



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: 02-05-2024

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

<b>Order Number:</b>	CDO 0803 0803 02140044 6	<b>Procurement Folder:</b>	10284
<b>Document Name:</b>	Janitorial Svcs for Huntington District 2	<b>Reason for Modification:</b>	Change Order No. 3 - is issued to reduce the balance per the attached documentation.
<b>Document Description:</b>	Janitorial Svcs for Huntington District 2		
<b>Procurement Type:</b>	Central Cancel & Re-Award		
<b>Buyer Name:</b>	Frank Whittaker		
<b>Telephone:</b>	(304) 558-2316		
<b>Email:</b>	frank.m.whittaker@wv.gov		
<b>Shipping Method:</b>	Best Way	<b>Master Agreement Number:</b>	CMA 0212 WVRFJAN12 6
<b>Free on Board:</b>	FOB Dest, Freight Prepaid		

VENDOR		DEPARTMENT CONTACT	
<b>Vendor Customer Code:</b>	000000204796	<b>Requestor Name:</b>	Angela J Moorman
WEST VIRGINIA ASSOCIATION OF REHABILITATION FACILITIES INC 400 PATTERSON LN		<b>Requestor Phone:</b>	(304) 558-9427
CHALRESTON WV 25311		<b>Requestor Email:</b>	angie.j.moorman@wv.gov
US			
<b>Vendor Contact Phone:</b>	304-205-7970	<b>Extension:</b>	
<b>Discount Details:</b>			
	<b>Discount Allowed</b>	<b>Discount Percentage</b>	<b>Discount Days</b>
#1	No	0.0000	0
#2	No		
#3	No		
#4	No		

**24**  
 FILE LOCATION \_\_\_\_\_

INVOICE TO	SHIP TO
DIVISION OF HIGHWAYS	DIVISION OF HIGHWAYS
DISTRICT TWO	WILKINSON SUBSTATION (LOGAN COUNTY)
801 MADISON AVE	127 SPRINGFIELD RD
HUNTINGTON WV 25704	WILKINSON WV 25653
US	US

**Total Order Amount:** \$94,774.02

Purchasing Division's File Copy

JE 2/14/24  
 PURCHASING DIVISION AUTHORIZATION  
 DATE: *[Signature]* 2/14/2024  
 ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION  
 DATE: *[Signature]* 2-15-24  
 ELECTRONIC SIGNATURE ON FILE

**Extended Description:**

Change Order No. 3 to reduce the balance on the delivery order from \$103,389.84 to \$94,774.02 per attached document since the last payment was made by PCard.

Original Contract Total: \$103,389.84

Change Order No. 1 Decrease: (\$ 8,615.82)

New Contract Total: \$94,774.02

JANITORIAL SVCS FOR HUNTINGTON DISTRICT 2 (7/1/13 - 12/31/13)

No other changes.

Line	Commodity Code	Quantity	Unit	Unit Price	Total Price
1	76110000	11.00000	LS	\$8,615.8200	\$94,774.02
Service From	Service To	Manufacturer	Model No	Delivery Date	
2013-07-01	2014-06-30			2014-07-31	

**Commodity Line Description:** JANITORIAL SERVICES-HUNTINGTON HEADQUARTER

**Extended Description:**



**WEST VIRGINIA DEPARTMENT OF TRANSPORTATION**  
**Division of Highways**

**Alanna J. Keller, P.E.,**  
**Deputy Secretary of Transportation**  
**Deputy Commissioner of Highways**

**Charleston, West Virginia 25305-0430 • (304) 558-3505**

**Jimmy Wriston, P. E.**  
**Secretary of Transportation**  
**Commissioner of Highways**

**January 10, 2024**

**West Virginia Association of Rehabilitation Facilities**  
**710 Central Avenue**  
**Charleston, WV 25302-1702**

**RE: Cancellation of Remaining Balance**  
**PO# 02140044**

**Dear Vendor:**

**The above referenced Purchase Order in the amount of \$103,389.84 was issued on 05/26/2015 We are requesting your approval to cancel the remaining balance of \$8,615.82 that still exists on Purchase Order 02140044.**


**Your signature on the line below will acknowledge that you concur with this action and there are no outstanding invoices against this purchase order.**

**Please return this letter back to my attention via email at [angle.j.moorman@wv.gov](mailto:angle.j.moorman@wv.gov), or fax it to 304/558-0047. Failure to receive a written exception to this cancellation by 01/18/2024, will also constitute your concurrence with our cancellation plan.**

**This cancellation does not impact current or future contracts which you may have with this Department. It pertains to this specific purchase order only.**

**If you have any questions or need additional information, please call me at 304.414.7104.**

**Sincerely,**

  
**Kristy James**  
**Procurement Officer**

*new contract total:*  
*\$194,774.02*

DocuSigned by:  
  
