

The following documentation is an electronicallysubmitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at *wvOASIS.gov*. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at *WVPurchasing.gov* with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

WOASI	S	Jump to: PRCUID 🟦 Go 🧊	Home 🄑 Personalize 🛛	Accessibility	🔁 App Help 🛛 🐔 About	U
Welcome, Lu Anne Cottrill	Procu	urement Budgeting Accounts Receiva	able Accounts Payable			
Solicitation Response(SR) Dept: 0323	ID: ESR0102200000003883 Ver.: 1 Function: New	Phase: Final Modified by b	oatch , 01/03/2020			
Header () 1					😑 List View	
General Information Contact	Default Values Discount Document Information					
Procurement Folder: 6580	012	SO Doc Code	: CRFQ			
Procurement Type: Cent	tral Master Agreement	SO Dept	t: 0323			
Vendor ID: VS	:000020857 🚖	SO Doc ID	b: WWV200000006			
Legal Name: Jage	ers Enterprise Inc.	Published Date	e: 12/30/19			
Alias/DBA: Elite	Services	Close Date	e: 1/3/20			
Total Bid: \$37.	.00	Close Time	e: 13:30			
Response Date: 01/	/02/2020	Status	: Closed			
Response Time: 16:	14	Solicitation Description	ADDENDUM 3 - Drug Screening/Testing	0		
1		Total of Header Attachments	:: 1			
		Total of All Attachments	:: 1			



Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

State of West Virginia Solicitation Response

Solicitation Description : ADDENDUM 3 - Drug Screening/Testing					
Proc Type : Central Master Agreement					
Date issued	Solicitation Closes	Solicita	Solicitation Response Version		
	2020-01-03 13:30:00	SR	0323 ESR0102200000003883	1	

VS000020857	,					
Jagers Enterpri	se Inc.					
Elite Services						
Solicitation N	umber: CRFQ	0323	WWV200000006	3		
Total Bid :	\$37.00		Response Date:	2020-01-02	Response Time:	16:14:02

Comments: Thank for allowing us the opportunity to Bid our services for Workforce West Virginia. Elite Service has been servicing government agencies, businesses all over the USA now for 22 years.

FOR INFORMATION CONTACT THE BUYER		
Dusty J Smith		
(304) 558-2063 dusty.j.smith@wv.gov		
Signature on File	FEIN #	DATE
All offers subject to all terms and conditions contained in this s	solicitation	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Drug Screening/Testing per specifications attached herein	1.00000	EA	\$37.000000	\$37.00
Comm Code	Manufacturer	Specification		Model #	
85121810					
Extended Des	scription : Drug Screening/Testing	per specifications a	attached here	in	

Comments: Thank you for the opportunity.



6965 Piazza Grande Ave. Orlando Florida 32835

888-738-9297

WorkForce West Virginia-WWV200000006

Thank you for allowing us the opportunity to Bid our services for Workforce West Virginia. Elite Service has been servicing Government Agencies, Business, all over the USA now for 22 years. With that we have perfected our streamline of services. As indicated, we will process applicants drug screens utilizing your requested procedures with allocated forms.

We understand how important it is to have a compliant workforce. If we are awarded the bid, we will assist your employees and walk everybody through our process to make it an easy transition.

- 1. Forms will be set up as requested
- 2. Our Laboratories are all SAMSHA Certified
- 3. All our facilities are within your requested range for your applicants.
- 4. Once the form is given sample must be submitted within 24 hours of notice.
- 5. Test results will arrive within 24 hours of less for negative results.
- 6. Results will arrive online, with email notification, or secured PDF
- 7. Most Non-Negative results are reported within 48 hours
- 8. All Non-Negative results are called by the Dr. Hani Khella
- 9. Billing is processed on the 2nd of each month.
- 10. Payments can be made via our website, mailed, bank transfer, and credit card.
- 11. Once awarded designated personnel will be given proper login and password to access results.
- 12. All report requests are retrievable via online or per request.

We take drug screening very seriously, we currently process 17,000 tests per month, every test is held to our highest standard in excellence, accuracy and customer care are both the staples of our business.



Elite Services Bill Jagers Director of Business Development (O) 888-738-9297 (C) 352-217-8460



6965 Piazza Grande Ave. Orlando Florida 32835

888-738-9297

Here are a few of our references for you. If you would more let me know.

