CITY OF RIALTO SOLE SOURCE VENDOR REQUEST

VENDOR: Z011 Medical, In	10
ADDRESS: 269 Mill Road	Chelmsford, MA 01824-4105
REQUSITION NUMBER: 028780	
Check reasons for sole source req	uest:
1.	
Proprietary:	The item is held under exclusive title, trademark or copyright by a private person or company; or a proprietary distributorship.
XStandardization	n: The City requires the item(s) to standardize parts, design quality, etc. (explain in more detail below).
X Sole Source:	No other items are known to exist which perform the same function.
3. Describe how the product or se Zoll Medical Equipment re4. Is the product or service availant	quires Zoll supplies.
used? No Please explain: matched to Zoll Cardiac Monit	dified so that competitive products or services may be No modifications -Not for the Equipment, must be tors. ining the steps taken to determine this is a sole source
vendor and justify the need. N/	A
Signature: Mun	Date: 9-3-19
Approvals:	
Department Head	Chief Finance Officer
City Administrator	Purchasing Manager