC J0N 1H0   |
| ARCHAMBAULT INSTITUTION<br>242 MONTÉE GAGNON<br>SAINTE-ANNE-DES-PLAINES, QUEBEC J0N 1H0   | ARCHAMBAULT INSTITUTION<br>242 MONTÉE GAGNON<br>SAINTE-ANNE-DES-PLAINES, QUEBEC J0N 1H0   |
| COWANSVILLE INSTITUTION<br>400 FORDYCE AVENUE<br>COWANSVILLE, QUEBEC J2K 3G6  | COWANSVILLE INSTITUTION<br>400 FORDYCE AVENUE<br>COWANSVILLE, QUEBEC J2K 3G6  |
| DRUMMOND INSTITUTION<br>2025 JEAN-DE-BRÉBEUF BLVD.<br>DRUMMONDVILLE, QUEBEC J2B 7Z6   | DRUMMOND INSTITUTION<br>2025 JEAN-DE-BRÉBEUF BLVD.<br>DRUMMONDVILLE, QUEBEC J2B 7Z6   |

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| PORT-CARTIER INSTITUTION<br>CHEMIN DE L'AÉROPORT<br>PO BOX 7070<br>PORT-CARTIER, QUEBEC G5B 2W2                | PORT-CARTIER INSTITUTION<br>CHEMIN DE L'AÉROPORT<br>PO BOX 7070<br>PORT-CARTIER, QUEBEC G5B 2W2   |
| CENTRE FÉDÉRAL DE FORMATION<br>6099 BOUL. LÉVESQUE EST<br>LAVAL, QUÉBEC, H7C 1P1                               | CENTRE FÉDÉRAL DE FORMATION<br>6099 BOUL. LÉVESQUE EST<br>LAVAL, QUÉBEC, H7C 1P1  |
| PHARMACIE RÉGIONALE – QUÉBEC<br>5492 BOULEVARD LÉVESQUE EST<br>LAVAL, QUÉBEC, H7C 1N7                          | PHARMACIE RÉGIONALE – QUÉBEC<br>5492 BOULEVARD LÉVESQUE EST<br>LAVAL, QUÉBEC, H7C 1N7   |
| CSC- REGIONAL PHARMACY - PHARMACIE RÉGIONALE<br>1045 MAIN STREET, 2ND FLOOR<br>MONCTON, NNEW BRUNSWICK E1C 1G3 | CSC - ATLANTIC INSTITUTION<br>13175 ROUTE 8<br>P.O. BOX 102<br>RENOUS, NEW BRUNSWICK E9E 2E1<br>TELEPHONE: (506) 623-4000<br>ATT: HEALTHCARE KARLA MCGRAW         |
| CSC- REGIONAL PHARMACY - PHARMACIE RÉGIONALE<br>1045 MAIN STREET, 2ND FLOOR<br>MONCTON, NNEW BRUNSWICK E1C 1G3 | CSC - WESTMORLAND INSTITUTION<br>4902A MAIN STREET<br>DORCHESTER, NEW BRUNSWICK E4K 2Y9<br>TELEPHONE: (506) 379-4595  |
| CSC- REGIONAL PHARMACY - PHARMACIE RÉGIONALE<br>1045 MAIN STREET, 2ND FLOOR<br>MONCTON, NNEW BRUNSWICK E1C 1G3 | CSC - DORCHESTER PENITENTIARY<br>4902 MAIN STREET<br>DORCHESTER, NEW BRUNSWICK E4K 2Y9<br>TELEPHONE: (506) 379-2471<br>ATT: HEALTHCARE TRACY VANDE MEERAKKER      |
| CSC- REGIONAL PHARMACY - PHARMACIE RÉGIONALE<br>1045 MAIN STREET, 2ND FLOOR<br>MONCTON, NNEW BRUNSWICK E1C 1G3 | CSC - SPRINGHILL INSTITUTION<br>330 MCGEE STREET<br>P.O. BOX 2140<br>SPRINGHILL, NOVA SCOTIA B0M 1X0<br>TELEPHONE: (902) 597-8651<br>ATT: HEALTHCARE SUSAN BEATON |
| <b>Health Canada</b>   |   |
| <b>Billing Addresses</b>   | <b>Delivery Addresses</b>   |
| HEALTH CANADA EDMONTON - SANTÉ CANADA<br>DDC WAREHOUSE<br>12745 - 149 STREET<br>EDMONTON, ALBERTA, T5L 4M9     | HEALTH CANADA EDMONTON - SANTÉ CANADA<br>DDC WAREHOUSE<br>12745 - 149 STREET<br>EDMONTON, ALBERTA, T5L 4M9<br>ATT: JANE SERBEN                                    |
| HC - FIRST NATIONS INUIT HEALTH<br>391 YORK AVE, SUITE 300<br>WINNIPEG, MB R3C 4W1                             | HC - FIRST NATIONS INUIT HEALTH<br>391 YORK AVE, SUITE 300<br>WINNIPEG, MB R3C 4W1  |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1   | BLOODVEIN NURSING STATION<br>BLOODVEIN MANITOBA R0C 0J0<br>PH (204) 395-2161<br>FAX (204) 395-2087  |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1   | BROCHET NURSING STATION<br>BROCHET, MANITOBA R0B 0B0<br>PH (204) 323-2120<br>FAX (204) 323-2650   |

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| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | CROSS LAKE NURSING STATION<br>BOX #160<br>CROSS LAKE, MANITOBA R0B 0J0<br>PH (204) 676-2011<br>FAX (204) 676-3179       |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | GARDEN HILL NURSING STATION<br>ISLAND LAKE, MANITOBA R0B 0T0<br>PH (204) 456-2343<br>FAX (204) 456-2866                 |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | GOD'S LAKE NARROWS NURSING STATION<br>GOD' S LAKE NARROW S, MANITOBA R0B 0M0<br>PH (204) 335-2557<br>FAX (204) 335-2043 |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | GOD'S RIVER NURSING STATION<br>GOD' S RIVER, MANITOBA R0B 0N0<br>PH (204) 366-2355<br>FAX (204) 366-2474                |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | LAC BROCHET NURSING STATION<br>LAC BROCHET, MANITOBA R0B 2E0<br>PH (204) 337-2161<br>FAX (204) 337-2143                 |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | LITTLE GRAND RAPIDS NURSING STATION<br>LITTLE GRAND RAPIDS, MANITOBA R0B 0V0<br>PH (204) 397-2115<br>FAX (204) 397-2016 |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | NELSON HOUSE NURSING STATION<br>NELSON HOUSE, MANITOBA R0B 1A0<br>PH (204) 484-2031<br>FAX (204) 484-2284               |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | NORWAY HOUSE HOSPITAL<br>BOX #1060<br>NORWAY HOUSE, MANITOBA R0B 1B0<br>PH (204) 359-6731<br>FAX (204) 359-4113         |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | OXFORD HOUSE NURSING STATION<br>OXFORD HOUSE, MANITOBA R0B 1C0<br>PH (204) 538-2347<br>FAX (204) 538-2445               |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | PAUINGASSI NURSING STATION<br>P.O. BOX 32<br>PAUINGASSI, MANITOBA R0B 2G0<br>PH (204) 397-2395<br>FAX (204) 397-2104    |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1 | POPLAR RIVER NURSING STATION<br>NEGGINAN, MANITOBA R0B 1G0<br>PH (204) 553-2271<br>FAX (204) 553-2241                   |

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| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | PUKATAWAGAN NURSING STATION (BAND)<br>PUKATAWAGAN, MANITOBA R0B 1G0<br>PH (204) 553-2271<br>FAX (204) 553-2241  |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | RED SUCKER LAKE NURSING STATION<br>RED SUCKER LAKE, MANITOBA R0B 1H0<br>PH (204) 469-5351<br>FAX (204) 469-5769   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | SHAMATTAWA NURSING STATION<br>SHAMATTAWA, MANITOBA R0B 1K0<br>PH (204) 565-2370<br>FAX (204) 565-2519   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | SOUTH INDIAN LAKE NURSING STATION<br>SOUTH INDIAN LAKE, MANITOBA R0B 1N0<br>PH (204) 374-2013<br>FAX (204) 374-2039   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | SPLIT LAKE NURSING STATION<br>SPLIT LAKE, MANITOBA R0B 1P0<br>PH (204) 342-2033<br>FAX (204) 342-2319   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | ST. THERESA POINT NURSING STATION<br>ST. THERESA POINT, MANITOBA R0B 1J0<br>PH (204) 462-2473<br>FAX (204) 462-2642   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | TADOULE LAKE NURSING STATION<br>TADOULE LAKE, MANITOBA R0B 2C0<br>PH (204) 684-2031<br>FAX (204) 684-2049   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | WASAGAMACK NURSING STATION<br>WASAGAMACK, MANITOBA R0B 1Z0<br>PH (204) 457-2189<br>FAX (204) 457-2348   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | BERENS RIVER NURSING STATION<br>BERENS RIVER, MANITOBA R0B 0A0<br>PH (204) 382-2265<br>FAX (204) 382-2005   |
| HEALTH CANADA<br>300-391 YORK AVENUE<br>WINNIPEG, MANITOBA R3C 4W1  | YORK LANDING NURSING STATION<br>YORK LANDING, MANITOBA R0B 2B0<br>PH (204) 341-2325<br>FAX (204) 341-2179   |
| <b>Ontario</b>  |   |
| <b>Billing Address</b>  | <b>Delivery Address</b>   |
| SUPPLY CHAIN AND FACILITIES BRANCH<br>MINISTRY OF HEALTH AND LONG-TERM CARE<br>99 ADDESSO DRIVE<br>CONCORD, ON L4K 3C7<br>ATT: LORI CHEWINS, 416-327-0831 | ONTARIO GOVERNMENT PHARMACEUTICAL AND MEDICAL<br>SUPPLY SERVICE (OGPMSS)<br>SUPPLY CHAIN AND FACILITIES BRANCH<br>MINISTRY OF HEALTH AND LONG-TERM CARE<br>99 ADDESSO DRIVE<br>CONCORD, ON L4K 3C7<br>ATT: ANISA KAZI, 416-326-9136 |

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| PEI  |   |
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| Billing Address  | Delivery Address  |
| PROVINCIAL PHARMACY<br>P.O. BOX 2000<br>16 FITZROY STREET<br>CHARLOTTETOWN, PEI C1A 7N8<br>ATT: BLAMACDONALD@IHIS.ORG                                    | PROVINCIAL PHARMACY<br>P.O. BOX 2000<br>16 FITZROY STREET<br>CHARLOTTETOWN, PEI C1A 7N8<br>ATT: BETTY MACDONALD, 902-368-4902 |
| Manitoba   |   |
| Billing Address  | Delivery Address  |
| WINNIPEG REGIONAL HEALTH AUTHORITY<br>4TH FLOOR, 650 MAIN STREET<br>WINNIPEG, MB R3B 1E2<br>ATT: ALISON BOCKSTAEL, 204-926-7163<br>ABOCKSTAEL@WRHA.MB.CA | THE PRESCRIPTION SHOP #4<br>100-825 SHERBROOK ST.<br>WINNIPEG, MB R3A 1M5<br>PH (204) 774-7711<br>FAX (204) 783-6603          |

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### Annex C Example of Periodic Report

Name of Contractor: \_\_\_\_\_ Contract Number: \_\_\_\_\_

Reporting Period:

Start \_\_\_\_\_ (dd/mm/yyyy)  
End \_\_\_\_\_ (dd/mm/yyyy)

| Item # | Item Description | DIN | U of I | Pkg Sizes | CSC Qty Sold | DND Qty Sold | HC-AB Qty Sold | Total Qty Sold | Contract Price | Item Total      |
|--------|------------------|-----|--------|-----------|--------------|--------------|----------------|----------------|----------------|-----------------|
| 1      | Prod. A          | 123 | TU     | 75g       | 10           | 5            | 0              | 15             | \$5.60         | \$84.00         |
| 2      | Prod. B          | 465 | TU     | 120g      | 0            | 5            | 0              | 5              | \$5.00         | \$25.00         |
| 3      | Prod. C          | 784 | EA     | 100g      | 20           | 0            | 0              | 40             | \$8.10         | \$324.00        |
|        |                  |     |        |           |              |              |                |                | <b>Total</b>   | <b>\$433.00</b> |



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## **Annex D – Return Policy**

To be inserted at Contract award

## **ANNEX E**

### **TECHNICAL MANDATORY CRITERIA**

A Bid must meet all Mandatory Criteria (M1-M3). Failure on the part of the Bidder to meet any one (1) of the Mandatory Criteria will result in their bid being deemed non-responsive, and their bid will be given no further consideration.

#### **MANDATORY CRITERIA**

**M1.** Bidders must agree to the *Disclosure of Information - Pharmaceutical Prime Vendor Standing Offer Holder* clause.

The Bidder agrees to appoint Canada's Pharmaceutical Prime Vendor, or another prime distributor as may be the case, as an Authorized Agent for the purposes of:

- (i) receiving and fulfilling orders under the Standing Offer, and
- (ii) receiving payment

Yes \_\_\_\_\_ No \_\_\_\_\_

**M2.** Where the Unit of Measure is per tablet or capsule, Bidders must submit one price per single capsule or tablet. Bidder must agree to keep price per Unit of Measure the same regardless of format size. As an example, if the unit price per tablet is \$0.25, it would remain the same for a bottle of 100 tablets (\$25.00) or 200 tablets (\$50.00).