5B90B720DE89468...  
1/15/2024

10:53 AM  
12/12/23  
Accrual Basis

**WV Association of Rehabilitation Facilities Inc.**  
**Sales by Customer Detail**  
July 2013 through June 2014

Type	Date	Num	Memo	P. O. #	Open Balance	Amount
<b>DOH - MASTER</b>						
<b>DOHHUN</b>						
Invoice	07/31/2013	66052	Huntington - District Office	02140044		-8,615.82
Invoice	08/31/2013	66275	Huntington - District Office	02140044		-8,615.82
Invoice	09/30/2013	66587	Huntington - District Office	02140044		-8,615.82
Invoice	10/31/2013	66951	District Office	02140044		-8,615.82
Invoice	11/30/2013	67243	District Office	02140044		-8,615.82
Invoice	12/31/2013	67538	District Office	02140044		-8,615.82
Invoice	01/31/2014	67904	District Office	02140044		-8,615.82
Invoice	02/28/2014	68225	District Office	02140044		-8,615.82
Invoice	03/31/2014	68522	District Office	02140044		-8,615.82
Invoice	04/30/2014	68896	District Office	02140044		-8,615.82
Invoice	05/31/2014	69316	District Office	02140044		-8,615.82
Invoice	06/17/2014	69641	District Office	02140044		-8,615.82
					<b>P-card</b>	<b>57,558.82</b>
<b>Total DOHHUN</b>					<b>0.00</b>	<b>-103,389.84</b>
<b>Total DOH - MASTER</b>					<b>0.00</b>	<b>-103,389.84</b>
<b>TOTAL</b>					<b>0.00</b>	<b>-103,389.84</b>

**\*\*Less \$8,615.82 P-card Paid = \$94,774.02**





Lyle, Tara L <tara.l.lyle@wv.gov>

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**Re: CDO DOH 02140044**

1 message

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Lyle, Tara L <tara.l.lyle@wv.gov>  
To: Kristy E James <kristy.e.james@wv.gov>

Fri, Dec 1, 2023 at 4:55 PM

I changed the language on the CDO. It has some errors.

I came up with -

Original Contract - \$103,389.84

CO3 Decrease: 8,615.82

New total: \$94,774.02

THanks,  
Tara

On Fri, Dec 1, 2023 at 4:42 PM Lyle, Tara L <tara.l.lyle@wv.gov> wrote:

Kristy,

Going to have to reject all on this balance cancellation CDO.

I'll add the language to the extended description field but we're going to need something from the vendor stating all invoices have been paid.

Here's a sample from DHHR.

Thanks,  
Tara

Tara Lyle, Buyer Supervisor  
WV Purchasing Division  
2019 Washington Street, East  
Capitol Complex, Building 15  
Charleston, WV 25305  
304-558-2544

[www.wvpurchasing.gov](http://www.wvpurchasing.gov)

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## West Virginia Secretary of State — Online Data Services

### Business and Licensing

Online Data Services Help

### Business Organization Detail

*NOTICE: The West Virginia Secretary of State's Office makes every reasonable effort to ensure accuracy of information. However, we make no representation or warranty as to the correctness completeness of the information. If information is missing from this page, it is not in the The West Virginia Secretary of State's database.*

### THE WEST VIRGINIA ASSOCIATION OF REHABILITATION FACILITIES, INC.

Organization Information								
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C   Corporation	5/8/1973		5/8/1973	Domestic	Non-Profit			

Organization Information			
<b>Business Purpose</b>	5613 - Admin/Support Waste Mgt/Remediation Services - Administrative and Support Services - Employment Services (placement, executive search, temporary help, professional employer orgs)		<b>Capital Stock</b> 0.0000
<b>Charter County</b>	Kanawha	<b>Control Number</b>	0
<b>Charter State</b>	WV	<b>Excess Acres</b>	0
<b>At Will Term</b>		<b>Member Managed</b>	
<b>At Will Term Years</b>		<b>Par Value</b>	0.000000
<b>Authorized Shares</b>	0	<b>Young Entrepreneur</b>	Not Specified

<b>Addresses</b>	
<b>Type</b>	<b>Address</b>
<b>Local Office Address</b>	400 PATTERSON LANE CHARLESTON, WV, 25311
<b>Mailing Address</b>	PO BOX 6764 CHARLESTON, WV, 25362 USA
<b>Notice of Process Address</b>	NITA HOBBS 400 PATTERSON LANE CHARLESTON, WV, 25311
<b>Principal Office Address</b>	400 PATTERSON LANE CHARLESTON, WV, 25311 USA
<b>Type</b>	<b>Address</b>

