Resolution for application for and administration of
Kentucky Office of Homeland Security Project(s)
Marshall County

RESOLUTION 2018-01

County of ______________ Marshall ______________

A RESOLUTION OF THE COUNTY OF Marshall, KENTUCKY AUTHORIZING THE
JUDGE/EXECUTIVE TO MAKE APPLICATION FOR AND, UPON APPROVAL, TO ENTER
INTO AN AGREEMENT WITH THE KENTUCKY OFFICE OF HOMELAND SECURITY (KOHS),
TO EXECUTE ANY DOCUMENTS WHICH ARE DEEMED NECESSARY BY KOHS TO
FACILITATE AND ADMINISTER THE PROJECT AND TO ACT AS THE AUTHORIZED
CORRESPONDENT FOR THIS PROJECT. THIS RESOLUTION ALSO ESTABLISHES
PROCUREMENT POLICY FOR ANY KOHS APPROVED PROJECT FOR THE FY-2018
APPLICATION CYCLE.

WHEREAS, Marshall County, Kentucky desires to make an application for United
States Department of Homeland Security and/or Commonwealth of Kentucky funds for a project
to be administered by Kentucky Office of Homeland Security:

WHEREAS, it is recognized that an application for and approval of Kentucky Office of Homeland
Security funds impose certain obligations and responsibilities upon the county:

NOW, THEREFORE, be it resolved this 10 day of April 2018, by Marshall
____________ County, Kentucky.

The Judge/Executive is hereby authorized to execute and furnish all required documentation,
including a memorandum of agreement, as may be required by KOHS for the furtherance of the
above-referenced project and to act as the authorized correspondent for said project.

For the purpose of any KOHS funded projects using FY-2018 funds the county will use the
provisions of KRS 45A for the purchase of equipment and/or services. For any equipment
and/or services under $20,000, three (3) quotes will be obtained. For any equipment and/or
services that exceeds $20,000 the provisions of KRS 45A will apply.

Done this 10 day of April 2018, on a Motion made by Com. Gold
And seconded by Com. Bowlin

Members present voting in Favor: 3
Members Present voting against: 0

BY: __________________________
Judge/Executive

ATTEST: __________________________
Clerk
## Comprehensive Quotation

### End User Shipping Address
1284284
MARSHALL COUNTY AMBULANCE SERVICE
505 GEORGE MCCRARY DR
BENTON, KY 42025

### Shipping Address
1284284
MARSHALL COUNTY AMBULANCE SERVICE
505 GEORGE MCCRARY DR
BENTON, KY 42025

### Billing Address
1198366
MARSHALL COUNTY AMBULANCE SERVICE
PO BOX 533
BENTON, KY 42025

### Customer Contact
Ref Number: 6441186
Date: 03/28/2018
PO Number: QUOTE
Reference Field: 

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### Note:
FOR 2018 KOHS GRANT APPLICATION
VALID UNTIL 12/31/2018

### Deal Considerations:
- **Product Total**: $52,960.00
- **Freight**: $0.00
- **Tax**: $0.00
- **Total Incr Tax & Freight**: $52,960.00

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### Signature
Title/Position: 
Date: 

Deal Considerations: This is a quote and not a commitment. This quote is subject to final credit, pricing, and documentation approval. Legal documentation must be signed before your equipment can be delivered. Documentation will be provided upon completion of our review process and your selection of a payment schedule. Confidentiality Notice: Recipient will not disclose to any third party the terms of this quote or any other information, including any pricing or discounts, offered to be provided by Stryker to Recipient in connection with this quote, without Stryker’s prior written approval, except as may be requested by law or by lawful order of any applicable government agency.

Terms: Net 30 Days. FOB origin. A copy of Stryker Medical’s standard terms and conditions can be obtained by calling Stryker Medical’s Customer Service at 1-800-STRYKER.

Cancelling and Return Policy: In the event of damaged or defective shipments, please notify Stryker within 30 days and we will remedy the situation. Cancellation of orders must be received within 7 days prior to the agreed upon delivery date. If the order is cancelled within the 30 day window, a fee of 25% of the total purchase order price and return shipping charges will apply.