Yes \_\_\_\_\_ No \_\_\_\_\_

**M3.** Bidder must agree to keep unit prices firm for the entire period of the contract. (i.e. firm year and option years).

Yes \_\_\_\_\_ No \_\_\_\_\_

## Annex F - Financial Offer

Based on the methodology detailed below, bids meeting all the mandatory criteria will be evaluated on the basis of their financial offer.

### 1. Price Calculation

Bidders with the lowest responsive price per item will be recommended for contract award.

Items 18, 25, 97, 113, 139, 149, 168, 176, 191, 192, 207, 214, 229, 235, 238, and 250 will be evaluated by the lowest aggregate price per grouping for that item. As an example, the bidder with the lowest aggregate price per grouping for item #18 will be awarded all the products listed in that item.

In Annex A -1, Bidders must fill in their firm unit price per Unit of Measure (U of M) in column (B), titled *Firm Price per U of M*. The unit price contained in Column (B) will be multiplied by the total quantity in Column (A), titled *Maximum Total Estimated Quantities*, to give a total extended price in Column (C) (ex:  $A \times B = C$ ).

The price per unit of measure must remain the same regardless of format size. As an example, if the unit price per was \$0.25, it would remain the same for a bottle of 100 s (\$25.00) or 200 s (\$50.00).

An electronic copy of Annex A-1 will be provided upon request. Please send requests to [suzanne.bissonnette@pwgsc.gc.ca](mailto:suzanne.bissonnette@pwgsc.gc.ca) 5 days prior to bid closing date and time.

**ANNEX G to PART 5 - BID SOLICITATION  
FEDERAL CONTRACTORS PROGRAM FOR EMPLOYMENT EQUITY - CERTIFICATION**

I, the Bidder, by submitting the present information to the Contracting Authority, certify that the information provided is true as of the date indicated below. The certifications provided to Canada are subject to verification at all times. I understand that Canada will declare a bid non-responsive, or will declare a contractor in default, if a certification is found to be untrue, whether during the bid evaluation period or during the contract period. Canada will have the right to ask for additional information to verify the Bidder's certifications. Failure to comply with any request or requirement imposed by Canada may render the bid non-responsive or constitute a default under the Contract.

For further information on the Federal Contractors Program for Employment Equity visit Employment and Social Development Canada (ESDC) - Labour([http://www.labour.gc.ca/eng/standards\\_equity/eq/emp/fcp/index.shtml](http://www.labour.gc.ca/eng/standards_equity/eq/emp/fcp/index.shtml)) website.

Date: \_\_\_\_\_(YYYY/MM/DD) (If left blank, the date will be deemed to be the bid solicitation closing date.)

Complete both A and B.

A. Check only one of the following:

- ☐ A1. The Bidder certifies having no work force in Canada.
- ☐ A2. The Bidder certifies being a public sector employer.
- ☐ A3. The Bidder certifies being a federally regulated employer being subject to the Employment Equity Act.
- ☐ A4. The Bidder certifies having a combined work force in Canada of less than 100 employees (combined work force includes: permanent full-time, permanent part-time and temporary employees [temporary employees only includes those who have worked 12 weeks or more during a calendar year and who are not full-time students]).
- A5. The Bidder has a combined workforce in Canada of 100 or more employees; and

☐ A5.1. The Bidder certifies already having a valid and current Agreement to Implement Employment Equity (AIEE) in place with ESDC-Labour.

**OR**

☐ A5.2. The Bidder certifies having submitted the Agreement to Implement Employment Equity (LAB1168) to ESDC-Labour. As this is a condition to contract award, proceed to completing the form Agreement to Implement Employment Equity (LAB1168), duly signing it, and transmit it to ESDC-Labour.

B. Check only one of the following:

- ☐ B1. The Bidder is not a Joint Venture.

**OR**

- ☐ B2. The Bidder is a Joint Venture and each member of the Joint Venture must provide the Contracting Authority with a completed annex Federal Contractors Program for Employment Equity - Certification. (Refer to the Joint Venture section of the Standard Instructions)

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E60PH-16DRUG

File No. - N du dossier  
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| FORM 1 - BID SUBMISSION   |                           |  |
|---|---------------------------|--|
| Bidder's full legal name  |                           |  |
| Bidder's Address  |                           |  |
| Bidder's Procurement Business Number (PBN)  |                           |  |
| Province in Canada the Bidder wishes to be the legal jurisdiction applicable to any resulting Contract (if other than as specified in solicitation) |                           |  |
| Contractor Representative – General enquiries   | Name                      |  |
|   | Title                     |  |
|   | Telephone #               |  |
|   | Facsimile #               |  |
|   | E-mail                    |  |
| Contractor Representative – Delivery follow-up  | Name                      |  |
|   | Title                     |  |
|   | Telephone #               |  |
|   | Facsimile #               |  |
|   | E-mail                    |  |
| Returns   | Address to return product |  |
|   | Contact Name              |  |
|   | Telephone #               |  |
|   | Facsimile #               |  |
|   | E-mail                    |  |
| Point of Manufacturing/Shipping   | Manufacturing             |  |
|   | Shipping                  |  |
| Contractor's Bid Dated  |                           |  |

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### FORM 1 - BID SUBMISSION

**Bidders who are incorporated, including those bidding as a joint venture, must provide a complete list of names of all individuals who are currently directors of the Bidder. Bidders bidding as sole proprietorship, including those bidding as a joint venture, must provide the name of the owner.**

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On behalf of the Bidder, by signing below, I further confirm that I have read the entire bid solicitation including the documents incorporated by reference into the bid solicitation and:

1. The Bidder considers itself and its Products able to meet all the mandatory requirements described in the bid solicitation;
2. This Bid is valid for the period requested in the bid solicitation;
3. All the information provided in the bid is complete, true and accurate; and
4. If the Bidder is issued a Contract, it will accept all the terms and conditions set out in the resulting contract included in the bid solicitation.

**Signature of Authorized Representative of Bidder**

|  |
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**ANNEX A-1  
STATEMENT OF REQUIREMENT, PRICING AND DELIVERABLES**

An electronic copy of the spreadsheet can be requested from the Contracting Authority by sending an e-mail to: suzanne.bissonnette@pwpsc.gc.ca

| Item # | Description  | CSC Qty | DND Qty   | HC/AB Qty | HC/MB Qty | MB Qty | ON Qty***  | PEI Qty | Total Estimated Quantities | Overage   | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U or M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size ** | DIN | BIDDER MUST COMPLETE:<br>All format sizes available from Supplier | Supplier's product number(s) |
|--------|--|---------|-----------|-----------|-----------|--------|------------|---------|----------------------------|-----------|------------------------------|--|--------------------------|----------------------------|--------------------------|---------------------------------|-----|---|------------------------------|
| 1      | ABACA VIR SUFATE/LAMIVUDINE TABLET 600-300MG ORAL  | 7,000   | 720       | 0         | 0         | 0      | 0          | 0       | 7,720                      | 1,544     | 6,948                        | 9,264                                  | TABLET                   | \$                         | \$                       | 30                              |     |   |                              |
| 2      | ACETAMINOPHEN LIQUID 160 MG/5ML ORAL               | 0       | 0         | 4,436     | 18,000    | 0      | 0          | 0       | 22,436                     | 4,487     | 20,192                       | 26,923                                 | BOTTLE                   | \$                         | \$                       | 100ML                           |     |   |                              |
| 3      | ACETAMINOPHEN LIQUID 160 MG/5ML ORAL               | 0       | 0         | 0         | 0         | 0      | 0          | 12,500  | 12,500                     | 2,500     | 11,250                       | 15,000                                 | BOTTLE                   | \$                         | \$                       | 500ML                           |     |   |                              |
| 4      | ACETAMINOPHEN TAB CHEW 160 MG ORAL                 | 0       | 80,000    | 58,140    | 0         | 0      | 0          | 0       | 138,140                    | 27,628    | 124,326                      | 165,768                                | TABLET                   | \$                         | \$                       | VARIOUS SIZES<br>between 12-500 |     |   |                              |
| 5      | ACETAMINOPHEN TABLET 325 MG ORAL                   | 0       | 372,225   | 68,400    | 1,328,620 | 0      | 33,500,000 | 205,000 | 35,474,245                 | 7,094,849 | 31,976,821                   | 42,569,094                             | TABLET                   | \$                         | \$                       | VARIOUS SIZES<br>between 12-500 |     |   |                              |
| 6      | ACETAMINOPHEN TABLET 500 MG ORAL                   | 900,000 | 1,300,000 | 52,000    | 0         | 0      | 29,600,000 | 224,000 | 32,076,000                 | 6,415,200 | 28,868,400                   | 38,491,200                             | TABLET                   | \$                         | \$                       | VARIOUS SIZES<br>between 12-500 |     |   |                              |
| 7      | ACETYLSALICYLIC ACID TAB CHEW 80 or 81 MG ORAL     | 0       | 35,600    | 7,200     | 2,400     | 0      | 0          | 30,000  | 75,200                     | 15,040    | 67,680                       | 90,240                                 | TABLET                   | \$                         | \$                       | VARIOUS SIZES<br>between 12-500 |     |   |                              |
| 8      | ACETYLSALICYLIC ACID TABLET 325 MG ORAL            | 6,000   | 14,300    | 0         | 0         | 0      | 0          | 800     | 21,100                     | 4,220     | 18,990                       | 25,320                                 | TABLET                   | \$                         | \$                       | VARIOUS SIZES<br>between 12-500 |     |   |                              |
| 9      | ACETYLSALICYLIC ACID TABLET DR 325 MG ORAL         | 0       | 3,26,925  | 0         | 0         | 0      | 0          | 2,400   | 329,325                    | 65,865    | 296,393                      | 395,190                                | TABLET                   | \$                         | \$                       | VARIOUS SIZES<br>between 12-500 |     |   |                              |
| 10     | ACETYLSALICYLIC ACID TABLET DR 80 or 81 MG ORAL    | 85,000  | 0         | 22,000    | 0         | 0      | 0          | 38,520  | 145,520                    | 29,104    | 130,968                      | 174,624                                | TABLET                   | \$                         | \$                       | VARIOUS SIZES<br>between 12-500 |     |   |                              |
| 11     | ACYCLOVIR TABLET 200 MG ORAL                       | 1,300   | 6,200     | 3,000     | 2,200     | 0      | 0          | 700     | 13,400                     | 2,680     | 12,060                       | 16,080                                 | TABLET                   | \$                         | \$                       | 100-500                         |     |   |                              |
| 12     | ACYCLOVIR TABLET 400 MG ORAL                       | 1,200   | 6,200     | 0         | 0         | 0      | 0          | 600     | 8,000                      | 1,600     | 7,200                        | 9,600                                  | TABLET                   | \$                         | \$                       | 100-500                         |     |   |                              |
| 13     | ACYCLOVIR TABLET 800 MG ORAL                       | 0       | 200       | 0         | 0         | 0      | 0          | 0       | 200                        | 40        | 180                          | 240                                    | TABLET                   | \$                         | \$                       | 100-500                         |     |   |                              |
| 14     | AMIODARONE HCL VIAL 50 MG/ML INTRAVEN              | 5       | 700       | 260       | 0         | 0      | 0          | 0       | 965                        | 193       | 869                          | 1,158                                  | VIAL                     | \$                         | \$                       | 1x3ML, 10x3ML                   |     |   |                              |
| 15     | AMITRIPTYLINE HCL TABLET 10 MG ORAL                | 0       | 0         | 0         | 0         | 0      | 0          | 5,000   | 5,000                      | 1,000     | 4,500                        | 6,000                                  | TABLET                   | \$                         | \$                       | 100                             |     |   |                              |
| 16     | AMITRIPTYLINE HCL TABLET 25 MG ORAL                | 0       | 0         | 0         | 0         | 0      | 0          | 7,000   | 7,000                      | 1,400     | 6,300                        | 8,400                                  | TABLET                   | \$                         | \$                       | 100                             |     |   |                              |
| 17     | AMITRIPTYLINE HCL TABLET 50 MG ORAL                | 0       | 0         | 0         | 0         | 0      | 100,000    | 1,600   | 101,600                    | 20,320    | 91,440                       | 121,920                                | TABLET                   | \$                         | \$                       | 100                             |     |   |                              |
| 18     | a) AMLODIPINE BESYLATE TABLET 10 MG ORAL           | 53,475  | 55,000    | 0         | 0         | 0      | 0          | 7,500   | 115,975                    | 23,195    | 104,378                      | 139,170                                | TABLET                   | \$                         | \$                       | 100-500                         |     |   |                              |
|        | b) AMLODIPINE BESYLATE TABLET 2.5 MG ORAL          | 0       | 0         | 0         | 0         | 0      | 0          | 8,000   | 8,000                      | 1,600     | 7,200                        | 9,600                                  | TABLET                   | \$                         | \$                       | 100                             |     |   |                              |
|        | c) AMLODIPINE BESYLATE TABLET 5 MG ORAL            | 67,000  | 80,000    | 0         | 0         | 0      | 0          | 18,000  | 165,000                    | 33,000    | 148,500                      | 198,000                                | TABLET                   | \$                         | \$                       | 100-500                         |     |   |                              |
| 19     | AMOXICILLIN CAPSULE 250 MG ORAL                    | 0       | 0         | 16,400    | 38,300    | 0      | 0          | 3,000   | 57,700                     | 11,540    | 51,930                       | 69,240                                 | CAPSULE                  | \$                         | \$                       | 100                             |     |   |                              |
| 20     | AMOXICILLIN CAPSULE 500 MG ORAL                    | 14,000  | 101,800   | 24,000    | 161,900   | 0      | 60,000     | 1,200   | 382,900                    | 72,580    | 326,610                      | 435,480                                | CAPSULE                  | \$                         | \$                       | 100-500                         |     |   |                              |
| 21     | AMOXICILLIN SUSP RECON 250 MG/5ML ORAL             | 0       | 0         | 1,500     | 0         | 0      | 0          | 1,200   | 2,700                      | 540       | 2,430                        | 3,240                                  | BOTTLE                   | \$                         | \$                       | 100ML, 150ML                    |     |   |                              |
| 22     | AMOXICILLIN/POTASS CLAV SUSP RECON 250-62.5/5 ORAL | 0       | 0         | 0         | 500       | 0      | 0          | 600     | 1,100                      | 220       | 990                          | 1,320                                  | BOTTLE                   | \$                         | \$                       | 100ML                           |     |   |                              |
| 23     | AMOXICILLIN/POTASSIUM CLAV TABLET 500-125 MG ORAL  | 3,000   | 9,675     | 10,000    | 0         | 0      | 0          | 1,600   | 24,275                     | 4,855     | 21,848                       | 29,130                                 | TABLET                   | \$                         | \$                       | 100-500                         |     |   |                              |
| 24     | AMOXICILLIN/POTASSIUM CLAV TABLET 875-125 MG ORAL  | 2,500   | 11,700    | 11,000    | 4,400     | 0      | 0          | 300     | 29,900                     | 5,980     | 26,910                       | 35,880                                 | TABLET                   | \$                         | \$                       | 20,100,500                      |     |   |                              |
| 25     | a) ATOMOXETINE HCL CAPSULE 10 MG ORAL              | 5,500   | 1,400     | 0         | 0         | 0      | 0          | 0       | 6,900                      | 1,380     | 6,210                        | 8,280                                  | CAPSULE                  | \$                         | \$                       | 30-100                          |     |   |                              |
|        | b) ATOMOXETINE HCL CAPSULE 100 MG ORAL             | 0       | 700       | 0         | 0         | 0      | 0          | 0       | 700                        | 140       | 630                          | 840                                    | CAPSULE                  | \$                         | \$                       | 30-100                          |     |   |                              |
|        | c) ATOMOXETINE HCL CAPSULE 18 MG ORAL              | 550     | 1,875     | 0         | 0         | 0      | 0          | 0       | 2,425                      | 485       | 2,183                        | 2,910                                  | CAPSULE                  | \$                         | \$                       | 30-100                          |     |   |                              |
|        | d) ATOMOXETINE HCL CAPSULE 25 MG ORAL              | 9,360   | 4,260     | 0         | 0         | 0      | 0          | 0       | 13,620                     | 2,734     | 12,258                       | 16,344                                 | CAPSULE                  | \$                         | \$                       | 30-100                          |     |   |                              |
|        | e) ATOMOXETINE HCL CAPSULE 40 MG ORAL              | 13,000  | 7,800     | 0         | 0         | 0      | 0          | 0       | 20,800                     | 4,160     | 18,720                       | 24,960                                 | CAPSULE                  | \$                         | \$                       | 30-100                          |     |   |                              |
|        | f) ATOMOXETINE HCL CAPSULE 60 MG ORAL              | 3,300   | 2,800     | 0         | 0         | 0      | 0          | 0       | 6,100                      | 1,220     | 5,490                        | 7,320                                  | CAPSULE                  | \$                         | \$                       | 30-100                          |     |   |                              |

