LEON COUNTY PURCHASING DIVISION
BID TABULATION SHEET

Bid Title: Employee Medical Coverage, BC-09-09-05-79

Opening Date: Friday, September 9, 2005 at 2:00 PM

Item/Vendor	United Health Care	VISTA Healthplan	C.H.P.	
Manual Signature	yes	yes	yes	
Public Entity Crime Statement	yes	yes	yes	
MWBE Statement	yes	yes	NO	
EEO Statement	yes	yes	yes	
Tie Bid Statement	yes	yes	yes	
Contractor's Information	yes	yes	yes	
Non Collusion Affidavit	yes	yes	yes	
Insurance Certification	yes	yes	yes	
Certification Regarding Debarment	yes	yes	yes	
Employee Only	392.55	392.56	392.50	
Employee +1	812.58	812.52	812.50	
Employee + Family	1040.26	1040.14	1040.20	
BID PRICE				
No Bid Statement				

Tabulated By: Cindy Boyer

Attachment # 1
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