<b>Officers</b>	
<b>Type</b>	<b>Name/Address</b>
<b>Director</b>	NITA HOBBS 563 BURROUGHS STREET MORGANTOWN, WV, 26505
<b>Incorporator</b>	GEORGE W. KESSINGER 1016 WILKIE DR CHARLESTON, WV, 25301 USA
<b>Incorporator</b>	TIMOTHY J. ATKINSON 180 B. ST KEYSER, WV, 26726 USA
<b>President</b>	JOHN EMPSON 22 CAPITOL STREET CHARLESTON, WV, 25301
<b>Type</b>	<b>Name/Address</b>

<b>DBA</b>			
<b>DBA Name</b>	<b>Description</b>	<b>Effective Date</b>	<b>Termination Date</b>
CROSSROADS INDUSTRIES	TRADENAME	8/28/1995	
WVARF	TRADENAME	9/30/2004	
<b>DBA Name</b>	<b>Description</b>	<b>Effective Date</b>	<b>Terminator</b>

<b>Date</b>	<b>Amendment</b>
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<b>3/21/2014</b>	AMENDMENT FILED: SEE IMAGE
<b>6/4/2010</b>	FILED AMENDING BY-LAWS
<b>5/26/2009</b>	AMEND FILED ADDING 501C3 LANGUAGE AND AMENDING BYLAWS
<b>11/18/1985</b>	AMEND; BY LAWS
<b>Date</b>	<b>Amendment</b>

<b>Annual Reports</b>	
<b>Filed For</b>	
2024	
2023	
2022	
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<b>Date filed</b>

For more information, please contact the Secretary of State's Office at 304-558-8000.

Monday, February 5, 2024 — 12:12 PM

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## Keyword Search

For more information on how to use our keyword search, visit our help guide

Simple Search

Search Editor

Any Words <sup>i</sup>

All Words <sup>i</sup>

Exact Phrase <sup>i</sup>

e.g. 123456789, Smith Corp

"THE WEST VIRGINIA ASSOCIATION OF REHABILITATION FACILITIES, INC." ×

Entity



Location



Status



Active

Inactive

Reset



## No matches found

Your search did not return any results for active records.

Would you like to include inactive records in your search results?

Search inactive

Go back

# COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>de JE</u> Date: <u>2/5/24</u>  Solicitation No. <u>CO#3 - cancel</u> <u>Balance</u>	Agency: DOT/DOH  Procurement Officer Submitting Requisition: Kristy James  Requisition No. DOH 02140044 - CO#3  PF No.: 10284
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This checklist **MUST** be completed by a state agency's designated procurement officer and submitted with the Purchase Requisition to the Purchasing Division. The purpose of the checklist is to verify that an agency procurement officer has obtained and included required documentation necessary for the Purchasing Division to process the requisition without future processing disruptions. At the agency's preference, the agency **MUST** either submit the checklist by attaching it to the requisition's Header **OR** by placing it in the requisition's Procurement Folder.

## FOR ALL SOLICITATION TYPES:

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
1	Specifications and Pricing Page included	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Use of correct specification template	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Use of correct requisition type [CRQS → CCT or CPO] or [CRQM → CMA]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Use of most current terms and conditions ( <a href="http://www.state.wv.us/admin/purchase/TCP.pdf">www.state.wv.us/admin/purchase/TCP.pdf</a> )	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Maximum budgeted amount in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Suggested vendors in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Capitol Building Commission pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Financing (Governor's Office) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Fleet Management Division pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
<b>10</b>	Insurance requirements				
	Commercial General Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Automobile Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Workers' Compensation/Employer's Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Cyber Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Builder's Risk/Installation Floater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>11</b>	Office of Technology CIO pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>12</b>	Treasurer's Office (banking) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**FOR CHANGE ORDERS/RENEWALS:**

<b>1</b>	Two-party agreement	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>2</b>	Standard change order language	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>3</b>	Office of Technology CIO approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>4</b>	Justification for price increases/backdating/other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>5</b>	Bond Rider (Construction)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>6</b>	Secretary of State Verification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>7</b>	State debarment verification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<b>8</b>	Federal debarment verification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*\*The items pre-checked are required before a Purchase Requisition may be submitted to the Purchasing Division. Failure to complete and verify this documentation may result in rejection of the requisition back to the agency. It is up to the agency procurement officer to determine if pre-approvals, insurance, or other documentation is needed for the purchase. The referenced information below may be used to make this determination.*

*For Purchasing Division Use Only:*

I have reviewed the requisition identified above and find that it is sufficient to advertise publicly to the vendor community. My review does not preclude the possibility that the vendor community, or some other entity, will identify an area of concern; however, should such issues or concerns arise, they will be reviewed and addressed as may be appropriate.

Signature: \_\_\_\_\_