| Item # | Description  | CSC QTY | DND QTY | HC/AB QTY | HC/MB QTY | MB QTY | ON QTY**  | PEI QTY | Total Estimated Quantities | Overage | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size ** | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|--|---------|---------|-----------|-----------|--------|-----------|---------|----------------------------|---------|------------------------------|--|--------------------------|----------------------------|--------------------------|---------------------------------|-----|--|------------------------------|
|        | (g) ATOMOXETINE HCL CAPSULE 80 MG ORAL             | 700     | 780     | 0         | 0         | 0      | 0         | 0       | 1,480                      | 296     | 1,332                        | 1,776                                  | CAPSULE                  | \$                         | \$                       | 30,100                          |     |  |                              |
| 26     | ATORVASTATIN CALCIUM TABLET 10 MG ORAL             | 80,000  | 120,000 | 0         | 0         | 0      | 40,000    | 4,200   | 244,800                    | 48,960  | 220,320                      | 293,760                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 27     | ATORVASTATIN CALCIUM TABLET 20 MG ORAL             | 100,000 | 170,025 | 0         | 0         | 0      | 0         | 2,800   | 272,825                    | 54,565  | 245,543                      | 327,390                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 28     | ATORVASTATIN CALCIUM TABLET 40 MG ORAL             | 88,350  | 108,700 | 0         | 0         | 0      | 35,000    | 2,600   | 234,650                    | 46,930  | 211,185                      | 281,580                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 29     | ATORVASTATIN CALCIUM TABLET 80 MG ORAL             | 27,780  | 25,200  | 0         | 0         | 0      | 0         | 90      | 53,070                     | 10,614  | 47,763                       | 63,684                                 | TABLET                   | \$                         | \$                       | 90,100,500                      |     |  |                              |
| 30     | AZITHROMYCIN SUSP RECON 200 MG/5ML ORAL            | 0       | 0       | 390       | 674       | 0      | 0         | 0       | 1,064                      | 213     | 958                          | 1,277                                  | BOTTLE                   | \$                         | \$                       | 15ML                            |     |  |                              |
| 31     | AZITHROMYCIN SUSP RECON 200 MG/5ML ORAL            | 0       | 0       | 0         | 0         | 0      | 0         | 45      | 45                         | 9       | 41                           | 54                                     | BOTTLE                   | \$                         | \$                       | 22,5ML                          |     |  |                              |
| 32     | AZITHROMYCIN TABLET 250 MG ORAL                    | 1,950   | 20,700  | 5,000     | 25,000    | 0      | 270,000   | 300     | 322,950                    | 64,590  | 290,655                      | 387,540                                | TABLET                   | \$                         | \$                       | 6,100                           |     |  |                              |
| 33     | BACTRACIN/POLYMX B SULF OINT (G) 500-10K/G TOP     | 1,973   | 1,475   | 2,400     | 0         | 0      | 0         | 0       | 5,798                      | 1,160   | 5,218                        | 6,958                                  | TUBE                     | \$                         | \$                       | 15G                             |     |  |                              |
| 34     | BACTRACIN/POLYMX B SULF OINT (G) 500-10K/G TOP     | 130     | 6,000   | 0         | 0         | 0      | 0         | 0       | 6,130                      | 1,226   | 5,517                        | 7,356                                  | TUBE                     | \$                         | \$                       | 30G                             |     |  |                              |
| 35     | BACTRACIN ZN/POLYMX B SULF OINT (G) 500-10K/G TOP  | 0       | 0       | 0         | 0         | 0      | 2,300     | 1,890   | 4,190                      | 838     | 3,771                        | 5,028                                  | TUBE                     | \$                         | \$                       | 30G                             |     |  |                              |
| 36     | BACLOFEN TABLET 10 MG ORAL                         | 22,000  | 23,700  | 0         | 0         | 0      | 0         | 21,000  | 66,700                     | 13,340  | 60,030                       | 80,040                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 37     | BECLOMETHASONE DIPROPIONATE SPRAY 50 MCG NASAL     | 2,200   | 525     | 0         | 0         | 0      | 650       | 200     | 3,575                      | 715     | 3,218                        | 4,290                                  | SPRAY PUMP               | \$                         | \$                       | 200DS                           |     |  |                              |
| 38     | BETAMETHASONE VALERATE CREAM (G) 0.05% TOPICAL     | 133     | 0       | 0         | 0         | 0      | 0         | 2,350   | 2,483                      | 497     | 2,235                        | 2,980                                  | JAR                      | \$                         | \$                       | 450G                            |     |  |                              |
| 39     | BETAMETHASONE VALERATE CREAM (G) 0.10% TOPICAL     | 0       | 0       | 10        | 0         | 0      | 0         | 0       | 10                         | 2       | 9                            | 12                                     | TUBE                     | \$                         | \$                       | 30G                             |     |  |                              |
| 40     | BETAMETHASONE VALERATE CREAM (G) 0.10% TOPICAL     | 890     | 0       | 20        | 0         | 0      | 0         | 15      | 865                        | 173     | 779                          | 1,038                                  | JAR                      | \$                         | \$                       | 450G, 454G                      |     |  |                              |
| 41     | BETAMETHASONE VALERATE LOTION 0.10% TOPICAL        | 401     | 0       | 0         | 0         | 0      | 0         | 162     | 563                        | 113     | 507                          | 676                                    | BOTTLE                   | \$                         | \$                       | 75ML                            |     |  |                              |
| 42     | BISACODYL TABLET DR EC 5 MG ORAL                   | 5,500   | 15,000  | 0         | 0         | 0      | 1,200,000 | 12,700  | 1,233,200                  | 246,640 | 1,109,880                    | 1,479,840                              | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 43     | BUPROPION HCL TAB ER 24H 150 MG ORAL               | 0       | 166,950 | 0         | 0         | 0      | 54,000    | 0       | 220,950                    | 44,190  | 198,855                      | 265,140                                | TABLET                   | \$                         | \$                       | 90                              |     |  |                              |
| 44     | BUPROPION HCL TAB ER 24H 300 MG ORAL               | 0       | 117,000 | 0         | 0         | 0      | 45,000    | 90      | 162,090                    | 32,418  | 145,881                      | 194,508                                | TABLET                   | \$                         | \$                       | 90                              |     |  |                              |
| 45     | BUPROPION HCL TABLET ER 100 MG ORAL                | 18,000  | 9,900   | 0         | 0         | 0      | 0         | 400     | 28,300                     | 5,660   | 25,470                       | 33,960                                 | TABLET                   | \$                         | \$                       | 30,60,100                       |     |  |                              |
| 46     | BUPROPION HCL TABLET ER 150 MG ORAL                | 145,000 | 31,000  | 0         | 0         | 0      | 0         | 2,000   | 178,000                    | 35,600  | 160,200                      | 213,600                                | TABLET                   | \$                         | \$                       | 30,60,100                       |     |  |                              |
| 47     | BUSPIRONE HCL TABLET 10 MG ORAL                    | 125,400 | 18,000  | 0         | 0         | 0      | 110,000   | 2,800   | 256,200                    | 51,240  | 230,580                      | 307,440                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 48     | CEFAZOLIN SODIUM VIAL 1 G INJECTION                | 120     | 0       | 400       | 220       | 0      | 0         | 0       | 740                        | 148     | 666                          | 888                                    | VIAL                     | \$                         | \$                       | 1x1G, 10x1G                     |     |  |                              |
| 49     | CEFTRIME TABLET 400 MG ORAL                        | 214     | 0       | 1,000     | 1,100     | 0      | 0         | 0       | 2,314                      | 463     | 2,083                        | 2,777                                  | TABLET                   | \$                         | \$                       | 7,10                            |     |  |                              |
| 50     | CEFTRIAZONE SODIUM VIAL 1 G INJECTION              | 75      | 470     | 0         | 8,130     | 0      | 0         | 200     | 8,975                      | 1,775   | 7,988                        | 10,950                                 | VIAL                     | \$                         | \$                       | 1G, 10x1G                       |     |  |                              |
| 51     | CELECOXIB CAPSULE 100 MG ORAL                      | 10,000  | 0       | 0         | 0         | 0      | 0         | 0       | 10,000                     | 2,000   | 9,000                        | 12,000                                 | CAPSULE                  | \$                         | \$                       | 500                             |     |  |                              |
| 52     | CELECOXIB CAPSULE 200 MG ORAL                      | 40,000  | 0       | 0         | 0         | 0      | 0         | 0       | 40,000                     | 8,000   | 36,000                       | 48,000                                 | CAPSULE                  | \$                         | \$                       | 500                             |     |  |                              |
| 53     | CEPHALEXIN MONOHYDRATE SUSP RECON 250 MG/5ML ORAL  | 0       | 0       | 500       | 6,200     | 0      | 0         | 500     | 7,200                      | 1,440   | 6,480                        | 8,640                                  | BOTTLE                   | \$                         | \$                       | 100                             |     |  |                              |
| 54     | CEPHALEXIN MONOHYDRATE TABLET 250 MG ORAL          | 10,000  | 6,200   | 1,000     | 100,000   | 0      | 0         | 2,600   | 119,800                    | 23,960  | 107,820                      | 143,760                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 55     | CEPHALEXIN MONOHYDRATE TABLET 500 MG ORAL          | 20,000  | 81,000  | 0         | 250,000   | 0      | 0         | 1,000   | 352,000                    | 70,400  | 316,800                      | 422,400                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 56     | CETIRIZINE HCL TABLET 10 MG ORAL                   | 250,000 | 365,000 | 9,616     | 16,200    | 0      | 85,000    | 16,000  | 741,816                    | 148,363 | 667,634                      | 890,179                                | TABLET                   | \$                         | \$                       | 18,100,500                      |     |  |                              |
| 57     | CETIRIZINE HCL TABLET 20 MG ORAL                   | 1,400   | 26,000  | 0         | 0         | 0      | 0         | 0       | 27,400                     | 5,480   | 24,660                       | 32,880                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
|        | CHLORHEXIDINE GLUCONATE MOUTHWASH 0.12% MUCOUS MEM | 95      | 0       | 0         | 0         | 0      | 0         | 0       | 95                         | 19      | 86                           | 114                                    | BOTTLE                   | \$                         | \$                       | 475ML                           |     |  |                              |