DCF - Tallahassee 1317 WINEWOOD BLVD. BLDG 5 4TH FLR TALLAHASSEE, FL 32399 (850) 487-6170 Katherine Lilly Katherine.Lilly@myflfamilies.com Katherine Lilly

DCF - Suncoast 1317 WINEWOOD BL STE 1-310 TALLAHASSEE, FL 32399 (850) 921-4893 Dolores Alexander dolores.alexander@myflfamilies.com

FDVA-VETERANS NURSING HOME-PC 21281 GRAYTON TERRACE PORT CHARLOTTE, FL 33954 (850) 487-1533 Elizabeth Barton bartone@fdva.state.fl.us FrazierS@fdva.state.fl.us

Thank you again for the opportunity!



Elite Services Bill Jagers Director of Business Development (O) 888-738-9297 (C) 352-217-8460



State of West Virginia Request for Quotation 23 — Laboratory

oc Folder: 658012	older: 658012		
oc Description: Drug S	tion: Drug Screening/Testing		
oc Type: Central Maste			
Solicitation Closes	Solicitation No	Version	
2019-12-27 13:30:00	CRFQ 0323 WWV200000006	1	
	Control Type: Central Master Solicitation Closes 2019-12-27	Solicitation Closes Solicitation No 2019-12-27 CRFQ 0323 VWV/2000000006	

1447	25205	
***	25305	
	w	WV 25305

VENDOR

Vendor Name, Address and Telephone Number:

Jagers Enterprises, Inc. DBA/ Elite Services. 6965 Piazza Grande Ave Suite 405 Orlando FL 32835 352-217-8460 bjagers@esitesting.com

FOR INFORMATION CONTACT THE BUYER Dusty J Smith (304) 558-2063 dusty.j.smith@wv.gov			
Signature X Bill Jagers' Verified by PDFfiller 12/14/2019 All offers subject to all terms and conditions contained in th	59-3647846 FEIN #	DATE	12/14/2019

ADDITIONAL INFORMATION:

THE STATE OF WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, WORKFORCE WEST VIRGINIAIS SOLICITING BIDS FOR THE OPEN-END CONTRACT OF DRUG SCREENING AND TESTING SERVCES PER THE ATTACHED DOCUMENTS.

QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO DUSTY.J.SMITH@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE INSTRUCTIONS TO VENDORS SUBMITTING BIDS.

INVOICE TO	SHIP TO
FISCAL AND ADMINISTRATIVE MANAGEMENT - 5301	OFFICE OF ADMIN SUPPORT - 5302
WORKFORCE WEST VIRGINIA	WORKFORCE WEST VIRGINIA
1900 KANAWHA BLVD, EAST	1900 KANAWHA BLVD, EAST
BLDG 3, 3RD FLOOR, SUITE 300	BLDG 3, 3RD FLOOR, SUITE 300
CHARLESTON WV25305	CHARLESTON WV 25305
US	US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price	
1	Drug Screening/Testing per specifications attached herein	1.00000	EA	37.00	37.00	

Comm Code	Manufacturer	Specification	Model #
85121810			10 Panel/Sample Collection/MRO Services
1			

Extended Description :

Drug Screening/Testing per specifications attached herein

SCHEDULE OF EVENTS	HEDULE	SCHEI
	e	Line
1 TECHNICAL QUESTIONS DUE AT 10AM	-	1

DOL: http://www.dol.gov/elaws/esa/flsa/docs/contractors. asp

Prior to utilizing the services available under this contract, each agency must ensure that factors relating to the broad categories of behavioral control, financial control, and the type of relationship between the state and the temporary worker will not cause the independent contractor relationship to be construed as an employee/employer relationship. Items that must be considered include but are not limited to, the degree of control exercised by the State over the temporary worker relating to performance of the job and the degree to which the temporary worker is integrated into the State's system. The Purchasing Division recommends that each agency review the IRS and DOL publications found at the links above and obtain further assurance from their respective internal legal counsel to maintain the independent contractor status for individuals and entities hired under this contact.

12. MISCELLANEOUS:

12.1 Contract Manager: During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager:	Bill Jagers		
Telephone Number:	OFC 888-738-9297 Cell 352-217-8460		
Fax Number:	407-792-5454		
Email Address:	bjagers@esitesting		

signed and that is provided by a WFWV representative and shall ensure that no drug tests are given after the established date shown on the WFWV developed form. this document is found in **Exhibit D**.

