



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: 10-06-2025

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 2868 EHP2500000001 4	Procurement Folder:	1407305
Document Name:	TOBACCO CESSATION QUITLINE	Reason for Modification:	
Document Description:	TOBACCO CESSATION QUITLINE	Change Order No. 2 - to renew contract	
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2024-10-01
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2026-09-30

VENDOR		DEPARTMENT CONTACT	
Vendor Customer Code:	VS0000045046	Requestor Name:	Jodie F Miller
RVO HEALTH LLC		Requestor Phone:	(304) 356-4057
1101 RED VENTURES DRIVE		Requestor Email:	jodie.f.miller@wv.gov
FORT MILL	SC		
US	29707		
Vendor Contact Phone:	7579186633		
Extension:			
Discount Details:			
	Discount Allowed	Discount Percentage	Discount Days
#1	No	0.0000	0
#2	No		
#3	No		
#4	No		

2026
FILE LOCATION

INVOICE TO	SHIP TO
PURCHASING DIRECTOR 304-356-4116	PURCHASING DIRECTOR 304-356-4116
HEALTH AND HUMAN RESOURCES	HEALTH AND HUMAN RESOURCES
BPH - EPIDEMIOLOGY AND HEALTH PROMOTION	BPH - EPIDEMIOLOGY AND HEALTH PROMOTION
350 CAPITOL ST, RM 515	350 CAPITOL ST, RM 515
CHARLESTON WV 25301-3715	CHARLESTON WV 25301-3715
US	US

CR 10-7-25

Purchasing Division's File Copy

Total Order Amount:

Open End

PURCHASING DIVISION AUTHORIZATION

DATE: 10/14/25

ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM

DATE: 10/14/25

ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION

DATE: 10/14/25

ELECTRONIC SIGNATURE ON FILE

10/14/2025

Extended Description:

Change Order

Change Order No. 2 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 10/01/2025 through 09/30/2026

Renewal Remaining: 2 years

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	80000000				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2025-09-30		96000.00	

Commodity Line Description: Administrative Costs

Extended Description:

Administrative Costs - 1 Year

Yearly Fee: \$96,000.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Intake/Eligibility Verification

Extended Description:

Intake/Eligibility Verification - Per enrolled person

Unit Price: \$30.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Coaching Call #1

Extended Description:

Coaching Call #1 - Per Call

Unit Price: \$35.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
4	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Coaching Call #2

Extended Description:

Coaching Call #2 - Per Call

Unit Price: \$35.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
5	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Coaching Call #3

Extended Description:

Coaching Call #3 - Per Call

Unit Price: \$35.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
6	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Coaching Call #4

Extended Description:

Coaching Call #4 - Per Call

Unit Price: \$35.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
7	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Reactive Calls #1-4

Extended Description:

Reactive Calls #1-4 - Per Call

Unit Price: \$35.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
8	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Nicotine Gum 4mg

Extended Description:

CO_1 changed to effective date 10/01/2024

Nicotine Gum 4mg - Per Box

Unit Price: \$30.00

Nicotine Gum 4mg - Per Shipment

Unit Price: \$60.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
9	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Nicotine Gum 2mg

Extended Description:
CO_1 changed to effective date 10/01/2024

Nicotine Gum 2mg - Per Box

Unit Price: \$30.00

Nicotine Gum 2mg - Per Shipment

Unit Price: \$60.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
10	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Nicotine Patch 21mg

Extended Description:
Nicotine Patch 21mg - Per Shipment

Unit Price: \$52.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
11	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Nicotine Patch 14mg

Extended Description:
Nicotine Patch 14mg - Per Shipment

Unit Price: \$52.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
12	81111508				0.000000
Service From		Service To		Service Contract Amount	
2024-10-01		2026-09-30		0.00	

Commodity Line Description: Nicotine Patch 7mg

Extended Description:
Nicotine Patch 7mg - Per Shipment

Unit Price: \$52.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
13	81111508				0.000000
	Service From	Service To	Service Contract Amount		
	2024-10-01	2026-09-30	0.00		

Commodity Line Description: Nicotine Lozenge 4mg

Extended Description:

