

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: 01-17-2023

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 0506 2818 HHR2000000009 5	Procurement Folder:	680592
Document Name:	Change Order No. 3	Reason for Modification:	
Document Description:	Accounting Technician II Temporary Staffing	Change Order #3 to Renew.	
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2020-02-10
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2024-02-09

		r ou boot, r reight r repa	ald		Effective End Date:	2024-02-09
		VENDOR	es ille mile el Ele		DEPARTMENT CONTACT	
Vendo	or Customer Code:	VC0000001620		Requestor Name:	Tara L Buckner	
THE H	IACKETT PRAXIS LLO			Requestor Phone:	(304) 558-9138	
PO BO	OX 7753			Requestor Email:	tara.l.buckner@wv.gov	
CHAR	LESTON	WV	25356			
US						
Vendo	or Contact Phone:	(304) 945-3072 Extensi	ion:		77	
					20	
Disco	ount Details:				FILE LOCATION	
_	D: 4.411 .			-		
	Discount Allowed	Discount Percentage	Discount Days			
#1	No No	0.0000	Discount Days	_		
				_		
#1 #2 #3	No			_		

INVOICE TO			SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURC		
FINANCE		ADMINISTRATION AND FINANCE	<u> </u>	
ONE DAVIS SQUARE, STE 300		ONE DAVIS SQUARE, RM 300		
CHARLESTON	WV 25301	CHARLESTON	WV 25301	
JS		us		

Purchasing Division's File Copy

Total Order Amount: Open End

ENTE

PURCHASING DIVISION AUTHORIZATION

DATE: ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM

DATE:

ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION

DATE:

ELECTRONIC SIGNATURE ON FILE

Date Printed: Jan 18, 2023 Order Number: CMA 0506 2818 HHR2000000009 5

Page: 1

FORM ID: WV-PRC-CMA-002 2020/01

Extended Description:

Change Order Change Order No. 3 is issued to renew the original contract according to all terms, conditions, prices and specifications contained in the original contract including all authorized change orders.

Effective date of renewal 02/10/2023 through 02/09/2024.

Renewal Years Remaining: Zero

No other changes.

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2020-02-10 2024-02-	-09	0.00	

Change Order #3 - Accounting Technician II

Extended Description:

Change Order #3 - to renew the Accounting Technician II Temporary Staffing

Date Printed: Jan 18, 2023 Order Number: CMA 0506 2818 HHR2000000009 5

FORM ID: WV-PRC-CMA-002 2020/01

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DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Finance

Jeffrey H. Coben, MD Interim Cabinet Secretary One Davis Square, Suite 300 Charleston, WV 25301 Telephone: (304) 352-6634 Fax: (304) 558-1003

Tara L. Buckner Chief Financial Officer

MEMORANDUM

DATE:

January 17, 2023

TO:

Robert Price, CPPO, CPPB, WVDHHR Buyer Supervisor

WVDHHR - Office of Purchasing

FROM:

Tara L. Buckner, Chief Financial Officer

WV Department of Health and Human Resources

SUBJECT:

Renewal of Contract for Accounting Technician II Staff

We are requesting that Contract Number CMA 0506 2818 HHR20*09 be renewed because the need still exists for additional staff in order to maintain timely processing.

Attached is the result of the letter going to the The Hackett Praxis LLC for renewal. If you have any questions, please do not hesitate to contact me at (304) 558-9138.

TB/eaw

Attachment

Kimberly S. Jobe

ok to renew



STATE OF WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Finance

One Davis Square, Suite 300 Charleston, WV 25301 Telephone: (304) 352-6634 Fax: (304) 558-1003

Tara L. Buckner Chief Financial Officer

December 27, 2022

Jeffrey H. Coben, MD

Interim Cabinet Secretary

The Hackett Praxis, LLC P.O. Box 7753 Charleston, WV 25356

Dear Vendor:

DHHR Finance would like to renew Contract Number CMA 0506 2818 HHR20*09 for the period of February 10, 2023 through February 9, 2024 under the same pricing, terms and conditions as the original contract including any subsequent change orders or modifications. We will need an insurance certificate showing a minimum of \$1 million general liability insurance with the State listed as the certificate holder and an additional insured.

Please sign, date and print your name and title below in acceptance of the renewal. A Purchasing Affidavit is also attached. Please return the affidavit, notarized along with this letter to email Elizabeth.A.Webb@wv.gov.

Accepted: Marline Hackett	1/13/2823
Signature	Date
Marlene Hackett	111312623
Printed Name	Date

If you have any questions or need additional information, please contact Ms. Webb via email.

Sincerely,

Yalah Buckyer Tara L. Buckner, Chief Financial Officer

West Virginia Department of Health and Human Resources

Kimberly S. Jobe ok to renew

Attachment