DESCRIPTION: The Citadel is seeking written quotes for a virtual dissecting/digital cadaver table for use in classroom instruction and coursework. The table must contain operating software to allow Cadets from multiple departments to realize the benefits of having access to digital models of real human cadavers. At The Citadel, we only have plastic human models which can be limiting when it comes to learning about anatomy and physiology in a variety of majors (Biology, Exercise Science, Physical Education and Nursing). This tool will be utilized by our early career nurses and pre-med students as they get first hand exposure to real human systems and how things can go wrong, eventually leading to death. The offered digital cadaver table must be able to allow Cadets and instructors to teach from human models (and case studies), and also use animal models to aid in teaching comparative anatomy and physiology courses.

Minimum requirements to be considered for award:
- Table must be full-sized with a minimum length of seven (7) feet
- Table shall be moveable for easy classroom relocation
- Must be able to duplicate the table across two (2) displays with either HDMI or DisplayPort outputs
- Must be powered by a standard U.S. power outlet
- Table shall be interactive for use with students in classroom instruction
- Must be provided with operational software that fully supports teaching across multiple science disciplines and provides no charge software updates for the life of the table
- Updates are to be automatically delivered via network connection
- Operating software shall have multiple authentic cadavers to choose from
- Software shall include a curriculum to be used in classroom instruction

TOTAL delivered price for table, software, and all components (FOB The Citadel)

$___________________

SUBMIT WRITTEN QUOTE by: Wednesday, May 5, 2020 at 2:00 PM via email attachment to the Procurement Officer listed above.

QUESTIONS: All questions regarding this quote request shall be submitted in writing to the email address of the Procurement Officer listed above at least two (2) business days before quotes are due.
Vendors who are claiming preferences must make it clear which preferences are being requested and include a signed copy of this page with their quote.

US End Product____ SC End Product____ Resident Vendor____

PREFERENCES - A NOTICE TO VENDORS (SEP. 2009): On June 16, 2009, the South Carolina General Assembly rewrote the law governing preferences available to in-state vendors, vendors using in-state subcontractors, and vendors selling in-state or US end products. This law appears in Section 11-35-1524 of the South Carolina Code of Laws. A summary of the new preferences is available at www.procurement.sc.gov/preferences. ALL THE PREFERENCES MUST BE CLAIMED AND ARE APPLIED BY LINE ITEM, REGARDLESS OF WHETHER AWARD IS MADE BY ITEM OR LOT. VENDORS ARE CAUTIONED TO CAREFULLY REVIEW THE STATUTE BEFORE CLAIMING ANY PREFERENCES. THE REQUIREMENTS TO QUALIFY HAVE CHANGED. IF YOU REQUEST A PREFERENCE, YOU ARE CERTIFYING THAT YOUR OFFER QUALIFIES FOR THE PREFERENCE YOU’VE CLAIMED. IMPROPERLY REQUESTING A PREFERENCE CAN HAVE SERIOUS CONSEQUENCES. [11-35-1524(E)(4)&(6)]

PREFERENCES - ADDRESS AND PHONE OF IN-STATE OFFICE: Please provide the address and phone number for your in-state office in the space provided below. An in-state office is necessary to claim either the Resident Vendor Preference (11-35-1524(C) (1) (i) & (ii)) or the Resident Contractor Preference (11-35-1524(C) (1) (iii)). Accordingly, you must provide this information to qualify for the preference. An in-state office is not required, but can be beneficial, if you are claiming the Resident Subcontractor Preference (11-35-1524(D)).

_____ In-State Office Address same as Home Office Address
_____ In-State Office Address same as Notice Address (check only one)

HOME OFFICE ADDRESS (Address for Offeror's home office / principal place of business) NOTICE ADDRESS (Address to which all procurement and contract related notices should be sent.) (See “Notice” clause)

_________________________________________________  _____________________________________________________
Area Code  -  Number  -  Extension                    Facsimile
_________________________________________________  _____________________________________________________

E-mail Address

You must submit a signed copy of this form with your quote if claiming any vendor preferences.

NAME OF OFFEROR (Full legal name of business submitting the offer) ANY AWARD ISSUED WILL BE ISSUED TO, AND THE CONTRACT WILL BE FORMED WITH, THE ENTITY IDENTIFIED AS THE OFFEROR. THE ENTITY NAMED AS THE OFFEROR MUST BE A SINGLE AND DISTINCT LEGAL ENTITY. DO NOT USE THE NAME OF A BRANCH OFFICE OR A DIVISION OF A LARGE ENTITY IF THE BRANCH OR DIVISION IS NOT A SEPARATE LEGAL ENTITY, i.e., A SEPARATE CORPORATION, PARTNERSHIP, SOLE PROPRIETORSHIP, ETC.

AUTHORIZED SIGNATURE DATE SIGNED

(PERSON MUST BE AUTHORIZED TO SUBMIT BINDING OFFER TO CONTRACT ON BEHALF OF OFFEROR.)

PRINTED NAME & TITLE STATE VENDOR NO.

(NAME AND BUSINESS TITLE OF PERSON SIGNING ABOVE) (REGISTER TO OBTAIN S.C. VENDOR NO. AT www.procurement.sc.gov)

TAXPAYER IDENTIFICATION NO. STATE OF INCORPORATION

(REGISTER TO OBTAIN S.C. VENDOR NO. AT www.procurement.sc.gov) (IF YOU ARE A CORPORATION, IDENTIFY THE STATE OF INCORPORATION)

Rev 04/2021