| Item # | Description  | CSC Qty | DND Qty | HC/AB Qty | HC/MB Qty | MB Qty | ON Qty** | PEI Qty | Total Estimated Quantities | Overage | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size ** | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|--|---------|---------|-----------|-----------|--------|----------|---------|----------------------------|---------|------------------------------|--|--------------------------|----------------------------|--------------------------|---------------------------------|-----|--|------------------------------|
| 59     | CLIAZAPRIL TABLET 2.5 MG ORAL                                | 0       | 0       | 0         | 0         | 0      | 0        | 600     | 600                        | 120     | 540                          | 720                                    | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 60     | CLIAZAPRIL TABLET 5 MG ORAL                                  | 0       | 82,500  | 0         | 0         | 0      | 0        | 300     | 82,800                     | 15,560  | 74,520                       | 99,560                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 61     | CLIAZAPRIL/HYDROCHLOROTHIAZIDE TAB 5MG/12.5MG ORAL           | 0       | 52,000  | 0         | 0         | 0      | 0        | 0       | 52,000                     | 10,400  | 46,800                       | 62,400                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 62     | CIPROFLOXACIN HCL TABLET 250 MG ORAL                         | 1,900   | 3,300   | 7,000     | 22,600    | 0      | 0        | 2,500   | 37,300                     | 7,460   | 33,570                       | 44,760                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 63     | CIPROFLOXACIN HCL TABLET 500 MG ORAL                         | 8,500   | 38,000  | 4,000     | 0         | 0      | 0        | 400     | 50,900                     | 10,180  | 45,810                       | 61,080                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 64     | CIPROFLOXACIN HCL/DEXAMETH DROP SUSP 0.3-0.1% OTIC 7.5ML     | 0       | 0       | 250       | 660       | 0      | 0        | 0       | 910                        | 182     | 819                          | 1,092                                  | BOTTLE                   | \$                         | \$                       | 7.5ML                           |     |  |                              |
| 65     | CITALOPRAM HYDROBROMIDE TABLET 10 MG ORAL                    | 62,550  | 0       | 0         | 0         | 0      | 0        | 51,300  | 113,850                    | 22,770  | 102,465                      | 136,620                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 66     | CITALOPRAM HYDROBROMIDE TABLET 20 MG ORAL                    | 78,500  | 300,000 | 0         | 0         | 0      | 45,000   | 38,000  | 461,500                    | 92,300  | 415,350                      | 553,800                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 67     | CITALOPRAM HYDROBROMIDE TABLET 40 MG ORAL                    | 39,500  | 75,000  | 0         | 0         | 0      | 0        | 5,500   | 120,000                    | 24,000  | 108,000                      | 144,000                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 68     | CLARITHROMYCIN TAB ER 24H 500 MG ORAL                        | 0       | 6,420   | 1,440     | 0         | 0      | 0        | 0       | 7,860                      | 1,572   | 7,074                        | 9,432                                  | TABLET                   | \$                         | \$                       | 60                              |     |  |                              |
| 69     | CLARITHROMYCIN TABLET 250 MG ORAL                            | 1,400   | 2,800   | 0         | 0         | 0      | 0        | 400     | 4,600                      | 920     | 4,140                        | 5,520                                  | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 70     | CLARITHROMYCIN TABLET 500 MG ORAL                            | 1,000   | 25,800  | 0         | 0         | 0      | 0        | 900     | 27,700                     | 5,540   | 24,930                       | 33,240                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 71     | CLINDAMYCIN HCL CAPSULE 150 MG ORAL                          | 9,000   | 12,525  | 6,000     | 80,800    | 0      | 0        | 500     | 108,825                    | 21,765  | 97,943                       | 130,590                                | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
| 72     | CLINDAMYCIN HCL CAPSULE 300 MG ORAL                          | 4,000   | 22,900  | 2,000     | 0         | 0      | 30,000   | 300     | 59,200                     | 11,840  | 53,280                       | 71,040                                 | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
| 73     | CLINDAMYCIN PHOS/BENZYOYL PEROX GEL(GR) 1%-5% TOP 45G or 50G | 1,500   | 292     | 0         | 0         | 0      | 0        | 0       | 1,792                      | 358     | 1,613                        | 2,150                                  | PUMP                     | \$                         | \$                       | 45G, 50G                        |     |  |                              |
| 74     | CLINDAMYCIN PHOSPHATE VIAL 150 MG/ML INJECTION 2ML           | 0       | 0       | 20        | 0         | 0      | 0        | 0       | 20                         | 4       | 18                           | 24                                     | VIAL                     | \$                         | \$                       | 10x2ML                          |     |  |                              |
| 75     | CLINDAMYCIN PHOSPHATE VIAL 150 MG/ML INJECTION 4ML           | 0       | 0       | 0         | 11,000    | 0      | 0        | 0       | 11,000                     | 2,200   | 9,800                        | 13,200                                 | VIAL                     | \$                         | \$                       | 10x4ML                          |     |  |                              |
| 76     | CLONIDINE HCL TABLET 0.1 MG ORAL                             | 106,800 | 0       | 0         | 2,200     | 0      | 120,000  | 200     | 229,200                    | 45,840  | 206,280                      | 275,040                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 77     | CLOPIDOGREL BISULFATE TABLET 75 MG ORAL                      | 40,000  | 18,100  | 720       | 660       | 0      | 0        | 20,100  | 79,580                     | 15,916  | 71,622                       | 95,496                                 | TABLET                   | \$                         | \$                       | 30,100,500                      |     |  |                              |
| 78     | CLOTIRMAZOLE CREAM (GI) 1% TOPICAL 30G                       | 0       | 0       | 400       | 0         | 0      | 700      | 100     | 1,200                      | 240     | 1,080                        | 1,440                                  | TUBE                     | \$                         | \$                       | 30G                             |     |  |                              |
| 79     | CLOTIRMAZOLE CREAM (GI) 1% TOPICAL 500G                      | 339     | 0       | 0         | 0         | 0      | 0        | 18      | 357                        | 71      | 321                          | 428                                    | JAR                      | \$                         | \$                       | 500G                            |     |  |                              |
| 80     | CLOZAPINE TABLET 100 MG ORAL                                 | 39,000  | 1,300   | 0         | 0         | 0      | 0        | 4,400   | 44,700                     | 8,940   | 40,230                       | 53,640                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 81     | CLOZAPINE TABLET 25 MG ORAL                                  | 25,800  | 750     | 0         | 0         | 0      | 0        | 7,000   | 33,550                     | 6,710   | 30,195                       | 40,260                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 82     | CODINE/ACETAMINOPHEN/CAFFEINE TAB 30-300-15 ORAL             | 225,000 | 183,750 | 0         | 0         | 0      | 0        | 8,500   | 417,250                    | 83,450  | 375,525                      | 500,700                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 83     | CODINE/ACETAMINOPHEN/CAFFEINE TAB 30-325-30 ORAL             | 45,269  | 0       | 0         | 0         | 0      | 0        | 0       | 45,269                     | 9,054   | 40,742                       | 54,323                                 | TABLET                   | \$                         | \$                       | 500                             |     |  |                              |
| 84     | CYCLOBENZAPRINE HCL TABLET 10 MG ORAL                        | 15,000  | 120,000 | 2,500     | 0         | 0      | 80,000   | 0       | 217,500                    | 43,500  | 195,750                      | 261,000                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 85     | CYCLOSPORINE, MODIFIED CAPSULE 100 MG ORAL                   | 1,300   | 1,680   | 0         | 0         | 0      | 0        | 9,750   | 12,730                     | 2,546   | 11,457                       | 15,276                                 | CAPSULE                  | \$                         | \$                       | 30                              |     |  |                              |
| 86     | CYCLOSPORINE, MODIFIED CAPSULE 25 MG ORAL                    | 1,170   | 840     | 0         | 0         | 0      | 0        | 26,500  | 28,510                     | 5,702   | 25,659                       | 34,212                                 | CAPSULE                  | \$                         | \$                       | 30                              |     |  |                              |
| 87     | CYCLOSPORINE, MODIFIED CAPSULE 50 MG ORAL                    | 0       | 2,175   | 0         | 0         | 0      | 0        | 4,800   | 6,975                      | 1,395   | 6,278                        | 8,370                                  | CAPSULE                  | \$                         | \$                       | 30                              |     |  |                              |
| 88     | DESORATADINE TABLET 5 MG ORAL                                | 2,100   | 0       | 0         | 0         | 0      | 0        | 0       | 2,100                      | 420     | 1,890                        | 2,520                                  | TABLET                   | \$                         | \$                       | 120                             |     |  |                              |
| 89     | DESOGESTREL/ETHINYL ESTRADIOL TAB 0.15-0.03 ORAL             | 30      | 3,466   | 0         | 0         | 0      | 0        | 0       | 3,496                      | 699     | 3,146                        | 4,195                                  | PACK                     | \$                         | \$                       | 21,28                           |     |  |                              |
| 90     | DEXTROMETHORPHAN HBR LIQUID 15 MG/5 ML ORAL 250ML            | 0       | 10,149  | 0         | 0         | 0      | 14,000   | 0       | 24,149                     | 4,830   | 21,734                       | 28,979                                 | BOTTLE                   | \$                         | \$                       | 250ML                           |     |  |                              |
| 91     | DEXTROMETHORPHAN HBR LIQUID 15 MG/5 ML ORAL 100ML            | 0       | 0       | 0         | 0         | 0      | 0        | 4,100   | 4,100                      | 820     | 3,690                        | 4,920                                  | BOTTLE                   | \$                         | \$                       | 100ML                           |     |  |                              |
| 92     | DICLOFENAC SODIUM TABLET DR 50 MG ORAL                       | 49,000  | 24,300  | 0         | 0         | 0      | 0        | 2,000   | 75,300                     | 15,060  | 67,770                       | 90,560                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |

