

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: 12-11-2024

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 0613 9905 VNF23000001F 3	Procurement Folder:	1147654
Document Name:	Prequalified Vendors for Direct Care Staffing Servic	Reason for Modification:	
Document Description:	Prequalified Vendors for Direct Care Nurse Staffing Services	Change Order No. 02 To Renew Contract	
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2023-01-01
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2025-12-31

	VENDOR			DEPARTMENT CONTACT
Vendor Customer Code:	000000218628		Requestor Name:	Peggy L Alexander
MANAGEMENT REGISTRY	INC		Requestor Phone:	(304) 626-1600
1868 CAMPUS PL			Requestor Email:	peggy.l.alexander@wv.gov
LOUISVILLE	KY	40299		
US				
Vendor Contact Phone:	888-851-3588 Exter	nsion:		
Discount Details:				
Discount Allowed	Discount Percentage	Discount Days		2025
#1 No	0.0000	0		2025
#2 No			FI	LE LOCATION
#3 No				

	NVOICE TO		SHIP TO
DIVISION OF VETERANS AFFAIR	s	VETERAN'S NURSING FACILITY	
1 FREEDOMS WAY		1 FREEDOMS WAY	
CLARKSBURG	WV 26301	CLARKSBURG	WV 26301
US		us	

CR 12-18-24

Total Order Amount: Open End

PURCHASING DIVISION AUTHORIZATION

DATE: 12.17.24
ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM

DATE:
ELECTRONIC SIGNATURE ON FILE

**ENCUMBRANCE CERTIFICATION** 

DATE:

ELECTRONIC SIGNATURE ON FILE

Date Printed: Dec 11, 2024 Order Number: CMA 0613 9905 VNF23000001F 3

Page: 1 FC

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

## **Extended Description:**

Change Order

Change Order No. 02 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 1/1/2025 through 12/31/2025.

Renewal Years Remaining: 0

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	85101601				0.000000
	Service From	Service To		Service Con	ract Amount
	2023-01-01	2025-12-31		1000000.00	

**Commodity Line Description:** 

Registered Nurse (RN)

## **Extended Description:**

Registered Nurse (RN) to be billed using Delivery Order

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	85101601				0.000000
	Service From	Service To		Service Con	tract Amount
	2023-01-01	2025-12-31		1000000.00	

**Commodity Line Description:** 

Licensed Practical Nurse (LPN)

# **Extended Description:**

Licensed Practical Nurse (LPN) to be billed using Delivery Order

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	85101601				0.000000
	Service From	Service To		Service Con	tract Amount
	2023-01-01	2025-12-31		1000000.00	

Commodity Line Description:

Health Service Worker (HSW)

# **Extended Description:**

Health Service Worker (HSW) to be billed using Delivery Order

**Date Printed:** Dec 11, 2024 **Order Number:** CMA 0613 9905 VNF23000001F 3

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# West Virginia Veterans Nursing Facility One Freedoms Way Clarksburg WV 26301

December 3, 2024

Joshua Johnston Management Registry, Inc 11819 N. Miami St., Suite 202 Omaha, NE 68164

RE: Renewal CMA 0613 9905 VNF23\*01F

Dear Mr. Johnston,

Provisions were included in the original contract documents to renew the referenced contract under the same terms, conditions, and pricing. The renewal dates are 1/1/2025 to 12/31/2025. If your company agrees to this renewal, please sign below and return to my attention as soon as possible.

If you have any questions or concerns, feel free to contact me at (304) 626-1600.

Regards,	
Michael Clevenger	
Procurement Supervisor	
	riod stated above under the same terms, conditions, a d any subsequent Change Orders.
oricing as in the original Purchase Order an  K	d any subsequent Change Orders.
We agree to renew the contract for the pericing as in the original Purchase Order and School	d any subsequent Change Orders.  12/03/24

# COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

Purchasing Division Use:	Agency:
Buyer: B Date:12/11/24	WVVNF
Solicitation NoCMA VNF23*01F	Procurement Officer Submitting Requisition: Michael Clevenger
	Requisition No. CMA VNF23*01F
	PF No.: 1147654

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		<b>✓</b>		
2	Use of correct specification template	$\checkmark$	<b>7</b>		
3	Use of correct requisition type [CRQS → CCT or CPO] or [CRQM → CMA]		<b>V</b>		
4	Use of most current terms and conditions (www.state.wv.us/admin/purchase/TCP.pdf)	$\square$	V		
5	Maximum budgeted amount in wvOASIS		<b></b>		
6	Suggested vendors in wvOASIS		<b>✓</b>		
7	Capitol Building Commission pre-approval			<b>V</b>	
8	Financing (Governor's Office) pre-approval		Separation about Lamour states	To a control of the c	
9	Fleet Management Division pre-approval			V	- Service - Serv

