REQUEST FOR PROPOSAL
Addressed to:

Janitorial Products
All CHS Sites

Date: 9/30/11

BID# 093011
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Part 1. Introduction

The Catholic Health System, Inc. ("CHS") is issuing this Request for Proposal (RFP) to obtain a vendor to provide Catholic Health Systems with Janitorial Supplies for three years. We require that any successful Proposer provide the on-going flexibility that will be required to manage our dynamic operational and business structure.

Proposal General Requirements:

The purpose of this RFP is to select a service provider that can meet the goals of Catholic Health Systems. Our ultimate goal is to provide for continued quality resident care while reducing our monthly costs as much as possible and allowing for the ease of management of the Clinical Staffing program.

This RFP is not a bona fide offer by CHS of any eventual contractual arrangement ("Agreement") which CHS and the Proposer may enter into and CHS reserves the right to select one or more vendors to fulfill the needs of CHS where business needs or market dictate. All responses from Proposers will be considered as an offer and will be construed as willingness by the Proposer to abide by the terms and conditions set forth herein and to enter into a binding contract with CHS for this business.

Any eventual Agreement that will be entered into will include the Proposer’s responses as well as CHS’ standard business policies and contractual terms and conditions. Included within these terms and conditions will be the Proposer’s requirement to: 1) indemnify and hold CHS harmless for all errors and omissions in services or procedures rendered by Proposer in carrying out the services contemplated; and 2) to fully warrant the merchantability and fitness for a particular purpose of any procedures, equipment, products or services supplied or rendered in completing the services contemplated herein; and 3) maintain full compliance with all JCAHO requirements (as applicable), laws, rules, regulations or statutes regulating the rendering of the services or the provision of the products contemplated herein. In the event that a written Agreement is not executed in relation to Proposer's submittal of a response to this RFP, CHS will indicate in writing its acceptance of the terms of Proposer's proposal and the terms and conditions of this RFP will prevail over the relationship of the Proposer and CHS.

CHS reserves the right, in its sole discretion and for any reason, to accept, reject, in part or whole, or terminate consideration at any time of any or all Proposal responses without explanation.

CHS reserves the right to amend, modify, withdraw, cancel or terminate this RFP at any time. If the RFP is amended, modified, withdrawn, cancelled or terminated, it will be in writing from CHS.

All expenses incurred by Proposer in preparing and presenting a proposal or any subsequent contractual negotiations are and will remain the sole responsibility of the Proposer.

The Proposer specifically agrees that CHS shall have no legal liability of any kind for its actions
in releasing this RFP, or considering and choosing among the Proposals and CHS waives all legal responsibility for actions arising out of the issuance of this RFP.

All information requested must be submitted or alternatively, a statement giving the rationale of the Proposer for not submitting requested information must be provided. Proposals which differ from the described format as outlined herein may be rejected.

Questions, inquiries or requests for clarification via telephone will not be accepted. All inquiries regarding this RFP should be emailed and copied to:

Janice Thiell, Senior Buyer,
at jthiell@chsbuffalo.org

Hard copies of your proposal, in the tabbed format described herein, should be mailed or hand delivered. Each Proposer must submit two (2) hard copies plus one electronic copy on CD (Microsoft Office 97 products) of their RFP response to CHS as instructed. Proposals which do not have a Letter of Transmittal, submitted by an authorized representative of the Proposer, will not be considered. Each proposal should be enclosed in a sealed envelope and clearly marked with Bid# 093011 and mailed to the below address.

Janice Thiell; Senior Buyer
c/o Nazareth Campus
291 North Street
Buffalo, NY 14217

Please note that late and/or incomplete RFP’s may not be considered. The below dates are subject to change by CHS at any time. CHS will use its best efforts to promptly notify Proposer of any changes when made.
PLEASE BE ADVISED OF THE FOLLOWING TIMELINE. YOUR COOPERATION IN COMPLYING WITH THIS TIMELINE IS REQUIRED.

By:

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
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<tbody>
<tr>
<td>Advise by email of your intent to respond:</td>
<td>10/10/11</td>
</tr>
<tr>
<td>Submit any clarifying questions you have:</td>
<td>10/07/11</td>
</tr>
<tr>
<td>CHS will respond to your questions:</td>
<td></td>
</tr>
<tr>
<td>Proposals must be received at above address by 4:00 pm.:</td>
<td>10/14/11</td>
</tr>
<tr>
<td>Proposer/Vendor Selection (Tentative):</td>
<td></td>
</tr>
<tr>
<td>Start/Effective Date for these Services/Products (Tentative)</td>
<td>01/01/2012</td>
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Part 2. CHS Background & Sites Applicable to this RFP

CHS is a member of Catholic Health East, one of the nation’s largest health care systems, which serves communities in eastern states from Maine to Florida.

