



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

State of West Virginia
Delivery Order

Order Date: 06-14-2022

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:	CDO 0511 2632 HHR2200000006 1	Procurement Folder:	1061202
Document Name:	Prospective delivery order for FIS Services	Reason for Modification:	
Document Description:	Prospective delivery order for FIS Services		
Procurement Type:	Central Delivery Order		
Buyer Name:	Crystal G Hustead		
Telephone:	(304) 558-2402		
Email:	crystal.g.hustead@wv.gov		
Shipping Method:	Best Way	Master Agreement Number:	CMA 0511 HHR1700000001 1
Free on Board:	FOB Dest, Freight Prepaid		

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: VC0000051921 FIDELITY INFORMATION SERVICES LLC 601 RIVERSIDE AVE JACKSONVILLE FL 32204 US Vendor Contact Phone: 866-275-6868 Extension: Discount Details: <table border="1"> <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: Jacquelyn P Hoppe Requestor Phone: (304) 558-0458 Requestor Email: jacquelyn.p.hoppe@wv.gov <div style="text-align: center; font-size: 2em; font-weight: bold;">22</div> FILE LOCATION _____
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES ADMINISTRATION AND FINANCE ONE DAVIS SQUARE, RM 300 CHARLESTON WV 25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES ADMINISTRATION AND FINANCE ONE DAVIS SQUARE, RM 300 CHARLESTON WV 25301 US

Purchasing Division's File Copy

Total Order Amount:	\$869,000.00
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ENTERED

CH 6/16/22
 PURCHASING DIVISION AUTHORIZATION
 DATE: *Linda Harper 6/16/22*
 ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION
 DATE: *Beverly Toler 6-16-22*
 ELECTRONIC SIGNATURE ON FILE

Extended Description:

The amounts included in this delivery order are estimates. Payment will only be made for actual commodities and/or services received.

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
1	93150000	0.00000		\$0.0000	\$800,000.00
Service From	Service To	Manufacturer		Model No	Delivery Date
2022-07-01	2022-09-30				

Commodity Line Description: Electronic Benefits Transfer (EBT) System SNAP /TANF/Cash

Extended Description:

Contract Year 6 (1st One Year Renewal)
Pricing Schedule A

The amounts included in this delivery order are estimates. Payment will only be made for actual commodities and/or services received.

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
2	93150000	0.00000		\$0.0000	\$1,800.00
Service From	Service To	Manufacturer		Model No	Delivery Date
2022-07-01	2022-09-30				

Commodity Line Description: Electronic Benefits Transfer (EBT) System Equipment/Developm

Extended Description:

Contract Year 6 (1st One Year Renewal)
Pricing Schedule G

The amounts included in this delivery order are estimates. Payment will only be made for actual commodities and/or services received.

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
3	93150000	0.00000		\$0.0000	\$67,200.00
Service From	Service To	Manufacturer		Model No	Delivery Date
2022-07-01	2022-09-30				

Commodity Line Description: Electronic Benefits Transfer (EBT) System WIC

Extended Description:

Contract Year 6 (1st One Year Renewal)
Pricing Schedule F

The amounts included in this delivery order are estimates. Payment will only be made for actual commodities and/or services received.

Schedule A: Proposal Response Sheet EBT Cost Worksheet – 1st One Year Renewal

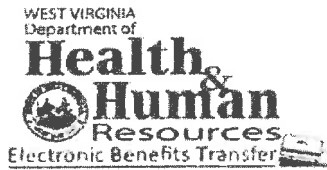
Column 1	Column 2	Column 3	Column 4	Column 5
Service Cost for 1 st One Year Renewal	Average Caseload/Units per Month	CPCM	Col 2 x 3 = Total Cost per Month	Col 4 x 12 = Total Yearly Cost
Caseload / CPCM				
SNAP Only cases	204,402	\$.66	\$ 134,905	\$ 1,618,864
TANF / Cash Only cases	2,133	\$.73	\$ 1,557	\$ 18,685
Combined SNAP / TANF cases	7,019	\$.86	\$ 6,036	\$ 72,436
All Other Cash except Child Care	13,909	\$.73	\$ 10,154	\$ 121,843
Transaction Fee	Average Units Per Month	Cost per Transaction	Total Cost per Month	Col 4 x 12 = Total Yearly Cost
Cash Only Withdrawals ATM / POS	10,118	\$.38	\$ 3,845	\$ 46,138
Denials-ATM	2,185	\$.00	\$ 0	\$ 0
Denials-POS	3,342	\$.00	\$ 0	\$ 0
Bal. Inquiry-ATM	3,981	\$.00	\$ 0	\$ 0
Bal. Inquiry-POS	81	\$.00	\$ 0	\$ 0
Total EBT Cost-1st One Year Renewal				\$ 1,877,966
(Enter Total on Line 6 of the Summary of Proposal Response Sheet)				