| Item # | Description  | CSC Qty | DND Qty | HC/AB Qty | HC/MB Qty | MB Qty | ON Qty** | PEI Qty | Total Estimated Quantities | Overage | Minimum Work Guarantee (%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size ** | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|--|---------|---------|-----------|-----------|--------|----------|---------|----------------------------|---------|----------------------------|--|--------------------------|----------------------------|--------------------------|---------------------------------|-----|--|------------------------------|
| 93     | DICLOFENAC SODIUM TABLET 75 MG ORAL                    | 2,450   | 85,000  | 0         | 0         | 0      | 0        | 0       | 87,450                     | 17,490  | 78,705                     | 104,940                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 94     | DIMENHYDRINATE TABLET 50 MG ORAL                       | 17,000  | 244,000 | 14,000    | 0         | 0      | 0        | 3,300   | 278,300                    | 55,660  | 250,470                    | 333,960                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 95     | DIPHENHYDRAMINE HCL TAB 25 MG ORAL                     | 0       | 91,060  | 0         | 17,500    | 0      | 600,000  | 0       | 708,560                    | 141,712 | 637,704                    | 850,272                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 96     | DIPHENHYDRAMINE HCL TAB 50 MG ORAL                     | 0       | 35,000  | 960       | 0         | 0      | 300,000  | 0       | 335,960                    | 67,192  | 302,364                    | 403,152                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 97     | a) DIVALPROEX SODIUM TABLET DR 250 MG ORAL             | 75,000  | 11,700  | 0         | 0         | 0      | 0        | 4,300   | 91,000                     | 18,200  | 81,900                     | 109,200                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
|        | b) DIVALPROEX SODIUM TABLET DR 500 MG ORAL             | 98,500  | 11,325  | 0         | 0         | 0      | 0        | 9,300   | 119,125                    | 23,825  | 107,213                    | 142,950                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 98     | DOCUSATE SODIUM CAPSULE 100 MG ORAL                    | 275,000 | 0       | 3,000     | 0         | 0      | 95,000   | 24,000  | 397,000                    | 79,400  | 357,300                    | 476,400                                | CAPSULE                  | \$                         | \$                       | 100,1000                        |     |  |                              |
| 99     | DONEPEZIL HCL TABLET 10 MG ORAL                        | 0       | 0       | 0         | 0         | 0      | 0        | 28,000  | 28,000                     | 5,600   | 25,200                     | 33,600                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 100    | DONEPEZIL HCL TABLET 5 MG ORAL                         | 0       | 0       | 0         | 0         | 0      | 0        | 1,500   | 1,500                      | 300     | 1,350                      | 1,800                                  | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 101    | DOXYCYCLINE HYCLATE CAPSULE 100 MG ORAL                | 0       | 0       | 6,000     | 0         | 0      | 200,000  |         | 206,000                    | 41,200  | 185,400                    | 247,200                                | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
| 102    | DOXYCYCLINE HYCLATE TABLET 100 MG ORAL                 | 13,000  | 0       | 0         | 2,200     | 0      | 0        | 1,700   | 16,900                     | 3,380   | 15,210                     | 20,280                                 | TABLET                   | \$                         | \$                       | 100,250                         |     |  |                              |
| 103    | ERYTHROMYCIN BASE OINT. (G) 5MG/G OPHTHALMIC 3.5G      | 700     | 0       | 550       | 844       | 0      | 0        | 256     | 2,350                      | 470     | 2,115                      | 2,820                                  | TUBE                     | \$                         | \$                       | 3,56                            |     |  |                              |
| 104    | ERYTHROMYCIN BASE OINT. (G) 5MG/G OPHTHALMIC 1G        | 0       | 0       | 150       | 3,200     | 0      | 0        | 0       | 3,350                      | 670     | 3,015                      | 4,020                                  | TUBE                     | \$                         | \$                       | 50x1G                           |     |  |                              |
| 105    | ESCITALOPRAM OVALATE TABLET 10 MG ORAL                 | 28,000  | 0       | 0         | 0         | 0      | 0        | 0       | 28,000                     | 5,600   | 25,200                     | 33,600                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 106    | ESCITALOPRAM OVALATE TABLET 20 MG ORAL                 | 17,000  | 0       | 0         | 0         | 0      | 0        | 0       | 17,000                     | 3,400   | 15,300                     | 20,400                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 107    | ESOMEPRAZOLE MAGNESIUM TABLET DR 20 MG ORAL            | 400     | 6,500   | 0         | 0         | 0      | 0        | 0       | 6,900                      | 1,380   | 6,210                      | 8,280                                  | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 108    | ESOMEPRAZOLE MAGNESIUM TABLET DR 40 MG ORAL            | 16,500  | 107,800 | 0         | 0         | 0      | 0        | 0       | 124,300                    | 24,860  | 111,870                    | 149,160                                | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 109    | EZETIMIBE TABLET 10 MG ORAL                            | 15,500  | 0       | 0         | 0         | 0      | 0        | 360     | 15,860                     | 3,172   | 14,274                     | 19,032                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 110    | FENOFIBRATE MICRONIZED CAPSULE 200 MG ORAL             | 24,500  | 44,475  | 0         | 0         | 0      | 0        | 300     | 69,275                     | 13,855  | 62,348                     | 83,130                                 | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
| 111    | FLUCONAZOLE CAPSULE 150 MG ORAL                        | 43      | 1,950   | 0         | 0         | 0      | 0        | 0       | 1,993                      | 399     | 1,794                      | 2,392                                  | CAPSULE                  | \$                         | \$                       | 130,100                         |     |  |                              |
| 112    | FLUCONAZOLE TABLET 100 MG ORAL                         | 1,200   | 0       | 0         | 0         | 0      | 0        | 100     | 1,300                      | 260     | 1,170                      | 1,560                                  | TABLET                   | \$                         | \$                       | 50,100                          |     |  |                              |
| 113    | a) FLUOXETINE HCL CAPSULE 10 MG ORAL                   | 43,650  | 28,100  | 0         | 0         | 0      | 0        | 1,000   | 72,750                     | 14,550  | 65,475                     | 87,300                                 | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
|        | b) FLUOXETINE HCL CAPSULE 20 MG ORAL                   | 70,000  | 62,300  | 0         | 0         | 0      | 0        | 1,000   | 133,300                    | 26,660  | 119,970                    | 159,960                                | CAPSULE                  | \$                         | \$                       | 100,500                         |     |  |                              |
| 114    | FLUTICASON PROPRIONATE SPRAY SUSP 50 MCG NASAL 120DS   | 0       | 0       | 0         | 0         | 0      | 550      | 0       | 550                        | 110     | 495                        | 660                                    | SPRAY PUMP               | \$                         | \$                       | 12,005                          |     |  |                              |
| 115    | GABAPENTIN CAPSULE 100 MG ORAL                         | 5,000   | 45,000  | 0         | 0         | 0      | 0        | 37,000  | 87,000                     | 17,400  | 78,300                     | 104,400                                | CAPSULE                  | \$                         | \$                       | 100,500                         |     |  |                              |
| 116    | GABAPENTIN CAPSULE 300 MG ORAL                         | 5,500   | 100,000 | 0         | 0         | 0      | 180,000  | 21,000  | 306,500                    | 61,300  | 275,850                    | 367,800                                | CAPSULE                  | \$                         | \$                       | 100,500                         |     |  |                              |
| 117    | GABAPENTIN CAPSULE 400 MG ORAL                         | 0       | 21,150  | 0         | 0         | 0      | 50,000   | 10,000  | 81,150                     | 16,230  | 73,035                     | 97,380                                 | CAPSULE                  | \$                         | \$                       | 100,500                         |     |  |                              |
| 118    | GABAPENTIN TABLET 600 MG ORAL                          | 400,000 | 25,000  | 0         | 0         | 0      | 0        | 5,500   | 430,500                    | 86,100  | 387,450                    | 516,600                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 119    | GABAPENTIN TABLET 800 MG ORAL                          | 90,000  | 3,600   | 0         | 0         | 0      | 0        | 2,100   | 95,700                     | 19,140  | 86,130                     | 114,840                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 120    | GLICLAZIDE TABLET 60 MG ORAL                           | 12,500  | 0       | 0         | 2,200     | 0      | 0        | 0       | 14,700                     | 2,940   | 13,220                     | 17,640                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 121    | HYDROCORT ACETAT/ZN SULF OINT (G) 0.5%-0.5% RECTAL 30G | 171     | 0       | 0         | 0         | 0      | 0        | 3,500   | 3,671                      | 734     | 3,304                      | 4,405                                  | TUBE                     | \$                         | \$                       | 306                             |     |  |                              |
| 122    | HYDROCORT ACETATE/ZN SULF SUPP. 10MG-10MG RECTAL       | 1,771   | 0       | 0         | 0         | 0      | 0        | 96      | 1,867                      | 373     | 1,680                      | 2,240                                  | SUPPOS.                  | \$                         | \$                       | 12                              |     |  |                              |
| 123    | HYDROCORTISONE ACETATE CREAM (G) 0.50% TOPICAL 15G     | 0       | 0       | 0         | 0         | 0      | 0        | 25      | 25                         | 5       | 23                         | 30                                     | CREAM                    | \$                         | \$                       | 15G                             |     |  |                              |
| 124    | HYDROCORTISONE ACETATE CREAM (G) 1% TOPICAL 500G       | 873     | 0       | 30        | 0         | 0      | 0        | 23      | 926                        | 185     | 833                        | 1,111                                  | JAR                      | \$                         | \$                       | 500G                            |     |  |                              |

| Item # | Description   | CSC Qty | DND Qty | HC/AB Qty | HC/MB Qty | MB Qty | ON Qty** | PEL Qty | Total Estimated Quantities | Overage | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size **     | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|---|---------|---------|-----------|-----------|--------|----------|---------|----------------------------|---------|------------------------------|--|--------------------------|----------------------------|--------------------------|-------------------------------------|-----|--|------------------------------|
| 125    | HYDROCORTISONE ACETATE CREAM (G) 1% TOPICAL 15G         | 0       | 0       | 100       | 0         | 0      | 0        | 0       | 100                        | 20      | 90                           | 120                                    | CREAM                    | \$                         | \$                       | 15G                                 |     |  |                              |
| 126    | HYPMOMELOSE DROPS 0.50% OPHTHALMIC 15ML                 | 0       | 0       | 0         | 0         | 0      | 0        | 6,450   | 6,450                      | 1,290   | 5,805                        | 7740                                   | BOTTLE                   | \$                         | \$                       | 15ML                                |     |  |                              |
| 127    | IBUPROFEN ORAL SUSP 100 MG/5ML ORAL 1000ML              | 0       | 0       | 1,100     | 0         | 0      | 0        | 0       | 1,100                      | 220     | 900                          | 1,320                                  | BOTTLE                   | \$                         | \$                       | 1000ML various sizes between 12-500 |     |  |                              |
| 128    | IBUPROFEN TABLET 200 MG ORAL                            | 43,500  | 228,000 | 6,000     | 750,000   | 0      | 0        | 0       | 1,027,500                  | 205,500 | 924,750                      | 1,233,000                              | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
| 129    | IBUPROFEN TABLET 300 MG ORAL                            | 0       | 0       | 0         | 0         | 0      | 0        | 900     | 900                        | 180     | 810                          | 1,080                                  | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
| 130    | IBUPROFEN TABLET 400 MG ORAL                            | 208,500 | 750,000 | 2,800     | 0         | 0      | 120,000  | 2,500   | 1,083,800                  | 216,760 | 975,420                      | 1,300,560                              | TABLET                   | \$                         | \$                       | various sizes between 12-500        |     |  |                              |
| 131    | IBUPROFEN TABLET 600 MG ORAL                            | 660,000 | 63,700  | 0         | 0         | 0      | 210,000  | 100     | 933,800                    | 186,760 | 840,420                      | 1,120,560                              | TABLET                   | \$                         | \$                       | various sizes between 12-500        |     |  |                              |
| 132    | INDOMETHACIN CAPSULE 50 MG ORAL                         | 101,000 | 15,000  | 0         | 0         | 0      | 0        | 0       | 116,000                    | 23,200  | 104,400                      | 139,200                                | CAPSULE                  | \$                         | \$                       | 100-500                             |     |  |                              |
| 133    | KETOROLAC TROMETHAMINE TABLET 10 MG ORAL                | 5,271   | 0       | 2,400     | 0         | 0      | 0        | 0       | 7,671                      | 1,534   | 6,904                        | 9,205                                  | TABLET                   | \$                         | \$                       | 100-500                             |     |  |                              |
| 134    | KETOROLAC TROMETHAMINE VIAL 30MG/ML(1) INTRAMUSC        | 0       | 0       | 1,300     | 0         | 0      | 0        | 0       | 1,300                      | 260     | 1,170                        | 1,560                                  | VIAL                     | \$                         | \$                       | 10x1ML                              |     |  |                              |
| 135    | LACTULOSE SOLUTION 10 G/15 ML ORAL 500ML                | 644     | 0       | 40        | 0         | 0      | 0        | 0       | 684                        | 137     | 616                          | 821                                    | BOTTLE                   | \$                         | \$                       | 500ML                               |     |  |                              |
| 136    | LACTULOSE SOLUTION 10 G/15 ML ORAL 1000ML               | 0       | 0       | 0         | 0         | 0      | 0        | 852     | 852                        | 170     | 767                          | 1,022                                  | BOTTLE                   | \$                         | \$                       | 1000ML                              |     |  |                              |
| 137    | LAMIVUDINE TABLET 150 MG ORAL                           | 1,600   | 0       | 0         | 0         | 0      | 0        | 0       | 1,600                      | 320     | 1,440                        | 1,920                                  | TABLET                   | \$                         | \$                       | 60                                  |     |  |                              |
| 138    | LAMIVUDINE/ZIDOVUDINE TABLET 150-300MG ORAL             | 475     | 0       | 0         | 0         | 0      | 0        | 0       | 475                        | 95      | 428                          | 570                                    | TABLET                   | \$                         | \$                       | 60                                  |     |  |                              |
| 139    | a) LAMOTRIGINE TABLET 100 MG ORAL 19,500                | 18,300  | 0       | 0         | 0         | 0      | 0        | 0       | 37,800                     | 7,560   | 34,020                       | 45,360                                 | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
|        | b) LAMOTRIGINE TABLET 150 MG ORAL 1,965                 | 0       | 0       | 0         | 0         | 0      | 0        | 1,900   | 3,865                      | 773     | 3,479                        | 4,638                                  | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
|        | c) LAMOTRIGINE TABLET 25 MG ORAL 15,500                 | 5,000   | 0       | 0         | 0         | 0      | 0        | 5,500   | 26,000                     | 5,200   | 23,400                       | 31,200                                 | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
| 140    | LANOPRAZOLE CAPSULE DR 15 MG ORAL                       | 0       | 5,600   | 0         | 0         | 0      | 0        | 0       | 5,600                      | 1,120   | 5,040                        | 6,720                                  | CAPSULE                  | \$                         | \$                       | 100                                 |     |  |                              |
| 141    | LANOPRAZOLE CAPSULE DR 30 MG ORAL                       | 9,000   | 50,310  | 0         | 0         | 0      | 0        | 0       | 59,310                     | 11,862  | 53,379                       | 71,172                                 | CAPSULE                  | \$                         | \$                       | 100-500                             |     |  |                              |
| 142    | LEVONORGESTREL TABLET 0.75 MG ORAL                      | 0       | 0       | 280       | 0         | 0      | 0        | 0       | 280                        | 56      | 252                          | 336                                    | TABLET                   | \$                         | \$                       | 2 tabs                              |     |  |                              |
| 143    | LEVONORGESTREL ETH EXTRA TABLET 0.1-0.02 ORAL 21 or 28  | 60      | 5,678   | 120       | 350       | 0      | 0        | 0       | 6,208                      | 1,242   | 5,587                        | 7,450                                  | PACK                     | \$                         | \$                       | 21-28                               |     |  |                              |
| 144    | LEVONORGESTREL ETH EXTRA TABLET 0.15-0.03 ORAL 21 or 28 | 116     | 0       | 0         | 0         | 0      | 0        | 0       | 116                        | 23      | 104                          | 139                                    | PACK                     | \$                         | \$                       | 21-28 various sizes between 12-500  |     |  |                              |
| 145    | LOPERAMIDE HCL TABLET 2 MG ORAL                         | 50,000  | 79,600  | 9,000     | 22,000    | 0      | 0        | 3,300   | 163,900                    | 32,780  | 147,510                      | 196,680                                | TABLET                   | \$                         | \$                       | various sizes between 12-500        |     |  |                              |
| 146    | LORATADINE TABLET 10 MG ORAL                            | 37,500  | 136,000 | 0         | 0         | 0      | 0        | 0       | 173,500                    | 34,700  | 156,150                      | 208,200                                | TABLET                   | \$                         | \$                       | 100-500                             |     |  |                              |
| 147    | METFORMIN HCL TABLET 500 MG ORAL                        | 650,000 | 625,400 | 0         | 4,400     | 0      | 200,000  | 60,000  | 1,539,800                  | 307,960 | 1,385,820                    | 1,847,760                              | TABLET                   | \$                         | \$                       | 100-500                             |     |  |                              |
| 148    | METFORMIN HCL TABLET 850 MG ORAL                        | 37,000  | 94,300  | 0         | 0         | 0      | 0        | 0       | 131,300                    | 26,260  | 118,170                      | 157,560                                | TABLET                   | \$                         | \$                       | 100-500                             |     |  |                              |
| 149    | a) METHYLPHENIDATE HCL TABLET 10 MG ORAL 160,000        | 0       | 0       | 0         | 0         | 0      | 0        | 0       | 160,000                    | 32,000  | 144,000                      | 192,000                                | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
|        | b) METHYLPHENIDATE HCL TABLET 20 MG ORAL 52,250         | 0       | 0       | 0         | 0         | 0      | 0        | 0       | 52,250                     | 10,450  | 47,025                       | 62,700                                 | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
|        | c) METHYLPHENIDATE HCL TABLET 5 MG ORAL 1,250           | 6,100   | 0       | 0         | 0         | 0      | 0        | 0       | 7,350                      | 1,470   | 6,615                        | 8,820                                  | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
|        | d) METHYLPHENIDATE HCL TABLET 20 MG ORAL 56,250         | 20,000  | 0       | 0         | 0         | 0      | 0        | 0       | 76,250                     | 15,250  | 68,625                       | 91,500                                 | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
| 150    | MINOCYCLINE HCL CAPSULE 100 MG ORAL                     | 28,500  | 26,250  | 0         | 0         | 0      | 0        | 0       | 54,750                     | 10,950  | 49,275                       | 65,700                                 | CAPSULE                  | \$                         | \$                       | 100                                 |     |  |                              |
| 151    | MINOCYCLINE HCL CAPSULE 50 MG ORAL                      | 8,000   | 18,525  | 0         | 0         | 0      | 0        | 0       | 26,525                     | 5,305   | 23,873                       | 31,830                                 | CAPSULE                  | \$                         | \$                       | 100                                 |     |  |                              |
| 152    | MIRTAZAPINE TABLET 15 MG ORAL                           | 76,500  | 0       | 0         | 0         | 0      | 0        | 36,500  | 113,000                    | 23,600  | 101,700                      | 135,600                                | TABLET                   | \$                         | \$                       | 100                                 |     |  |                              |
| 153    | MIRTAZAPINE TABLET 30 MG ORAL                           | 220,000 | 25,000  | 0         | 0         | 0      | 150,000  | 7,000   | 402,000                    | 80,400  | 361,800                      | 482,400                                | TABLET                   | \$                         | \$                       | 30-100                              |     |  |                              |

