



STATE OF IOWA
MASTER AGREEMENT
Contract Declaration and Execution

MA 005

27132

EFFECTIVE BEGIN DATE: 10-05-2026
EXPIRATION DATE: 10-31-2027
PAGE: 1 of 3

VENDOR:

MICRO DISTRIBUTING II LTD

00003023442

620 KENNEDY CT

BELTON, TX 76513-4140

VENDOR CONTACT:

Jeff Milner

PHONE: 317-409-2108

EMAIL: jeffm@micro-distributing.
com

FOB: FOB Dest, Freight Prepaid

ISSUER:

Carlos Fuentes

PHONE: 515-240-2698

EMAIL: carlos.fuentes@das.iowa.gov

Contract For: Drug & Alcohol Testing Products & Svcs - MMCAP MMS2501106

This contract is for Drug & Alcohol Testing Products & Services (includes DOT and Non-DOT Testing) through a cooperative Minnesota Multistate Contracting Alliance for Pharmacy (MMCAP) participating addendum with the State of Iowa. All purchase orders issued by ordering entities with the jurisdiction of this MPA agreement shall include the MMCAP Contract #MMS2501106 and the State of Iowa Master Agreement #27132 on the order.

Within the State of Iowa, all state agencies, state facilities, cities, counties or education entities or any entity funded in part with state tax dollars, are eligible purchasers and authorized to purchase products and services under the terms of the Participating Addendum in lieu of a separate competitive selection process. The parties agree to comply with the terms and conditions on the following attachments which are by this reference made a part of the Agreement.

Attachment 1: MMCAP Infuse Procurement Certification

Attachment 2: MMCAP Contract MMS2501106

Attachment 3: Signed Member-Requested Participation Addendum (MPA)

Attachment 4: Price File

Contract and pricing are maintained by MMCAP. Contact DAS Procurement/State of Iowa MMCAP representative for MMCAP membership information

Additional POC for Micro Distributing II, LLC is listed below:

Jeff Milner

jeffm@micro-distributing.com

866-933-0964

317-409-2108(mobile)

NET30 Payment Terms

Additional MMCAP information can be found online at:

<https://mmcap.mn.gov>

RENEWAL OPTIONS

FROM 11-01-2027 **TO** 10-31-2028

FROM 11-01-2028 **TO** 10-31-2029

FROM 11-01-2029 **TO** 10-31-2030

AUTHORIZED DEPARTMENT

ALL

SUB Other Governmental Entities



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LINE NO.	QUANTITY / SERVICE DATES	UNIT	COMMODITY / DESCRIPTION	UNIT COST / PRICE OF SERVICE
1	0.00000	EA	19348	\$ 0.000000 \$ 0.000000

REF DOC: REF VNDR LN: REF COMM LN: REF TYPE: FINAL

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

Drug Assay and Screening Test Kits (Except Radioimmunoassay)

Pricing per MMCAP Contract MMS2501106

See ATTACHMENT 4 Price File or contact vendor for MMCAP pricing.



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PAGE: 3 of 3

TERMS AND CONDITIONS

Referenced Terms

The parties agree to comply with the terms and conditions pursuant to the bid process which are by this reference made a part of the Agreement.

THIS MASTER AGREEMENT IS EFFECTIVE AS OF THE LATEST DATE SHOWN IN "EFFECTIVE BEGIN DATE" IN THE UPPER RIGHT HAND CORNER OR THE DATE BELOW SIGNED BY THE STATE OF IOWA.

CONTRACTOR	STATE OF IOWA
CONTRACTOR'S NAME (If other than an individual, state whether a corp, partnership, etc.	AGENCY NAME
BY (Authorized Signature) Date Signed	BY (Authorized Signature) Date Signed
Printed Name and Title of Person Signing	Printed Name and Title of Person Signing
Address	Address