

SIGNATURE PAGE

P-17-2025

To the Monmouth County Board of County Commissioners:

**THE UNDERSIGNED HEREBY DECLARES THAT
I (WE) HAVE CAREFULLY EXAMINED THE SPECIFICATIONS.
I (WE) HEREBY CERTIFY PRICES QUOTED ARE IN ACCORDANCE
WITH YOUR REQUIREMENTS.**

Company Name: Hackensack Meridian Team Health, P.C dba Hackensack Meridian Works

(PRINT)

Preparer's Name: Nathalia Allen, MBA, MS

Signed by:

(PRINT)

Signature:

Nathalia Allen

10/14/2024

(DATE)

Address: 2-12 Corbett Way, Suite 101

Eatontown, NJ 07724

Telephone No.: 848-374-8437

Fax No.: 732-263-7902

E-Mail Address: HMWorks@hmn.org

*****(This should be the email where Contracts would be sent)*****

Contact Person: Nathalia Allen, MBA, MS

FEIN:

(Federal Employee ID)

BRC:

(Business Registration Certificate)

(Revised 2/2017)

County of Monmouth

REQUEST FOR BID

----- This Is Not An Order -----



RFB# P-17-2025

Monmouth County Purchasing
Hall of Records, 3rd Floor
1 East Main Street
Freehold, NJ 07728
(732) 431-7370 Fax (732) 431-7379

Contact: Theresa Aziz
732-431-7370 x7371

PERFORM PRE-EMPLOYMENT MEDICAL EXAMINATIONS AND ADDITIONAL MEDICAL TESTING SERVICES FOR VARIOUS MONMOUTH COUNTY DEPARTMENTS FOR THE PERIOD OF JANUARY 1, 2025 THROUGH DECEMBER 31, 2025

ITEM#	DESCRIPTION	QUANTITY/UNIT	UNIT PRICE	TOTAL PRICE
40	AUDIOGRAM - IF INDICATED PER DOT FORCED WHISPER TEST	6 EACH	\$28.00	\$168.00
41	TUTMUS VISION TEST	1 ONLY	\$27.00	\$27.00
42	ADDITIONAL MISCELLANEOUS TESTS AND REVIEWS		Pricing is dependent on testing required	\$100.00
TOTAL:			\$148,172.00	