| Item # | Description   | CSC QTY | DND QTY | HC/AB QTY | HC/MB QTY | MB QTY | ON QTY** | PEI QTY | Total Estimated Quantities | Overage | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size ** | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|---|---------|---------|-----------|-----------|--------|----------|---------|----------------------------|---------|------------------------------|--|--------------------------|----------------------------|--------------------------|---------------------------------|-----|--|------------------------------|
| 154    | MIRTAZAPINE TABLET 45 MG ORAL                       | 35,000  | 2,180   | 0         | 0         | 0      | 0        | 1,200   | 38,380                     | 7,676   | 34,542                       | 46,056                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 155    | MONOMETASONE FLUROATE CREAM (G) 0.10% TOPICAL 50G   | 0       | 0       | 0         | 0         | 0      | 0        | 1,000   | 1,000                      | 200     | 900                          | 1,200                                  | TUBE                     | \$                         | \$                       | 50G                             |     |  |                              |
| 156    | MONOMETASONE FLUROATE LOTION 0.10% TOPICAL 75ML     | 0       | 0       | 0         | 0         | 0      | 0        | 225     | 225                        | 45      | 203                          | 270                                    | BOTTLE                   | \$                         | \$                       | 75ML                            |     |  |                              |
| 157    | MONOMETASONE FLUROATE OINT. (G) 0.10% TOPICAL 50G   | 0       | 0       | 0         | 0         | 0      | 0        | 50      | 50                         | 10      | 45                           | 60                                     | TUBE                     | \$                         | \$                       | 50G                             |     |  |                              |
| 158    | MONOMETASONE FLUROATE SOLUTION 0.10% TOPICAL 75ML   | 0       | 0       | 0         | 0         | 0      | 0        | 225     | 225                        | 45      | 203                          | 270                                    | BOTTLE                   | \$                         | \$                       | 75ML                            |     |  |                              |
| 159    | MONOMETASONE FLUROATE SPRAY/PUMP 50 MCG NASAL 1400S | 0       | 5,900   | 0         | 0         | 0      | 850      | 145     | 6,895                      | 1,379   | 6,206                        | 8,274                                  | SPRAY PUMP               | \$                         | \$                       | 1400S                           |     |  |                              |
| 160    | MONTELUKAST SODIUM TAB CHEW 5 MG ORAL               | 0       | 398     | 0         | 0         | 0      | 0        | 0       | 398                        | 80      | 398                          | 478                                    | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 161    | MONTELUKAST SODIUM TABLET 10 MG ORAL                | 7,250   | 34,600  | 0         | 0         | 0      | 0        | 0       | 41,850                     | 8,370   | 37,665                       | 50,220                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 162    | MORPHINE SULFATE AMPUL 10 MG/ML INJECTION           | 0       | 0       | 0         | 0         | 0      | 0        | 2,000   | 2,000                      | 400     | 1,800                        | 2,400                                  | AMPUL                    | \$                         | \$                       | 10                              |     |  |                              |
| 163    | MUPIROCIN CALCIUM CREAM (G) 2% TOPICAL 15G          | 0       | 0       | 0         | 0         | 0      | 0        | 300     | 300                        | 60      | 270                          | 360                                    | TUBE                     | \$                         | \$                       | 15G                             |     |  |                              |
| 164    | MUPIROCIN OINT. (G) 2% TOPICAL 15G                  | 47      | 0       | 1,700     | 0         | 0      | 0        | 1,747   | 1,747                      | 349     | 1,572                        | 2,096                                  | TUBE                     | \$                         | \$                       | 15G                             |     |  |                              |
| 165    | MUPIROCIN OINT. (G) 2% TOPICAL 30G                  | 63      | 0       | 0         | 0         | 0      | 0        | 1,500   | 1,563                      | 313     | 1,407                        | 1,876                                  | TUBE                     | \$                         | \$                       | 30G                             |     |  |                              |
| 166    | MYCOPHENOLATE MOFETIL CAPSULE 250 MG ORAL           | 0       | 0       | 0         | 0         | 0      | 0        | 25,800  | 25,800                     | 5,160   | 23,220                       | 30,960                                 | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
| 167    | MYCOPHENOLATE MOFETIL TABLET 500 MG ORAL            | 1,700   | 6,050   | 0         | 0         | 0      | 0        | 45,800  | 53,550                     | 10,710  | 48,195                       | 64,260                                 | TABLET                   | \$                         | \$                       | 50,100                          |     |  |                              |
| 168    | a) NABILON CAPSULE 0.25 MG ORAL                     | 0       | 4,650   | 0         | 0         | 0      | 0        | 0       | 4,650                      | 930     | 4,185                        | 5,580                                  | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
|        | b) NABILON CAPSULE 0.5 MG ORAL                      | 0       | 56,250  | 0         | 0         | 0      | 0        | 0       | 56,250                     | 11,250  | 50,625                       | 67,500                                 | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
|        | c) NABILON CAPSULE 1 MG ORAL                        | 7,500   | 39,000  | 0         | 0         | 0      | 0        | 0       | 46,500                     | 9,300   | 41,850                       | 55,800                                 | CAPSULE                  | \$                         | \$                       | 50,100                          |     |  |                              |
| 169    | NALOXONE HCL AMPUL 0.4 MG/ML INJECTION              | 0       | 0       | 1,120     | 0         | 0      | 0        | 0       | 1,120                      | 224     | 1,008                        | 1,344                                  | AMPUL                    | \$                         | \$                       | 10x1ML                          |     |  |                              |
| 170    | NAPROXEN TABLET 250 MG ORAL                         | 95,000  | 80,300  | 10,000    | 110,000   | 0      | 75,000   | 3,000   | 373,300                    | 74,660  | 335,970                      | 447,960                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 171    | NAPROXEN TABLET 375 MG ORAL                         | 11,000  | 21,900  | 0         | 0         | 0      | 0        | 400     | 33,300                     | 6,660   | 29,970                       | 39,960                                 | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 172    | NAPROXEN TABLET 500 MG ORAL                         | 159,000 | 366,200 | 0         | 0         | 0      | 50,000   | 0       | 575,200                    | 115,040 | 517,680                      | 690,240                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 173    | NAPROXEN TABLET DR 250 MG ORAL                      | 0       | 21,600  | 0         | 0         | 0      | 0        | 0       | 21,600                     | 4,320   | 19,440                       | 25,920                                 | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 174    | NAPROXEN TABLET DR 375 MG ORAL                      | 0       | 12,675  | 0         | 0         | 0      | 0        | 2,600   | 15,275                     | 3,055   | 13,748                       | 18,330                                 | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 175    | NAPROXEN TABLET DR 500 MG ORAL                      | 10,000  | 121,000 | 0         | 0         | 0      | 0        | 0       | 131,000                    | 26,200  | 117,900                      | 157,200                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 176    | a) NIFEDIPINE TAB ER 24 30 MG ORAL                  | 12,000  | 9,300   | 0         | 0         | 0      | 0        | 0       | 21,300                     | 4,260   | 19,170                       | 25,560                                 | TABLET                   | \$                         | \$                       | 98,100                          |     |  |                              |
|        | b) NIFEDIPINE TAB ER 24 60 MG ORAL                  | 5,691   | 10,600  | 0         | 0         | 0      | 0        | 0       | 16,291                     | 3,258   | 14,662                       | 19,549                                 | TABLET                   | \$                         | \$                       | 98,100                          |     |  |                              |
| 177    | NITRO GLYCERIN AEROSOL 0.4MG/DOSE TRANSUNG 2000S    | 405     | 550     | 0         | 100       | 0      | 200      | 120     | 1,375                      | 275     | 1,238                        | 1,650                                  | SPRAY PUMP               | \$                         | \$                       | 2000S                           |     |  |                              |
| 178    | OLANZAPINE TAB RAPIDIS 10 MG ORAL                   | 20,000  | 600     | 0         | 0         | 0      | 30,000   | 300     | 50,900                     | 10,180  | 45,810                       | 61,080                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 179    | OLANZAPINE TAB RAPIDIS 15 MG ORAL                   | 9,500   | 200     | 0         | 0         | 0      | 6,000    | 0       | 15,700                     | 3,140   | 14,130                       | 18,840                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 180    | OLANZAPINE TAB RAPIDIS 20 MG ORAL                   | 6,200   | 0       | 0         | 0         | 0      | 6,000    | 0       | 12,200                     | 2,440   | 10,980                       | 14,640                                 | TABLET                   | \$                         | \$                       | 30                              |     |  |                              |
| 181    | OLANZAPINE TAB RAPIDIS 5 MG ORAL                    | 28,000  | 0       | 0         | 0         | 0      | 22,500   | 400     | 50,900                     | 10,180  | 45,810                       | 61,080                                 | TABLET                   | \$                         | \$                       | 30                              |     |  |                              |
| 182    | OLANZAPINE TABLET 10 MG ORAL                        | 69,000  | 1,725   | 0         | 0         | 0      | 25,000   | 2,900   | 98,625                     | 19,725  | 88,763                       | 118,350                                | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 183    | OLANZAPINE TABLET 15 MG ORAL                        | 14,100  | 0       | 0         | 0         | 0      | 0        | 0       | 14,100                     | 2,820   | 12,690                       | 16,920                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 184    | OLANZAPINE TABLET 2.5 MG ORAL                       | 15,000  | 3,000   | 0         | 0         | 0      | 0        | 13,700  | 31,700                     | 6,340   | 28,530                       | 38,040                                 | TABLET                   | \$                         | \$                       | 30,100,100                      |     |  |                              |

