



**ADDENDUM
PURCHASING OFFICE
CITY OF AUSTIN, TEXAS**

Solicitation: RFQS 5800 RJZ4000 Addendum No: 4
Date of Addendum: 9/10/19

This addendum is to incorporate the following changes to the above referenced solicitation:

The City hereby has canceled the above-referenced solicitation for On-Site/ Near-Site/ Mobile Health Clinic. Please contact Ricardo Zavala at Ricardo.zavala2@austintexas.gov for questions or further information.

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME.

Addendum No. 4 is hereby incorporated and made a part of the above referenced solicitation.

City of Austin Purchasing Office – Log of Offers Received

Solicitation Number: RFQS 5800 RJZ4000
On-Site/ Near-Site/ Mobile Health Clinic **8/8/19**

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IFB Disclaimer: The information contained on the following bid sheets are for information only and does not constitute actual award/execution of a contract.

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RFP/RFQS Disclaimer: The contents of a proposal shall remain confidential until a contract is awarded. This log of offers is for information purposes only and does not constitute actual award/execution of a contract.

For more information, you may contact the Purchasing Office by:
Phone – 512-974-2500
Email – PurchInfo@austintexas.gov
Physical Address – 124 W. 8th St., Third floor, Austin, TX 78701
Hours of Operation – Monday-Friday 7:45 a.m. to 4:45 p.m.

Vendor Name (on sealed offer)	Rec'd By	Date & Time Received	No Bid	Vendor Name (opening)*	Bid Read @ opening
1. <u>Care ATC</u>	<u>VR</u>	<u>8/6/19 @ 8:19 am</u>	<input type="checkbox"/>	_____	<input type="checkbox"/>
2. <u>Optum</u>	<u>VR</u>	<u>8/7/19 @ 10:18 am</u>	<input type="checkbox"/>	_____	<input type="checkbox"/>
3. <u>Premise Health</u>	<u>VR</u>	<u>8/7/19 @ 10:18 am</u>	<input type="checkbox"/>	_____	<input type="checkbox"/>
4. <u>Care Here LLC</u>	<u>VR</u>	<u>8/8/19 @ 8:21 am</u>	<input type="checkbox"/>	_____	<input type="checkbox"/>
5. <u>Cerner Corporation</u>	<u>VR</u>	<u>8/8/19 @ 8:21 am</u>	<input type="checkbox"/>	_____	<input type="checkbox"/>
6. _____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
7. _____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
8. _____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
9. _____	_____	_____	<input type="checkbox"/>	_____	<input type="checkbox"/>

Form and Offers Distributed By: _____ Date: _____

Form and Offers Received By: _____ Date: _____

* Only complete if the vendor name is different from the name on the offerors documents inside the envelope that is opened during the webinar.

RECEIVED
2019 AUG -8 PM 2:00
PURCHASING OFFICE
CITY OF AUSTIN, TEXAS