



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: 06-23-2026

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 VNF2500000001 3	Procurement Folder:	1430492
Document Name:	Registered Dietician Consulting Services	Reason for Modification:	Change order No. 02 To renew the contract
Document Description:	Registered Dietician and Consultant for WVNF		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2024-07-15
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2027-07-14

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: 000000109245 JAYKAY INC PO BOX 577 TAVARES FL 32778 US Vendor Contact Phone: 352-504-4058 Extension: Discount Details: <table><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: Michael A Clevenger Requestor Phone: 304-626-1600 Requestor Email: michael.a.clevenger@wv.gov 2026 FILE LOCATION _____
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
DIVISION OF VETERANS AFFAIRS 1 FREEDOMS WAY CLARKSBURG WV 26301 US	VETERAN'S NURSING FACILITY 1 FREEDOMS WAY CLARKSBURG WV 26301 US

CR 6-24-26
Purchasing Division's File Copy

Total Order Amount:

Open End

PURCHASING DIVISION AUTHORIZATION

DATE: 6/24/26
ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM

DATE: 6/26/2026
ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION

DATE: 6-26-26
ELECTRONIC SIGNATURE ON FILE

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 7/15/2026 through 7/14/2027.

Renewal Years Remaining: 1

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	85151605				0.000000
Service From		Service To	Service Contract Amount		
2024-07-15		2027-07-14	0.00		

Commodity Line Description: Registered Dietician Consulting Services

Extended Description:

See Attached Exhibit "A" Pricing Page To Input Pricing.

Registered Dietician and Consulting Services for the WVVNF



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

June 22, 2026

Nancy Malika
JayKay Inc.
Po Box 577
Tavares, FL 32778

RE: Renewal CMA 0613 9905 VNF25*01

Dear Ms. Malika,

Provisions were included in the original contract documents to renew the referenced contract under the same terms, conditions, and pricing. The renewal dates are 7/15/2026 to 7/14/2027. 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

We agree to renew the contract for the period stated above under the same terms, conditions, and pricing as in the original Purchase Order and any subsequent Change Orders.

X 
SIGNATURE

06/23/2026
DATE

Purity Ndolo, President
PRINT NAME

**Subcontracting Plan Reporting system issues resolved**[Show Details](#)

Jun 10, 2026

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Aug 15, 2025

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e.g. 1606N020Q02

"JayKay Inc" **Federal Organizations**

Enter Code or Name



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Business Organization Detail

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JAYKAY, INC.

Organization Information

Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C Corporation	2/3/2012		2/3/2012	Foreign	Profit			

Organization Information

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	Berkeley		Control Number	99T3Y	
Charter State	CA		Excess Acres		
At Will Term			Member Managed		
At Will Term Years			Par Value		
Authorized Shares	0		Young Entrepreneur	Not Specified	

Addresses

Type	Address
Designated Office Address	5400-D BIG TYLER ROAD CHARLESTON, WV, 25313
Notice of Process Address	CORPORATE CREATIONS NETWORK INC. 126 EAST BURKE STREET MARTINSBURG, WV, 25401
Principal Office Address	PO BOX 577 TAVARES, FL, 32778 USA
Principal Office Mailing Address	2054 CLASSIQUE LANE TAVARES, FL, 32778 USA
Type	Address

Officers

Type	Name/Address
Director	PURITY NDOLO PO BOX 577 TAVARES, FL, 32778
President	PURITY NDOLO PO BXO 577 TAVARES, FL, 32778
Type	Name/Address

DBA

DBA Name	Description	Effective Date	Termination Date
JAYKAY STAFFING	TRADENAME	2/8/2012	
DBA Name	Description	Effective Date	Termination Date

Annual Reports

Filed For
2026
2025
2024
2023

2022
2021
2020
2019
2018
2017x
2017
2016
2015
2014
Date filed

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

Monday, June 22, 2026 — 2:16 PM

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COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u> #13 </u> Date: <u> 6/23/2024 </u> Solicitation No. <u> CRQS - VNF 24*14 </u>	Agency: WVNF Procurement Officer Submitting Requisition: Michael Clevenger Requisition No. CMA VNF25*01 PF No.: 1430492
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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: Provided, if
Required Required

				Not Required	Purch. Div. Confirmation
1	Specifications and Pricing Page included	☒	☐	☐	☐
2	Use of correct specification template	☒	☐	☐	☐
3	Use of correct requisition type [CRQS → CCT or CPO] or [CRQM → CMA]	☒	☐	☐	☐
4	Use of most current terms and conditions (www.state.wv.us/admin/purchase/TCP.pdf)	☒	☐	☐	☐
5	Maximum budgeted amount in wvOASIS	☒	☐	☐	☐
6	Suggested vendors in wvOASIS	☒	☐	☐	☐
7	Capitol Building Commission pre-approval	☐	☐	☐	☐
8	Financing (Governor's Office) pre-approval	☐	☐	☐	☐
9	Fleet Management Division pre-approval	☐	☐	☐	☐

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

FOR CHANGE ORDERS/RENEWALS:

1	Two-party agreement	☒	☒	☐	☒
2	Standard change order language	☒	☒	☐	☒
3	Office of Technology CIO approval	☐	☐	☒	☐
4	Justification for price increases/backdating/other	☐	☐	☒	☐
5	Bond Rider (Construction)	☐	☐	☒	☐
6	Secretary of State Verification	☒	☒	☐	☒
7	State debarment verification	☒	☒	☐	☒
8	Federal debarment verification	☒	☒	☐	☒

**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: _____