CO_1 changed to effective date 10/01/2024

Nicotine Lozenge 4mg - Per Box

Unit Price: \$32.50

Nicotine Lozenge 4mg - Per Shipment

Unit Price: \$65.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
14	81111508				0.000000
	Service From	Service To	Service Contract Amount		
	2024-10-01	2026-09-30	0.00		

Commodity Line Description: Nicotine Lozenge 2mg

Extended Description:

CO_1 changed to effective date 10/01/2024

Nicotine Lozenge 2mg - Per Box

Unit Price: \$32.50

Nicotine Lozenge 2mg - Per Shipment

Unit Price: \$65.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
15	80000000				0.000000
	Service From	Service To	Service Contract Amount		
	2025-10-01	2026-09-30	96000.00		

Commodity Line Description: Administrative Costs - year 2

Extended Description:

Administrative Costs - 2 Year

Yearly Fee: \$96,000.00



1101 Red Ventures Dr
Fort Mill, SC 29707
contact@rvohealth.com

September 8, 2025

WV DHHR Bureau for Public Health
350 Capital Street, Room 206
Charleston, WV 25301

To Whom It May Concern:

Consumer Wellness Solutions, LLC, a subsidiary of RVO Health, LLC ("Contractor"), requests renewal of the State of West Virginia Master Agreement, Order Number CMA- 0506-2868-EHP2500000001-1 with an effective date of October 1, 2024 (hereafter, the "Agreement"), pursuant to Section 3 of the Agreement.

Contractor requests that, in accordance the Agreement, the renewal effectuate an additional one (1) year term from October 1, 2025, to September 30, 2026 according to all terms, conditions, prices, and specifications contained in the Agreement and its exhibits and addendums, including any authorized amendments and/or change orders.

If you agree to renew the Agreement, we propose full execution, by the respective authorized representatives of the parties, of the Letter of Commitment that follows this Request for Renewal.

If you have any questions, please reach out to me at my contact information below.

Thank you,

Signed by:

7C73683A24504EA...

Jeffrey Cross
Executive Vice President, Prevention
Consumer Wellness Solutions, LLC, a subsidiary of RVO Health, LLC

**LETTER OF COMMITMENT TO CONTINUE UNDER THE TERMS OF
THE STATE OF WEST VIRGINIA MASTER AGREEMENT**

Between

**WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES, OFFICE OF COMMUNITY
HEALTH SYSTEMS AND HEALTH PROMOTION (OCHSHP)**

And

CONSUMER WELLNESS SOLUTIONS, LLC

This Letter of Commitment to Continue Under the Terms of the State of West Virginia Master Agreement between the State of West Virginia, OCHSHP and Consumer Wellness Solutions, LLC, a subsidiary of RVO Health, LLC ("Letter of Commitment") is entered into by the State of West Virginia, OCHSHP ("the State") and Consumer Wellness Solutions, LLC, a subsidiary of RVO Health, LLC ("Contractor"), for the purpose of renewing the arrangement between the parties through September 30, 2026.

WHEREAS the State and Contractor entered into the State of West Virginia Master Agreement, Order Number CMA-0506-2868-EHP2500000001-1 with an effective date of October 1, 2024 (the "Agreement");

WHEREAS pursuant to Section 3 of the Agreement, Contractor has requested to renew the Agreement for an additional one (1) year term from October 1, 2025, to September 30, 2026;

NOW THEREFORE, the parties agree as follows:

1. Contractor shall continue provide the services to the State at the rates mutually agreed upon for a period of one (1) year beginning October 1, 2025, and ending September 30, 2026. The parties shall retain the right to further renew the Agreement as set forth in Section 3 of the Agreement.
2. All terms and conditions of the original Agreement, as amended, shall remain the same; provided however that where the Agreement, as amended, contradicts the terms and conditions of this Letter of Commitment, this Letter of Commitment shall prevail.

Further the parties sayeth naught.

[signature page follows]

IN WITNESS WHEREOF, the parties have set their hands to this Letter of Commitment on the dates indicated below.