| Item # | Description  | CSC Qty                    | DND Qty                    | HC/AB Qty       | HC/MB Qty        | MB Qty      | ON Qty**    | PEI Qty               | Total Estimated Quantities  | Overage                   | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size **                    | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|--|----------------------------|----------------------------|-----------------|------------------|-------------|-------------|-----------------------|-----------------------------|---------------------------|------------------------------|--|--------------------------|----------------------------|--------------------------|--|-----|--|------------------------------|
| 185    | OLANZAPINE TABLET 5 MG ORAL  | 35,000                     | 2,900                      | 0               | 0                | 0           | 0           | 0                     | 37,900                      | 7,580                     | 34,110                       | 45,480                                 | TABLET                   | \$                         | \$                       | 30,100   |     |  |                              |
| 186    | OLANZAPINE TABLET 7.5 MG ORAL  | 675                        | 0                          | 0               | 0                | 0           | 0           | 0                     | 675                         | 135                       | 608                          | 810                                    | TABLET                   | \$                         | \$                       | 100  |     |  |                              |
| 187    | OMEPRAZOLE CAPSULE DR 20 MG ORAL   | 14,000                     | 40,500                     | 0               | 14,500           | 0           | 0           | 6,000                 | 75,000                      | 15,000                    | 67,500                       | 90,000                                 | CAPSULE                  | \$                         | \$                       | 100  |     |  |                              |
| 188    | OMEPRAZOLE MAGNESIUM TABLET DR 20 MG ORAL  | 0                          | 0                          | 0               | 0                | 0           | 0           | 17,500                | 17,500                      | 3,500                     | 15,750                       | 21,000                                 | TABLET                   | \$                         | \$                       | 500  |     |  |                              |
| 189    | ONDANSETRON HCL TABLET 8 MG ORAL   | 2,500                      | 0                          | 0               | 0                | 0           | 0           | 0                     | 2,500                       | 500                       | 2,250                        | 3,000                                  | TABLET                   | \$                         | \$                       | 100  |     |  |                              |
| 190    | ORPHENADRINE CITRATE TABLET ER 100 MG ORAL   | 0                          | 48,750                     | 0               | 0                | 0           | 0           | 0                     | 48,750                      | 9,750                     | 43,875                       | 58,500                                 | TABLET                   | \$                         | \$                       | 100  |     |  |                              |
| 191    | a) PANTOPRAZOLE SODIUM TABLET DR 20 MG ORAL<br>b) PANTOPRAZOLE SODIUM TABLET DR 40 MG ORAL   | 3,500<br>625,000           | 24,000<br>1,124,600        | 0<br>0          | 0<br>0           | 0<br>0      | 0<br>0      | 1,000<br>4,500        | 28,500<br>1,754,100         | 5,700<br>350,820          | 25,650<br>1,576,690          | 34,200<br>2,104,920                    | TABLET                   | \$                         | \$                       | 10,100<br>100,500                                  |     |  |                              |
| 192    | a) PAROXETINE HCL TABLET 10 MG ORAL<br>b) PAROXETINE HCL TABLET 20 MG ORAL<br>c) PAROXETINE HCL TABLET 30 MG ORAL                    | 2,900<br>50,550<br>19,100  | 9,300<br>39,800<br>10,200  | 0<br>0<br>0     | 0<br>0<br>0      | 0<br>0<br>0 | 0<br>0<br>0 | 1,000<br>2,200<br>0   | 13,200<br>92,550<br>29,300  | 2,640<br>18,510<br>5,860  | 11,880<br>83,295<br>26,370   | 15,840<br>111,060<br>35,160            | TABLET                   | \$                         | \$                       | 100<br>100,500<br>100                              |     |  |                              |
| 193    | PREGABALIN CAPSULE 150 MG ORAL   | 0                          | 55,000                     | 0               | 0                | 0           | 60,000      | 0                     | 115,000                     | 23,000                    | 103,500                      | 138,000                                | CAPSULE                  | \$                         | \$                       | 100  |     |  |                              |
| 194    | PREGABALIN CAPSULE 25 MG ORAL  | 1,100                      | 22,500                     | 0               | 0                | 0           | 0           | 300                   | 23,900                      | 4,780                     | 21,510                       | 28,680                                 | CAPSULE                  | \$                         | \$                       | 60,100   |     |  |                              |
| 195    | PREGABALIN CAPSULE 300 MG ORAL   | 10,050                     | 17,700                     | 0               | 0                | 0           | 0           | 0                     | 27,750                      | 5,550                     | 24,975                       | 33,300                                 | CAPSULE                  | \$                         | \$                       | 100  |     |  |                              |
| 196    | PREGABALIN CAPSULE 50 MG ORAL  | 10,500                     | 47,800                     | 0               | 0                | 0           | 0           | 1,200                 | 59,500                      | 11,900                    | 53,550                       | 71,400                                 | CAPSULE                  | \$                         | \$                       | 60,100   |     |  |                              |
| 197    | PREGABALIN CAPSULE 75 MG ORAL  | 13,500                     | 84,500                     | 0               | 0                | 0           | 55,000      | 400                   | 153,400                     | 30,680                    | 138,060                      | 184,080                                | CAPSULE                  | \$                         | \$                       | 60,100   |     |  |                              |
| 198    | QUETIAPINE FUMARATE TAB ER 24H 50 MG ORAL  | 0                          | 0                          | 0               | 0                | 0           | 72,000      | 0                     | 72,000                      | 14,400                    | 64,800                       | 86,400                                 | TABLET                   | \$                         | \$                       | 60,100   |     |  |                              |
| 199    | QUETIAPINE FUMARATE TABLET 100 MG ORAL   | 41,000                     | 24,100                     | 0               | 0                | 0           | 120,000     | 0                     | 185,100                     | 37,020                    | 166,590                      | 222,120                                | TABLET                   | \$                         | \$                       | 100,500  |     |  |                              |
| 200    | QUETIAPINE FUMARATE TABLET 150 MG ORAL   | 4,126                      | 0                          | 0               | 0                | 0           | 0           | 2,500                 | 6,626                       | 1,325                     | 5,963                        | 7,951                                  | TABLET                   | \$                         | \$                       | 100  |     |  |                              |
| 201    | QUETIAPINE FUMARATE TABLET 200 MG ORAL   | 53,500                     | 2,800                      | 0               | 0                | 0           | 75,000      | 2,000                 | 133,300                     | 26,660                    | 119,970                      | 159,960                                | TABLET                   | \$                         | \$                       | 100,500  |     |  |                              |
| 202    | QUETIAPINE FUMARATE TABLET 25 MG ORAL  | 74,500                     | 27,600                     | 0               | 0                | 0           | 220,000     | 10,000                | 332,100                     | 66,420                    | 298,890                      | 398,520                                | TABLET                   | \$                         | \$                       | 100,500  |     |  |                              |
| 203    | QUETIAPINE FUMARATE TABLET 300 MG ORAL   | 35,850                     | 1,500                      | 0               | 0                | 0           | 0           | 0                     | 37,350                      | 7,470                     | 33,615                       | 44,820                                 | TABLET                   | \$                         | \$                       | 100,500  |     |  |                              |
| 204    | QUETIAPINE FUMARATE TABLET 50 MG ORAL  | 34,050                     | 0                          | 0               | 0                | 0           | 0           | 0                     | 34,050                      | 6,810                     | 30,645                       | 40,860                                 | TABLET                   | \$                         | \$                       | 100  |     |  |                              |
| 205    | RABEPRAZOLE SODIUM TABLET DR 10 MG ORAL  | 0                          | 0                          | 0               | 0                | 0           | 0           | 2,400                 | 2,400                       | 480                       | 2,160                        | 2,880                                  | TABLET                   | \$                         | \$                       | 100  |     |  |                              |
| 206    | RABEPRAZOLE SODIUM TABLET DR 20 MG ORAL  | 65,000                     | 25,300                     | 2,000           | 0                | 0           | 0           | 4,800                 | 97,100                      | 19,420                    | 87,390                       | 116,520                                | TABLET                   | \$                         | \$                       | 100,500  |     |  |                              |
| 207    | a) RAMIPRIL CAPSULE 10 MG ORAL<br>b) RAMIPRIL CAPSULE 15 MG ORAL<br>c) RAMIPRIL CAPSULE 2.5 MG ORAL<br>d) RAMIPRIL CAPSULE 5 MG ORAL | 207,150<br>1,600<br>43,600 | 116,350<br>2,900<br>53,000 | 0<br>0<br>3,000 | 0<br>0<br>11,700 | 0<br>0<br>0 | 0<br>0<br>0 | 6,000<br>720<br>6,000 | 329,400<br>5,220<br>117,300 | 65,880<br>1,044<br>23,460 | 296,460<br>4,698<br>105,570  | 395,280<br>6,264<br>140,760            | CAPSULE                  | \$                         | \$                       | 30,100<br>30, 100,500<br>30, 100,500<br>60,100,500 |     |  |                              |
| 208    | RANITIDINE HCL TABLET 150 MG ORAL  | 214,050                    | 0                          | 9,000           | 68,400           | 0           | 50,000      | 13,450                | 354,900                     | 70,980                    | 319,410                      | 425,880                                | TABLET                   | \$                         | \$                       | 60,100,500   |     |  |                              |
| 209    | RIFAMPIN CAPSULE 150 MG ORAL   | 0                          | 0                          | 0               | 0                | 400         | 120,000     | 500                   | 120,900                     | 24,180                    | 108,810                      | 145,080                                | CAPSULE                  | \$                         | \$                       | 100  |     |  |                              |
| 210    | RIFAMPIN CAPSULE 300 MG ORAL   | 1,450                      | 0                          | 0               | 2,200            | 45,000      | 500,000     | 2,000                 | 550,650                     | 110,130                   | 495,585                      | 660,780                                | CAPSULE                  | \$                         | \$                       | 100  |     |  |                              |
| 211    | RISPERIDONE TAB RAPIDS 1 MG ORAL   | 2,966                      | 0                          | 0               | 0                | 0           | 0           | 0                     | 2,966                       | 593                       | 2,669                        | 3,559                                  | TABLET                   | \$                         | \$                       | 30   |     |  |                              |
| 212    | RISPERIDONE TAB RAPIDS 2 MG ORAL   | 3,800                      | 0                          | 0               | 0                | 0           | 10,500      | 0                     | 14,300                      | 2,860                     | 12,870                       | 17,160                                 | TABLET                   | \$                         | \$                       | 30   |     |  |                              |

