STATE PROCUREMENT OFFICE
NOTICE OF AMENDMENT TO SOLE SOURCE CONTRACT

1. TO: Chief Procurement Officer
2. FROM: HHSC
   Department/Division/Agency
3. Name of Contractor: Blood Bank Of Hawaii
4. Sole Source Reference Number: 06-06
5. Contract Number:
6. Description of goods, services, or construction:
   Goods - Purchase Blood and Blood Products - For all HHSC Facilities

7. Approval to amend is submitted in order to:
   □ Revise the scope of services for the contract as follows:
   Term - Two (2) Year agreement with four (4) two (2) year extensions. Estimate dollars per year is 1.5 million dollars. First two
   year period is from 7/01/06 to 06/30/08; next four years with 2 year term is 7/01/08 - 6/30/10; 7/01/10 - 6/30/12; 7/01/12
   - 6/30/14; 7/01/14 - 6/30/16.
   □ Increase contract price by 10% or more:
   Original Contract Price: Did not $ 13,000,000
   Amended Contract Price: $13,000,000

8. Reason: This/These amendment(s) are necessary because:
   Revise the term for a Two (2) Year agreement with four (4) two (2) year extensions options and to increase the not to exceed
   dollars for the term to 15 million dollars.

9. Direct questions to: Raymond Liu
   Phone: 808-322-4556

Agency shall ensure adherence to applicable administrative and statutory requirements.

10. Pursuant to §103D-306, HRS, and § 3-122-82, HAR, I certify that the information provided above is, to
    the best of my knowledge, true and correct

[Signature]
Department Head
Date: 6/14/06

11. Date Notice Posted: 6/14/06
12. Submit written objections to this notice of amendment to Sole Source Contract within seven calendar days or as otherwise
    allowed from the above posted date to:
    Chief Procurement Officer
    State Procurement Office
    P.O. Box 119
    Honolulu, Hawaii 96810-0119

Chief Procurement Officer's Comments:

[Signature]
Date: 6/14/06

13. □ APPROVED □ DISAPPROVED

[Signature]
Chief Procurement Officer
Date: 6/14/06

SPO-01B (Rev. 09/30/005)
STATE OF HAWAII
REQUEST FOR SOLE SOURCE

TO:  Head of Procurement Agency
FROM:  Kona Community Hospital/HHSC
(Department/Division/Agency)

Pursuant to §103D-306, HRS, and Subchapter 9, Chapter 3-122, HAR, the Department requests sole source approval to purchase the following:

Description of goods, services, or construction:
Goods - Blood and Blood Products

Name of Vendor:  Blood Bank of Hawaii
Address:  2843 Dillingham Blvd., Honolulu, Hawaii 96819

Cost:  varies each month

Terms of Contract:
From:  03/01/06
To:  04/30/07

The goods, services, or construction has the following unique features, characteristics, or capabilities:
Blood Bank of Hawaii located in Honolulu, Hawaii is the only supplier in Hawaii which collects and dispenses blood and blood products and delivers to HHSF facilities in a timely manner.
REQUEST FOR SOLE SOURCE (Cont.)

How the unique features, characteristics, or capabilities are essential for the agency to accomplish its work:
Blood and blood products are used for patient treatment and essential for patients' lives in various diseases or trauma cases.

The following other possible sources for the goods, services, or construction were investigated but do not meet our needs because:
N/A

Direct questions to: Raymond Liu
Phone: 808-322-4556

I certify that the information provided above is to the best of my knowledge, true, correct and that the goods, services, or construction are available through only one source.

[Signature] 2/16/06
Department Head or Designee
CFO
Title (if other than Department Head)

Head of Procurement Agency's comments:

Please ensure adherence to applicable administrative and statutory requirements.

Expenditure may be processed through a purchase order: Yes ☐ No ☐ If no, a contract must be executed and funds certified.

☑ APPROVED ☐ DISAPPROVED

Head of Procurement Agency 03/21/06

SPO Form -4 (Rev. 7/1/02)