CONSUMER WELLNESS SOLUTIONS, LLC

Signed by:
Signature: Jeff Cross
Name: Jeff Cross
Title: EVP Prevention
Date: 9/9/2025

WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES, OFFICE OF COMMUNITY HEALTH SYSTEMS AND HEALTH PROMOTION

Signature: Heather White
Name: Heather White
Title: Procurement Specialist, Senior
Date: 10/1/2025



STATE OF WEST VIRGINIA
DEPARTMENT OF HEALTH
BUREAU FOR PUBLIC HEALTH

Arvin Singh, EdD, MBA, MPH, MS, FACHE
Health Secretary

MEMORANDUM

TO: DHHR Purchasing
THROUGH: Scott Eubank, Director OCHS&HP
FROM: Michele Bowles, Tobacco Cessation Coordinator,
Division of Tobacco Prevention/Division of Health Promotion and Chronic Disease
DATE: July 21, 2025
RE: Contract Renewal for WV Tobacco Quitline # CMA EHP2500000001

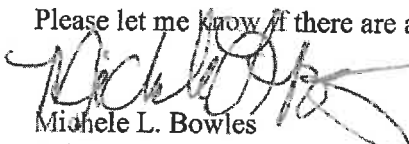
The Office of Community Health Systems & Health Promotions agrees to renew contract CMA EHP2500000001 with RVO Health Inc effective October 01, 2025 through September 30, 2026 according to the terms, conditions, and pricing contained in the original contract, including all change orders.

Quitlines are effective, evidence-based tobacco cessation interventions that help tobacco users quit through a variety of service offerings, including interactive counseling by certified professionals, services tailored according to each individual's circumstances, referrals to other cessation resources, and options for nicotine replacement therapy, as needed. Additionally, Quitlines can increase the potential to successfully quit using tobacco products by approximately 60% (Fiore MC, Jaén CR, Baker TB, et al).

Mission Critical:

- According to the WV DHHR Strategic Plan- Goal One is to "Improve Population Health and Strengthen the Health Care System" - the first Objective of this goal is to "reduce the prevalence of tobacco use".
- According to CDC "telephone-based tobacco cessation services, commonly known as Quitlines, have shown the potential to make help available for those who seek it, and by actively promoting cessation in the general population". This can lead to an increase in the percentage of tobacco users making quit attempts or in the success rate for those attempts can lead to a higher overall cessation rate.

Please let me know if there are any questions. Thank you and I look forward to a favorable response.


Michele L. Bowles
Tobacco Cessation Coordinator

Division of Tobacco Prevention/Division of Health Promotion and Chronic Disease



Hustead, Crystal G <crystal.g.hustead@wv.gov>

Re: CMA EP25*01 CO2

1 message

White, Heather M <heather.m.white@wv.gov>

Mon, Oct 6, 2025 at 9:10 AM

To: "Hustead, Crystal G" <crystal.g.hustead@wv.gov>

Cc: Bryan D Rosen <bryan.d.rosen@wv.gov>, Robert L Price <robert.l.price@wv.gov>, Althea M Greenhowe <althea.m.greenhowe@wv.gov>, Kimberlie K Debolt <kimberlie.k.debolt@wv.gov>

CL1 has the correct dates. The admin costs for this year are on CL15.

On Mon, Oct 6, 2025 at 8:22 AM Hustead, Crystal G <crystal.g.hustead@wv.gov> wrote:
Following up on this one

Crystal Hustead, CPPB

Senior Buyer

Purchasing Division

304-558-2402 | Crystal.G.Hustead@wv.gov

2019 Washington St. E., Charleston, WV 25305



On Wed, Oct 1, 2025 at 10:23 AM White, Heather M <heather.m.white@wv.gov> wrote:
I'm double checking whether or not it's a one-time payment

On Wed, Oct 1, 2025 at 10:18 AM Hustead, Crystal G <crystal.g.hustead@wv.gov> wrote:
Should CL 1 have the 9/30/26 expiration date? All of the others have been changed, but CL1 still has 9/30/25.