| Item # | Description   | CSC Qty | DND Qty | HC/AB Qty | HC/MB Qty | MB Qty | ON Qty** | PEI Qty | Total Estimated Quantities | Overage | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size ** | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|---|---------|---------|-----------|-----------|--------|----------|---------|----------------------------|---------|------------------------------|--|--------------------------|----------------------------|--------------------------|---------------------------------|-----|--|------------------------------|
| 213    | RISPERIDONE TAB RAPHS 3 MG ORAL                         | 1,200   | 0       | 0         | 0         | 0      | 0        | 0       | 1,200                      | 240     | 1,080                        | 1,440                                  | TABLET                   | \$                         | \$                       | 30                              |     |  |                              |
| 214    | a) RISPERIDONE TABLET 0.25 MG ORAL                      | 0       | 5,300   | 0         | 0         | 0      | 0        | 55,000  | 60,300                     | 12,060  | 54,270                       | 72,360                                 | TABLET                   | \$                         | \$                       | 30,100,100                      |     |  |                              |
|        | b) RISPERIDONE TABLET 0.5 MG ORAL                       | 0       | 0       | 0         | 0         | 0      | 0        | 21,000  | 21,000                     | 4,200   | 18,900                       | 25,200                                 | TABLET                   | \$                         | \$                       | 500                             |     |  |                              |
|        | c) RISPERIDONE TABLET 1 MG ORAL                         | 18,000  | 9,200   | 0         | 0         | 0      | 0        | 6,900   | 34,100                     | 6,820   | 30,690                       | 40,920                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
|        | d) RISPERIDONE TABLET 2 MG ORAL                         | 13,500  | 2,100   | 0         | 0         | 0      | 0        | 2,200   | 17,800                     | 3,560   | 16,020                       | 21,360                                 | TABLET                   | \$                         | \$                       | 30,100,500                      |     |  |                              |
|        | e) RISPERIDONE TABLET 3 MG ORAL                         | 2,000   | 75      | 0         | 0         | 0      | 0        | 0       | 2,075                      | 415     | 1,868                        | 2,490                                  | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 215    | ROSUVASTATIN CALCIUM TABLET 10 MG ORAL                  | 6,500   | 150,000 | 0         | 0         | 0      | 36,000   | 10,500  | 203,000                    | 40,600  | 182,700                      | 243,600                                | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 216    | ROSUVASTATIN CALCIUM TABLET 20 MG ORAL                  | 3,690   | 110,250 | 0         | 0         | 0      | 0        | 3,660   | 117,600                    | 23,520  | 105,840                      | 141,120                                | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 217    | ROSUVASTATIN CALCIUM TABLET 40 MG ORAL                  | 5,200   | 36,700  | 0         | 0         | 0      | 0        | 890     | 42,790                     | 8,558   | 38,511                       | 51,348                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 218    | ROSUVASTATIN CALCIUM TABLET 5 MG ORAL                   | 3,765   | 30,000  | 0         | 0         | 0      | 0        | 3,870   | 37,635                     | 7,527   | 33,872                       | 45,162                                 | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 219    | SALBUTAMOL SULFATE AMPUL-NEB 2.5MG/2.5 INHALATION       | 0       | 0       | 4,800     | 4,400     | 0      | 0        | 0       | 9,200                      | 1,840   | 8,280                        | 11,040                                 | AMPUL                    | \$                         | \$                       | 20x2.5ML                        |     |  |                              |
| 220    | SALBUTAMOL SULFATE DISK 200 MCG INHALATION              | 0       | 0       | 0         | 0         | 0      | 0        | 3       | 3                          | 1       | 3                            | 4                                      | INHALER                  | \$                         | \$                       | 60DS                            |     |  |                              |
| 221    | SALBUTAMOL SULFATE HFA AER 40 100 MCG INHALATION 200DS  | 4,221   | 12,011  | 1,200     | 6,100     | 0      | 6,500    | 400     | 30,432                     | 6,086   | 27,389                       | 36,518                                 | INHALER                  | \$                         | \$                       | 200DS                           |     |  |                              |
| 222    | SENNOSIDES TABLET 8.6 MG ORAL                           |         |         | 3,000     | 0         | 0      | 0        | 257,000 | 260,000                    | 52,000  | 234,000                      | 312,000                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 223    | SERTRALINE HCL CAPSULE 100 MG ORAL                      | 50,000  | 105,000 | 0         | 0         | 0      | 25,000   | 2,700   | 182,700                    | 36,540  | 164,430                      | 219,240                                | CAPSULE                  | \$                         | \$                       | 30,100                          |     |  |                              |
| 224    | SERTRALINE HCL CAPSULE 25 MG ORAL                       | 24,550  | 30,000  | 0         | 0         | 0      | 0        | 1,600   | 56,150                     | 11,230  | 50,535                       | 67,380                                 | CAPSULE                  | \$                         | \$                       | 30,100                          |     |  |                              |
| 225    | SERTRALINE HCL CAPSULE 50 MG ORAL                       | 76,425  | 91,500  | 0         | 0         | 0      | 0        | 4,500   | 172,425                    | 34,485  | 155,183                      | 206,910                                | CAPSULE                  | \$                         | \$                       | 30,100                          |     |  |                              |
| 226    | SILDENAFIL CITRATE TABLET 100 MG ORAL                   | 0       | 48,500  | 0         | 0         | 0      | 0        | 0       | 48,500                     | 9,700   | 43,650                       | 58,200                                 | TABLET                   | \$                         | \$                       | 4                               |     |  |                              |
| 227    | SILDENAFIL CITRATE TABLET 25 MG ORAL                    | 0       | 400     | 0         | 0         | 0      | 0        | 0       | 400                        | 80      | 360                          | 480                                    | TABLET                   | \$                         | \$                       | 4                               |     |  |                              |
| 228    | SILDENAFIL CITRATE TABLET 50 MG ORAL                    | 0       | 5,325   | 0         | 0         | 0      | 0        | 0       | 5,325                      | 1,065   | 4,793                        | 6,390                                  | TABLET                   | \$                         | \$                       | 4                               |     |  |                              |
| 229    | a) SIMVASTATIN TABLET 10 MG ORAL                        | 1,550   | 0       | 0         | 0         | 0      | 0        | 1,000   | 2,550                      | 510     | 2,295                        | 3,060                                  | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
|        | b) SIMVASTATIN TABLET 20 MG ORAL                        | 600     | 12,000  | 0         | 0         | 0      | 0        | 900     | 13,500                     | 2,700   | 12,150                       | 16,200                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
|        | c) SIMVASTATIN TABLET 40 MG ORAL                        | 475     | 7,500   | 0         | 0         | 0      | 0        | 1,700   | 9,675                      | 1,935   | 8,708                        | 11,610                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 230    | SULFAMETHOXAZOL/TRIMETHOPRIM SUSP 200-40MG/5 ORAL 400ML | 0       | 0       | 0         | 0         | 0      | 0        | 400     | 400                        | 80      | 360                          | 480                                    | BOTTLE                   | \$                         | \$                       | 400ML                           |     |  |                              |
| 231    | SULFAMETHOXAZOLE/TRIMETHOPRIM TAB 800-160 MG ORAL       | 10,500  | 18,750  | 10,000    | 0         | 0      | 0        | 1,300   | 40,550                     | 8,110   | 36,495                       | 48,660                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 232    | SUMATRIPTAN SUCCINATE TABLET 100 MG ORAL                | 4,500   | 2,800   | 0         | 0         | 0      | 0        | 0       | 7,300                      | 1,460   | 6,570                        | 8,760                                  | TABLET                   | \$                         | \$                       | 650,100                         |     |  |                              |
| 233    | SUMATRIPTAN SUCCINATE TABLET 50 MG ORAL                 | 4,581   | 3,450   | 0         | 0         | 0      | 0        | 0       | 8,031                      | 1,606   | 7,228                        | 9,637                                  | TABLET                   | \$                         | \$                       | 6,100                           |     |  |                              |
| 234    | TADALAFIL TABLET 20 MG ORAL                             | 0       | 17,050  | 0         | 0         | 0      | 0        | 0       | 17,050                     | 3,410   | 15,345                       | 20,460                                 | TABLET                   | \$                         | \$                       | 4,60                            |     |  |                              |
| 235    | a) TAMUSUOSIN HCL ER 24H 0.4 MG ORAL (TABS)             | 28,650  | 39,600  | 0         | 0         | 0      | 0        | 15,000  | 83,250                     | 16,650  | 74,925                       | 99,900                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
|        | b) TAMUSUOSIN HCL CAP ER 24H 0.4 MG ORAL                | 0       | 21,400  | 0         | 0         | 0      | 0        | 7,000   | 28,400                     | 5,680   | 25,560                       | 34,080                                 | CAPSULE                  | \$                         | \$                       | 100                             |     |  |                              |
| 236    | TERBINAFINE HCL TABLET 250 MG ORAL                      | 7,000   | 24,100  | 0         | 0         | 0      | 0        | 0       | 31,100                     | 6,220   | 27,990                       | 37,320                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 237    | TESTOSTERONE UNDECANATE CAPSULE 40 MG ORAL              | 0       | 42,825  | 0         | 0         | 0      | 0        | 0       | 42,825                     | 8,565   | 38,543                       | 51,390                                 | CAPSULE                  | \$                         | \$                       | 60                              |     |  |                              |
| 238    | a) TOPIRAMATE TABLET 100 MG ORAL                        | 14,500  | 30,000  | 0         | 0         | 0      | 0        | 2,200   | 46,700                     | 9,340   | 42,030                       | 56,040                                 | TABLET                   | \$                         | \$                       | 60,100                          |     |  |                              |
|        | b) TOPIRAMATE TABLET 200 MG ORAL                        | 2,000   | 16,400  | 0         | 0         | 0      | 0        | 0       | 18,400                     | 3,680   | 16,560                       | 22,080                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |

| Item # | Description   | CSC Qty | DND Qty | HC/AB Qty | HC/MB Qty | MB Qty | ON Qty** | PEI Qty | Total Estimated Quantities | Overage | Minimum Work Guarantee (75%) | Maximum Total Estimated Quantities (A) | Unit of Measure (U of M) | Firm Price per U of M* (B) | Total Extended Price (C) | Canada's Preferred pack size ** | DIN | All format sizes available from Supplier | Supplier's product number(s) |
|--------|---|---------|---------|-----------|-----------|--------|----------|---------|----------------------------|---------|------------------------------|--|--------------------------|----------------------------|--------------------------|---------------------------------|-----|--|------------------------------|
|        | c) TOPIRAMATE TABLET 25 MG ORAL                       | 60,150  | 63,800  | 0         | 0         | 0      | 0        | 700     | 124,650                    | 24,930  | 112,185                      | 149,580                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 239    | TRAMADOL HCL/ACTAMINOPHEN TABLET 37.5-325MG ORAL      | 0       | 86,000  | 0         | 0         | 0      | 0        | 0       | 86,000                     | 17,200  | 77,400                       | 103,200                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 240    | TRAZODONE HCL TABLET 100 MG ORAL                      | 71,400  | 47,200  | 0         | 0         | 0      | 90,000   | 11,000  | 219,600                    | 43,920  | 197,640                      | 263,520                                | TABLET                   | \$                         | \$                       | various sizes between 12-500    |     |  |                              |
| 241    | TRAZODONE HCL TABLET 150 MG ORAL                      | 30,600  | 15,000  | 0         | 0         | 0      | 0        | 1,500   | 47,100                     | 9,420   | 42,390                       | 56,520                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 242    | TRAZODONE HCL TABLET 50 MG ORAL                       | 31,125  | 15,000  | 0         | 0         | 0      | 140,000  | 25,000  | 211,125                    | 42,225  | 190,013                      | 253,350                                | TABLET                   | \$                         | \$                       | 100,250                         |     |  |                              |
| 243    | TRAZODONE HCL TABLET 75 MG ORAL                       | 6,000   | 300     | 0         | 0         | 0      | 0        | 0       | 6,300                      | 1,260   | 5,670                        | 7,560                                  | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 244    | VALACYCLOVIR HCL TABLET 1000 MG ORAL                  | 0       | 7,411   | 0         | 0         | 0      | 0        | 0       | 7,411                      | 1,482   | 6,670                        | 8,893                                  | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 245    | VALACYCLOVIR HCL TABLET 500 MG ORAL                   | 11,000  | 76,339  | 0         | 0         | 0      | 0        | 800     | 88,139                     | 17,628  | 79,235                       | 105,767                                | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 246    | VALSARTAN TABLET 160 MG ORAL                          | 42,000  | 52,000  | 0         | 0         | 0      | 0        | 1,700   | 95,700                     | 19,140  | 86,130                       | 114,840                                | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 247    | VALSARTAN TABLET 320 MG ORAL                          | 3,200   | 5,000   | 0         | 0         | 0      | 0        | 0       | 8,200                      | 1,640   | 7,380                        | 9,840                                  | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 248    | VALSARTAN TABLET 40 MG ORAL                           | 3,900   | 17,430  | 0         | 0         | 0      | 0        | 490     | 21,820                     | 4,364   | 19,638                       | 26,184                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 249    | VALSARTAN TABLET 80 MG ORAL                           | 28,530  | 85,000  | 0         | 0         | 0      | 10,000   | 790     | 124,260                    | 24,852  | 111,834                      | 149,112                                | TABLET                   | \$                         | \$                       | 30,100                          |     |  |                              |
| 250    | a) VALSARTAN/HYDROCHLOROTHIAZIDE TAB 160-12.5MG ORAL  | 0       | 25,100  | 0         | 0         | 0      | 0        | 0       | 25,100                     | 5,020   | 22,590                       | 30,120                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
|        | b) VALSARTAN/HYDROCHLOROTHIAZIDE TAB 80-12.5MG ORAL   | 0       | 31,000  | 0         | 0         | 0      | 0        | 0       | 31,000                     | 6,200   | 27,900                       | 37,200                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
|        | c) VALSARTAN/HYDROCHLOROTHIAZIDE TABLET 160-25MG ORAL | 0       | 31,650  | 0         | 0         | 0      | 0        | 0       | 31,650                     | 6,330   | 28,485                       | 37,980                                 | TABLET                   | \$                         | \$                       | 100                             |     |  |                              |
| 251    | VANCOMYCIN HCL VIAL 1 G INTRAVEN                      | 14      | 5       | 50        | 220       | 0      | 0        | 10      | 299                        | 60      | 289                          | 359                                    | VIAL                     | \$                         | \$                       | 10x1G                           |     |  |                              |
| 252    | VANCOMYCIN HCL VIAL 500 MG INTRAVEN                   | 0       | 0       | 0         | 0         | 0      | 0        | 20      | 20                         | 4       | 18                           | 24                                     | VIAL                     | \$                         | \$                       | 10                              |     |  |                              |
| 253    | VENAFAXINE HCL CAP ER 24H 150 MG ORAL                 | 59,000  | 165,300 | 0         | 0         | 0      | 50,000   | 6,800   | 281,100                    | 56,220  | 252,990                      | 337,320                                | CAPSULE                  | \$                         | \$                       | 100,500                         |     |  |                              |
| 254    | VENAFAXINE HCL CAP ER 24H 37.5 MG ORAL                | 36,450  | 133,600 | 0         | 0         | 0      | 0        | 10,300  | 180,350                    | 36,070  | 162,315                      | 216,420                                | CAPSULE                  | \$                         | \$                       | 100,500                         |     |  |                              |
| 255    | VENAFAXINE HCL CAP ER 24H 75 MG ORAL                  | 106,650 | 162,300 | 0         | 0         | 0      | 37,000   | 7,800   | 313,750                    | 62,750  | 282,375                      | 376,500                                | CAPSULE                  | \$                         | \$                       | 100,500                         |     |  |                              |
| 256    | ZOLMITRIPTAN TAB RAPIDS 2.5 MG ORAL                   | 0       | 2,350   | 0         | 0         | 0      | 0        | 0       | 2,350                      | 470     | 2,115                        | 2,820                                  | TABLET                   | \$                         | \$                       | 6                               |     |  |                              |
| 257    | ZOLMITRIPTAN TABLET 2.5 MG ORAL                       | 0       | 3,500   | 0         | 0         | 0      | 0        | 0       | 3,500                      | 700     | 3,150                        | 4,200                                  | TABLET                   | \$                         | \$                       | 3.6                             |     |  |                              |
| 258    | ZOPICLONE TABLET 5 MG ORAL                            | 0       | 41,500  | 0         | 0         | 0      | 0        | 3,500   | 45,000                     | 9,000   | 40,500                       | 54,000                                 | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |
| 259    | ZOPICLONE TABLET 7.5 MG ORAL                          | 3,600   | 261,500 | 0         | 0         | 0      | 90,000   | 30,000  | 385,100                    | 77,020  | 346,590                      | 462,120                                | TABLET                   | \$                         | \$                       | 100,500                         |     |  |                              |

\*The unit price contained in Column B will be multiplied by the total quantity in Column A to give a total extended price in Column C (see: A x B = C). The price per unit of measure must remain the same regardless of format size. As an example, if the unit price per tablet was \$0.25 it would remain the same for a bottle of 100's (\$25.00) or for a bottle of 200's (\$50.00).

\*\*The format size indicated in this column are to provide suppliers with an indication of the most commonly ordered bottle/pack sizes by the identified Users and in no way represents a commitment on the part of Canada. Identified Users reserve the right to order additional format sizes available but not listed in this column.

\*\*\*Ontario (Ministry of Health and Long Term Care) has format size requirements in order to run their program. As such, should the Bidder with the lowest price per item not have Ontario's required format size available, Canada reserves the right to award Ontario's quantities to the next lowest Bidder per item who can meet the format size required by Ontario. Please see Annex A-2 attached for Ontario's format requirements.

Items 18, 25, 97, 113, 139, 149, 168, 176, 191, 192, 207, 214, 229, 235, 238, and 250 will be evaluated by the lowest aggregate price per grouping for that item.