



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

State of West Virginia Master Agreement

Order Date: 10-15-2021

CORRECT ORDER NUMBER MUST
APPEAR ON ALL PACKAGES, INVOICES,
AND SHIPPING PAPERS. QUESTIONS
CONCERNING THIS ORDER SHOULD BE
DIRECTED TO THE DEPARTMENT
CONTACT.

Order Number:	CMA 0805 0805 PTR2100000003 2	Procurement Folder:	779906
Document Name:	Oversight Assistance for Bus and Bus Facilities	Reason for Modification:	Change Order #1 - Administrative Change Order to change the contract end date
Document Description:	Oversight Assistance for Bus and Bus Facilities		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:		Effective Start Date:	2021-01-01
Free on Board:		Effective End Date:	2021-12-31

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: 000000166722 WAGNER DANIEL WILLIAM 5528 24TH ST N ARLINGTON VA 22205 US Vendor Contact Phone: 703-532-7629 Extension: Discount Details: <table><thead><tr><th></th><th>Discount Allowed</th><th>Discount Percentage</th><th>Discount Days</th></tr></thead><tbody><tr><td>#1</td><td>No</td><td>0.0000</td><td>0</td></tr><tr><td>#2</td><td>No</td><td></td><td></td></tr><tr><td>#3</td><td>No</td><td></td><td></td></tr><tr><td>#4</td><td>No</td><td></td><td></td></tr></tbody></table>		Discount Allowed	Discount Percentage	Discount Days	#1	No	0.0000	0	#2	No			#3	No			#4	No			Requestor Name: John S Caldwell Requestor Phone: (304) 558-9578 Requestor Email: john.s.caldwell@wv.gov 22 FILE LOCATION _____
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
ACCOUNTS PAYABLE PUBLIC TRANSIT DIVISION OF BLDG 5 RM 663 1900 KANAWHA BLVD E CHARLESTON WV 25305-0432 US	AUTHORIZED RECEIVER PUBLIC TRANSIT DIVISION OF BLDG 5 RM 663 1900 KANAWHA BLVD E CHARLESTON WV 25305-0432 US

Total Order Amount:

Open End

Purchasing Division's File Copy

ENTERED

JLH 10/15/2021

PURCHASING DIVISION AUTHORIZATION
DATE: *Tara H. 10/15/2021*
ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM
DATE: *John S. Caldwell*
ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION
Beverly Toler
DATE: *10-26-21*
ELECTRONIC SIGNATURE ON FILE

10/25/2021

Extended Description:

Change Order #1

Change Order #1 is issued for administrative purposes only and is intended to change the contract end date from 12/31/2022 to 12/31/2021. The original contract, including all terms, conditions, prices, specifications, and change orders contained therein remain in full force and effect.

Effective Dates: 01/01/2021 - 12/31/2021

3 Renewals Remaining

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	94131504				0.000000
	Service From	Service To			

Commodity Line Description: Oversight Assistance for Bus and Bus Facilities**Extended Description:**

Oversight Assistance for Bus and Bus Facilities as referenced on the attached Exhibit A Bid Form.



Hovanec, Jessica L <jessica.l.hovanec@wv.gov>

RE: CMA PTR21*3

1 message

David Hughes <david.hughes@wvsao.gov>
To: "Hovanec, Jessica L" <jessica.l.hovanec@wv.gov>

Wed, Oct 13, 2021 at 3:03 PM

Hi Jessica,

Thank you very much for your help on this one.

Thank you,

David C. Hughes

Contract Audit Supervisor

West Virginia State Auditor's Office

Phone: 304-558-2261 Ext. 2206

John B. McCuskey

West Virginia State Auditor

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From: Hovanec, Jessica L <jessica.l.hovanec@wv.gov>
Sent: Wednesday, October 13, 2021 2:57 PM
To: David Hughes <david.hughes@wvsao.gov>
Subject: CMA PTR21*3

Hi David,

I just had the file pulled and confirmed the wrong contract end date. I will get an administrative change order started and will get that sent through. Thank you for catching that and letting me know.



Welcome, Jessica L Hovanec

Close

Vendor/Customer

✓ Vendor/Customer

General Info

Headquarters

Organization

Disbursement Options

Prenote/EFT

Remittance Advice

Vendor Terms

Accounts Receivable

eMALL

Location Information

Fee and Vendor
Compliance Holds

Executive Compensation

Additional Information

Travel

Change Management

Address

Business Type

Service Area

Commodity

W-8 Form

Authorized Dept.

Prevent Spending

Prevent Orders

Certification

Disclosures

Vendor User Information

Vendor Attachments

Vendor/Customer	Legal Name	Alias/DBA	Vendor Active Status	Customer Active Status	Previous Name
✓ 000000166722	WAGNER DANIEL WILLIAM	DANIEL W WAGNER	Active	Inactive	

From 1 to 1 of 1 First Prev Next Last [Attachments](#)Save [Undo](#) Delete Insert [Copy](#) Paste [Search](#)

▼ General Info

Vendor/Customer : 000000166722	Restrict Use by Department : <input type="checkbox"/>
Legal Name : WAGNER DANIEL WILL	Miscellaneous Account : <input type="checkbox"/>
Alias/DBA : DANIEL W WAGNER	Internal Account : <input type="checkbox"/>
Vendor Active Status : Active <input type="button" value="v"/>	Third Party Only : <input type="checkbox"/>
Vendor Approval Status : Complete	Third Party Vendor : <input type="checkbox"/>
Customer Active Status : Inactive <input type="button" value="v"/>	Third Party Customer : <input type="checkbox"/>
Customer Approval Status : Incomplete	Inventory Customer : <input type="checkbox"/>
Location Name :	Healthcare Provider : <input type="checkbox"/>
First Name :	Never Archive : <input type="checkbox"/>
Middle Name :	Restrict VSS Access : No <input type="button" value="v"/>
Last Name :	Discontinue - No New Business : <input type="checkbox"/>
Company Name : WAGNER DANIEL WILL	Prevent MA Reference : <input type="checkbox"/>
Previous Name :	PunchOut Enabled : <input type="checkbox"/>
Previous Street :	Re-PunchOut Enabled : <input type="checkbox"/>
Previous City :	Electronic Order Enabled : <input type="checkbox"/>
Previous State/Province :	W-9 Received : <input type="checkbox"/>
Previous Country :	W-9 Received Date :
	W-8 Received : <input type="checkbox"/>
	W-8 Received Date :
	Accepts Credit Cards : <input type="checkbox"/>
	Active From : 01/01/1999
	Active To :
	Last Usage Date : 10/13/2021
	Department :
	Unit :

▼ Headquarters

Headquarters Account : Yes	Web Address http:// :
Headquarters Account Code : 000000166722	Catalog DUNS :
Headquarters Account Legal Name : WAGNER DANIEL WILL	Catalog Extended DUNS :
Franchise Account : <input type="checkbox"/>	Taxpayer ID Number : 271897472
	Taxpayer ID Number Type : EIN <input type="button" value="v"/>

▼ Organization

Organization Type : Company <input type="button" value="v"/>	1099 Indicator : Yes
1099 Classification : Sole Proprietor <input type="button" value="v"/>	1042-S Indicator :
1042-S Ch. 3 Recipient Code :	Taxpayer ID Number : 271897472
1042-S Ch. 4 Status Code :	Taxpayer ID Number Type : EIN <input type="button" value="v"/>
Number of Employees : <input type="button" value="v"/>	Detailed TIN Type :
Merchant ID :	Foreign Tax ID :
	CUM :