Extended Description:

Change Order
Change Order No 2 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.
Renewal Years Remaining: 2 years
No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	50002000				0.000000
Service From		Service To	Service Contract Amount		
2024-10-01		2025-09-30	90000.00		

Commodity Line Description: Administrative Costs

Extended Description:

Administrative Costs - 1 Year

Yearly Fee: \$36,000.00

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	A1111508				0.000000
Service From		Service To	Service Contract Amount		
2024-10-01		2026-09-30	0.00		

Commodity Line Description: Intake/Eligibility Verification

Extended Description:

Intake/Eligibility Verification - Per enrolled person

Unit Price: \$30.00

Crystal Hustead, CPPB

Senior Buyer

Purchasing Division

304-558-2402 | Crystal.G.Hustead@wv.gov

2019 Washington St. E., Charleston, WV 25305



Filter By

Keyword Search

For more information on how to use our keyword search, visit our [help guide](#)

Simple Search

Search Editor

- ☐ Any Words ⁱ
- ☐ All Words ⁱ
- ☐ Exact Phrase ⁱ

e.g. 123456789, Smith Corp

"CONSUMER WELLNESS SOLUTIONS LLC" ×

"RVO HEALTH LLC" ×

Classification

Excluded Individual

Excluded Entity


Federal Organizations

Exclusion Type

Exclusion Program

Location

Dates

Reset 

Entity Information ^



All Entity Information

Entities

Disaster Response Registry

Responsibility / Q



No matches found

We couldn't find a match for your search criteria.

Please try another search or go back to previous results.

Go Back

You are viewing this page over a secure connection. [Click here for more information.](#)

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.

CONSUMER WELLNESS SOLUTIONS, LLC

Organization Information

Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
LLC Limited Liability Company	10/18/2013		10/18/2013	Foreign	Profit			

Organization Information

Business Purpose	6219 - Health Care and Social Assistance - Ambulatory Health Care Services - Other Ambulatory Health Care Services (ambulance services, blood & organ banks)			Capital Stock			
Charter County				Control Number	9A2QL		
Charter State	DE			Excess Acres			
At Will Term	A			Member Managed	MBR		<div>×</div> Close
At Will Term Years				Pa	Hi, I'm SOLO! I can help you file your Annual Report.		
Authorized Shares				Y	Report.		
				Entr			

Addresses

Type	Address
Designated Office Address	5098 WEST WASHINGTON STREET CHARLESTON, WV, 25313
Mailing Address	1101 RED VENTURES DR FORT MILL, SC, 29707 USA
Notice of Process Address	C T CORPORATION SYSTEM 5098 WASHINGTON ST W STE 407 CHARLESTON, WV, 253131561
Principal Office Address	1101 RED VENTURES DR FORT MILL, SC, 29707 USA
Type	Address

Officers

Type	Name/Address
Member	RVO HEALTH LLC 1101 RED VENTURES DR FORT MILL, SC, 29707
Type	Name/Address

Name Changes

Date	Old Name
3/30/2023	CONSUMER WELLNESS SOLUTIONS, INC.
12/29/2017	ALERE WELLBEING, INC.
Date	Old Name

Date	Amendment
3/30/2023	NAME CHANGE: FROM CC
12/29/2017	NAME CHANGE: FROM AL
Date	Amendment

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

Annual Reports

Filed For

2025

2024

2023

2022

2021

2020

2019

2018

2017x

2017

2016

2015

Date filed

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

Tuesday, September 30, 2025 — 12:17 PM

© 2025 State of West Virginia

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

COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>Capital Husband</u> Date: <u>10/1/25</u> Solicitation No. <u>CMA EHP25 #01</u>	Agency: Office of Community Health Systems & Health Promotion Procurement Officer Submitting Requisition: Jodie Miller Requisition No. CMA EHP2500000001 CO2 PF No.: 1407305
--	---

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 (www.state.wv.us/admin/purchase/TCP.pdf)	<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
10	Insurance requirements				
	<i>Commercial General Liability</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Automobile Liability</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Workers' Compensation/Employer's Liability</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Cyber Liability</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Builder's Risk/Installation Floater</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Professional Liability</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<i>Other (specify)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Office of Technology CIO pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Treasurer's Office (banking) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

FOR CHANGE ORDERS/RENEWALS:

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

Crystal Hustead