Form No. WV-36 Rev. 10/26/2022

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
10	Insurance requirements		Management of the Control of the Con		
1	Commercial General Liability			<b>V</b>	
	Automobile Liability		All-Mary - C. shaddan ran ran san san san san san san san san san s	<b>V</b>	
444	Workers' Compensation/Employer's Liability			<b>V</b>	
	Cyber Liability				African and Holderstone measure court i sconosecentestatud grow
	Builder's Risk/Installation Floater			V	
	Professional Liability			<b>V</b>	2006 And LEE WILLIAM AND
	Other (specify)			V	- SOT - MORE AND A CONTROL AND
11	Office of Technology CIO pre-approval			<b>7</b>	
12	Treasurer's Office (banking) pre-approval			<b>/</b>	
FOR	CHANGE ORDERS/RENEWALS	S:			
1	Two-party agreement	$\checkmark$	<b>V</b>		<b>V</b>
2	Standard change order language	$\square$	✓		<b>✓</b>
3	Office of Technology CIO approval			<b>✓</b>	<b>✓</b>
4	Justification for price increases/backdating/other			The state of the s	<b>✓</b>
5	Bond Rider (Construction)			$\checkmark$	<b>✓</b>
6	Secretary of State Verification	$\square$	$\checkmark$		<b>V</b>
7	State debarment verification		$\checkmark$		<b>V</b>
8	Federal debarment verification			ALONDO COLOR	<b></b>
to com agency The ref	ems pre-checked are required before a Purchase plete and verify this documentation may result is procurement officer to determine if pre-approve erenced information below may be used to make the procure of the pre-approve with the processing Division Use Only:	n rejection of the als, insurance, or	requisition back to other documentar	to the agency. It is	up to the
I have My rev	reviewed the requisition identified above and five does not preclude the possibility that the vern; however, should such issues or concerns aris	endor community se, they will be re	y, or some other e viewed and addre	ntity, will identify a	an area of

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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 the accuracy of information. However, we make no representation or warranty as to the correctness or completeness of the information. If information is missing from this page, it is not in the The West Virginia Secretary of State's database.

## MANAGEMENT REGISTRY INC.

Organization Information								
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C   Corporation	8/8/2011		8/8/2011	Foreign	Profit			

Business Purpose	5613 - Admin/Support Waste Mgt/Remediation Services - Administrative and Support Services - Employment Services (placement, executive search, temporary help, professional employer orgs)	Capital Stock	
Charter County	Harrison	Control Number	99QHF
Charter State	KY	Excess Acres	
At Will Term		Member Managed	
At Will Term Years		Par Value	
Authorized Shares		Young Entrepreneur	Not Specified

Addresses		
Туре	Address	
Local Office Address	1868 CAMPUS PLACE LOUISVILLE, KY, 40299	
Mailing Address	1868 CAMPUS PLACE LOUISVILLE, KY, 40299 USA	
Notice of Process Address	CORPORATION SERVICE COMPANY 209 WEST WASHINGTON STREET CHARLESTON, WV, 25302	
Principal Office Address	1868 CAMPUS PLACE LOUISVILLE, KY, 40299 USA	
Туре	Address	

Officers		
Туре	Name/Address	
Director	TIM MALONE, PRESIDENT SALES & MKTG 546 PRIMROSE WAY LOUISVILLE, KY, 40206	
Director	TERRY MALONE 1868 CAMPUS PLACE LOUISVILLE, KY, 40299	
President	TIM MALONE 1868 CAMPUS PLACE LOUISVILLE, KY, 40299	
Vice-President	TERRY MALONE 2354 INGLESIDE DRIVE LOUISVILLE, KY, 40205	
Туре	Name/Address	

Mergers				
Merger Date	Merged	Merged State	Survived	Survived State
10/5/2011	FALLS CITY PLACEMENT SERVICE, INC.	KY	MANAGEMENT REGISTRY INC.	KY
Merger Date	Merged	Merged State	Survived	Survived State × Close ;

Date		Amendment	Hi, I'm SOLO! I can help	
10/5	5/2011	MERGER: MERGING FALLS CITY PLACEMENT SERVICE, INC., A QUALIFIED KY CORPORATION THE SURVIVOR	you file your Annual Report.	
Date		Amendment	пероп.	

Annual Reports Filed For 2024 2023 2022 2021 2020 2019 2018 2017x 2017 2016 2015 2014 2013 Date filed

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

Wednesday, December 11, 2024 — 8:03 AM

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Hi, I'm SOLO! I can help you file your Annual Report.

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