Formed in 1998, CHS is a tax-exempt, New York not-for-profit corporation that provides health care and health-related services to hundreds of thousands of Western New Yorkers. CHS is comprised of three Western New York acute care hospitals including Mercy Hospital of Buffalo, Sisters of Charity Hospital (and the St. Joseph Campus of Sisters of Charity Hospital) and Kenmore Mercy Hospital and operates approximately 50 primary care centers, diagnostic treatment centers, long term care facilities, adult homes, home care agencies and laboratory sites. In addition, CHS offers numerous counseling services, women’s services, rehabilitative services, social services, community education and behavioral health programs.

One of the largest providers of healthcare in Western New York, CHS employees a workforce of over 8,000 and an additional 1,500 physicians.

CHS Site List applicable to this RFP:

<table>
<thead>
<tr>
<th>Facility Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
<th>Zip</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mercy Hospital</td>
<td>565 Abbot Road</td>
<td>Buffalo</td>
<td>NY</td>
<td>14220</td>
<td></td>
</tr>
<tr>
<td>Kenmore Mercy Hospital</td>
<td>2950 Elmwood Avenue</td>
<td>Kenmore</td>
<td>NY</td>
<td>14217</td>
<td></td>
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<tr>
<td>Sisters of Charity Hospital</td>
<td>2157 Main St</td>
<td>Buffalo</td>
<td>NY</td>
<td>14214</td>
<td></td>
</tr>
<tr>
<td>Sisters of Charity/St. Joseph Campus</td>
<td>2605 Harlem Rd</td>
<td>Cheektowaga</td>
<td>NY</td>
<td>14225</td>
<td></td>
</tr>
</tbody>
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All associated primary care centers, surgical centers, diagnostic treatment centers, long term care facilities, adult homes, home care agencies, and laboratory sites.
Part 3. Required Submittals and Proposal Response Format

All proposals must be on 8-1/2 x 11 inch paper, typed, and placed in a three ring binder. Tabbed section numbers (Tab #'s 1-5) should separate responses to each of the below-described items. The tabs should align with the section items as listed below. (Example: Letter of Transmittal should be after Tab #1, Your Business Structure Identifying Information should be after Tab #2 etc.) Proposal documents should not be hardbound.

Section/Tab 1 – Letter of Transmittal

Provide a submittal cover letter signed by a person who is authorized to negotiate this Request for Proposal. Please include telephone number and other contact information for this person.

Section/Tab 2 – Business Structure Identifying Information

- Name, address, principle place of business and telephone number of legal entity with whom any eventual Agreement is to be written.

- If the legal entity is a corporation, include a Copy of the filed Articles of Incorporation. Disclose the name of Proposer’s corporate parent/shareholder. If the legal entity is a partnership, limited liability company or other business organization, disclose all partners or members and include a copy of any and all formation documents.

- Name, address, and telephone numbers of principal officers, members or partners (Principal officers of Proposer should include: President, Vice President, Treasurer, Secretary, and Chairperson of the Board of Directors). If the legal entity is a partnership or a limited liability company, disclose all of the above requested information for all partners or Members, as well as ownership percentage(s).

- Federal ID Number

Section/Tab 3 – Financial Qualifications

Provide the following information and/or documentation on your company:

- Provide a summary of your Financial Qualifications. Include your Company’s annual revenue and a copy of (preferably) audited financial statements for the past three years, include all auditor footnotes.
Section/Tab 4 – Professional and Business Qualifications

Please respond to each of the below inquiries. Please number your responses to correlate with each inquiry number.

- Indicate how long your company has been in business.

- Provide a list and contact names and telephone numbers for at least three current client references comparable in size to the business contemplated herein.

- Describe your current invoicing practices and process. Do you have capabilities of electronic invoicing? If so, identify clients who you are currently utilizing electronic invoicing with.

- CHS standard payment term is net-60 days from the date of an undisputed invoice. CHS reserves the right to withhold a disputed amount from an invoice and will, in good faith, agree to cooperate with Proposer in timely rectifying any disputed amount(s).

- CHS is willing to accept creative cost proposals. Feel free to add any incentives that CHS could consider in its selection processes.

Section/Tab 5 - Project Specific Submittal Requirements:

Each Proposer must submit and meet the following requirements, at a minimum:

- Provide the pricing using the attached excel spread sheet listing the current product being used.

- The vendor winning the contract will work with our departments on deliveries that are acceptable to the department.

- Ability to accept orders EDI and future usage of GHX.

The transactions between CH and the winning bidder must occur through Global healthcare Exchange (GHX). This applies to the following transactions sets: Purchase Orders (850), Invoices (810), Order Confirmations (855) must be transacted via EDI to Global Healthcare Exchange.

The pricing in this agreement must be held firm and consistent for the term of the agreement (3 years).

All transactions are subject to CHS terms and conditions.
This is universe of items that CH will purchase. All changes must be approved in advance by CH.