WIC Proposal Response Sheet Schedule G: State-Deployed WIC Only Terminals

Column 1	Column 2	Column 3	Column 4	Column 5
Service Cost for	Estimated Terminals per month	Cost per Terminal	Col 2 x 3 = Total Cost per Month	Col 4 x 12 = Total Yearly Cost
Year 1	95	\$ 20	\$ 1,900	\$ 22,800
Year 2	95	\$ 20	\$ 1,900	\$ 22,800
Year 3	95	\$ 20	\$ 1,900	\$ 22,800
Year 4	95	\$ 20	\$ 1,900	\$ 22,800
Year 5	95	\$ 20	\$ 1,900	\$ 22,800
1 st One Year Renewal	95	\$ 20	\$ 1,900	\$ 22,800
2 nd One Year Renewal	95	\$ 20	\$ 1,900	\$ 22,800
Total WIC Cost (Enter Total on Lines 22 through 29 Summary of Proposal Response Sheet)				\$ 159,600

WIC Proposal Response Sheet Schedule F: Cost Per Case Month (CPCM) Pricing

Column 1	Column 2	Column 3	Column 4	Column 5
Service Cost for	Estimated Cases per month	CPCM	Col 2 x 3 = Total Cost per Month	Col 4 x 12 = Total Yearly Cost
Year 1	27,150	\$.97	\$ 26,336	\$ 316,026
Year 2	27,150	\$.97	\$ 26,336	\$ 316,026
Year 3	27,150	\$.97	\$ 26,336	\$ 316,026
Year 4	27,150	\$.97	\$ 26,336	\$ 316,026
Year 5	27,150	\$.97	\$ 26,336	\$ 316,026
1 st One Year Renewal	27,150	\$.97	\$ 26,336	\$ 316,026
2 nd One Year Renewal	27,150	\$.97	\$ 26,336	\$ 316,026
Total WIC Cost (Enter Total on Lines 14 through 21 Summary of Proposal Response Sheet)				\$ 2,212,182



Office of EBT Banking Services

SNAP/EBT Monthly Fee Estimates

CDO Q1FY2023

PO Master #HHR1700000001

FIS - SNAP/EBT Services Historical Costs				
Service Month	Date Invoiced	Reference Commodity Code Line 1	InvoiceAmount	Estimated Monthly PeBT Charges
April-22	02/23/2022, plus est. for PEBT *	\$ 418,203.61	\$ 418,203.61	\$ 300,000.00
May-22	Est. based on Nov 21 SNAP, Est. PEBT*	\$ 182,675.90	\$ 182,675.90	\$ 65,000.00
June-22	Est. on Dec 21 SNAP, Est. PEBT*	\$ 185,097.22	\$ 185,097.22	\$ 65,000.00
Historical Cost for Comparison		\$ 785,976.73	\$ 785,976.73	\$ 430,000.00
1 month paid/estimates for 2 months		\$ 785,976.73	\$ 785,976.73	
Average		\$ 261,992.24	\$ 261,992.24	

FIS - SNAP/EBT Services Basis for CDO			
To Pay in Q1 FY 2023			
Monthly estimate	\$	261,992.24	\$ 261,992.24
April 2022 - June 2022		3 months	
Estimated Total to Be Paid in Q1FY2023		\$	785,976.73
Request for SNAP/EBT CDO Q1 FY 2023		\$	800,000.00

Account coding:	0511-5362-2023-2632-0900-3206-4169	SNAP	\$	370,000.00
	0511-5362-2023-3989-0900-3206-4169	PEBT	\$	430,000.00

* Estimates for SNAP and TANF charges based on historical invoices for the months referenced, with additional projected PEBT costs

03.17.2022 Rmb



Office of EBT Banking Services

WIC Monthly Fee Estimates
for CDO

Q1 Fiscal Year 2023

PO Master #HHR1700000001

FIS - WIC Services Historical Costs				
Service Month	Date Invoiced	Reference Commodity Code Line 5	Reference Commodity Code Line 6	Invoice Amount
April-22	5/23/2022	\$ 540.00	\$ 21,915.21	\$ 22,455.21
May-22	Estimate based on November 2021	\$ 600.00	\$ 23,000.00	\$ 23,600.00
June-22	Estimate based on December 2021	\$ 600.00	\$ 23,000.00	\$ 23,600.00
Historical Cost for Comparison		\$ 1,740.00	\$ 67,915.21	\$ 69,655.21
1 month invoiced/ 2 months estimate		\$ 1,740.00	\$ 67,915.21	\$ 69,655.21
Average		\$ 580.00	\$ 22,638.40	\$ 23,218.40

FIS - WIC Services Basis for CDO				
To Pay in Q1FY 2023				
Monthly estimate		\$ 600.00	\$ 22,183.90	\$ 22,783.90
April -June 2022			3 months	

Estimated Total to Be Paid in Q1FY2023	\$ 68,351.70
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Request for WIC CDO Q1 FY 2023	\$69,000.00
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Account coding:

Fund	8802
Sub Fund:	0
Object:	3206
Sub Object:	4169
Revenue:	n/a
Dept:	0506
Unit:	2640
Appr Unit:	13000
Major Program:	CVWICA
Program Name:	CVWICAFCE
Program Period:	FY2022