3.1.1.7 Vendor shall test, record, submit for review, and legally support confirmations of test specimens in conformity within the concentration cutoff levels set forth below:

Initial Test Analyte	Initial Test Cutoff Concentration	Confirmatory Test Cutoff Concentration
Amphetamines	1000 ng	500 ng
Cannabinoids/THC	50 ng	15 ng
Cocaine Metabolite	300 ng	150 ng
Opiates	300 ng	300 ng
Phencyclidine (PCP)	25 ng	25 ng
Benzodiazepines	300 ng	300 ng
Propoxyphene	300 ng	300 ng
Methadone	300 ng	300 ng
Barbiturates	300 ng	300 ng
Synthetic Narcotics Oxycodone Hydrocodone	100 ng 300 ng	100 ng 300 ng

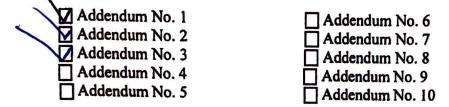
- 3.1.1.8 Vendor must have the capability to change screening cutoffs within thirty (30) days of a written request from WorkForce West Virginia should the national cutoff levels be updated by U.S. Department of Health and Human Services or U.S. Department of Transportation.
- 3.1.1.9 Vendor will determine the appropriate nanogram cut-off levels for drugs that have no threshold listed above.

ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.:

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received: (Check the box next to each addendum received)



I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Jagers Enterprises, Inc. DBA: Elite Services



Authorized Signature

12/14/2019

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

(Name, Tit	ie) Bill Jagers-Director Business Development	
	ene and Title) 6965 Piazza Grande Ave Suite 405 Orlando FL 32835	i.
(Address)	888-738-9297/ Fax 407-792-5454	
(Phone Nu	mber) / (Fax Number) Bjagers@esitesting	
(email addr	ress)	

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

Jagers Enterprises, Inc. DBA: Elite Services

(Company) Bill Jagers

(Authorized Signature) (Representative Name, Title)

Bill Jagers Director Business Development

(Printed Name and Title of Authorized Representative)

December 14, 2019

(Date)

888-738-9297/ Fax 407-792-5454

(Phone Number) (Fax Number)

STATE OF WEST VIRGINIA Purchasing Division PURCHASING AFFIDAVIT

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code* §61-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party each party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name:	Jagers Enterprises, Inc. DBA: Elite Services
Authorized Signature	Jager DL# 262930652200 12/15/19 Date: 12/15/19
State of Florid	
County of	e, to-wit:
Taken, subscribed, and swe	m to before me this <u>15 day of December</u> , 2019.
My Commission expires	June 20 2023
	tary Public State of Florida fayette Alicia Brooks Commission GG 347093 pires 06/20/2023

West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

	lagers Enterprises, Inc DBA: Elite Services	Address: _	6965 Piazza Grande Ave Suite 405 Orlando FL 32835
		_	
Name of Authorized Agent:Bill Jagers		Address: _	6965 Piazza Grande Ave Suite 405 Orlando FL 32835
Contract Number:CRFQ 0323 WWV200000006	Contra	ct Descripti	ion:Drug Screening/Sample Collection/MRO Servces
Governmental agency awarding contract	State of West Virginia		FADMINISTRATION
Check here if this is a Supplemental I	Disclosure	PURCHASING DIN 2019 WASHINGTO CHARLESTON 25	ON ST E

List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):

- 1. Subcontractors or other entities performing work or service under the Contract Check here if none, otherwise list entity/individual names below.
- 2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities) Check here if none, otherwise list entity/individual names below.
- 3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)

Check here if none, otherwise list entity/individual names below.

Signature: Bul Japus Date Signed: 12/15/19 DL#JZ6Z9130652220
Notary Verification
State of, County of;
$I_1 = Bill Jagers # PL$, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the
Taken sworn to and subscribed before me this day of day of
Lafayette Alicia Brooks Jacanette alecia Lorks
Temples 08/20/2023 Notary Public's Signature Date Received by State Agency:
Date submitted to Ethics Commission: Governmental agency submitting Disclosure:

Description	Unit of Measure	Unit Cost	Estimated Number of Test	Extended Cost
Drug Screening/Testing	Each	\$37.00	1000	\$37,000.00
Total Bid Amount				\$37,000.00
Estimated quantit	y is for bidding purposes	only		

Exhibit A-Pricing Page for Drug Screening Services