



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
HOP11005

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF:
ROBERTA WAGNER
304-558-0067

VENDOR



Advntage Health Care, LLC
 John Bell
 8108 Hunters Trail
 Roanoke, VA 24019

SHIP TO

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
05/24/2010				

BID OPENING DATE: 06/24/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
***** PLEASE NOTE THE DRUG FREE WORKPLACE AFFIDAVIT AND THE BID BOND ARE REQUIRED WITH SUBMISSION OF THE BID. *****						
0001	1	JB		936-73	Included	n/c
WARRANTY: THREE (3) YEAR PARTS WARRANTY SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411 TO PROVIDE ALL PRODUCTS, NEW WIRING, LABOR AND INSTALLATION MATERIAL TO INSTALL A RESIDENT WANDERING SYSTEM, AND ALTERNATE NURSES STATION MONITOR UNIT AT HOPEMONT HOSPITAL LOCATED AT 150 HOPEMONT DRIVE, TERRA ALTA, WV 26764, ACCORDING TO THE FOLLOWING SPECIFICATIONS: WARRANTY: THREE (3) YEAR PARTS WARRANTY ONE (2) YEAR LABOR WARRANTY * WARRANTY WILL EXCLUDE EXISTING MAGNETIC DOOR LOCKS.						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS			
SIGNATURE <i>John Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-10	
TITLE <i>President</i>	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE	

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

GENERAL TERMS & CONDITIONS
REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

1. Awards will be made in the best interest of the State of West Virginia.
2. The State may accept or reject in part, or in whole, any bid.
3. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
4. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods this Purchase Order/Contract becomes void and of no effect after June 30.
5. Payment may only be made after the delivery and acceptance of goods or services.
6. Interest may be paid for late payment in accordance with the *West Virginia Code*.
7. Vendor preference will be granted upon written request in accordance with the *West Virginia Code*.
8. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
9. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
10. The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern the purchasing process.
11. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
12. **BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
13. **HIPAA BUSINESS ASSOCIATE ADDENDUM:** The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement. Provided that the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
14. **CONFIDENTIALITY:** The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in <http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf>.
15. **LICENSING:** Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, and the West Virginia Insurance Commission. The vendor must provide all necessary releases to obtain information to enable the director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
16. **ANTITRUST:** In submitting a bid to any agency for the State of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the State of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, or person or entity submitting a bid for the same material, supplies, equipment or services and is in all respects fair and without collusion or fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

INSTRUCTIONS TO BIDDERS

1. Use the quotation forms provided by the Purchasing Division. Complete all sections of the quotation form.
2. Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
3. Unit prices shall prevail in case of discrepancy. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
4. All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130
5. Communication during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited (W.Va. C.S.R. §148-1-6.6).



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VENDOR

Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

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LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
0002	28	EA		936-73	\$2,095.00	\$58,660.00
				DOOR CONTROL UNITS - <i>Sigma Sentinel</i>		
				SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411		
<p>VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL MODEL OR EQUAL SELF CHECKING SYSTEM DOOR CONTROL UNIT. MONITORED RESIDENTS WILL ACTIVATE THE DOOR LOCKS AND WILL BE PREVENTED FROM LEAVING THROUGH LOCKED DOORS. THE SYSTEM WILL IDENTIFY THE RESIDENT BY NUMBER OR NAME AT THE EXIT AND NURSES'S MONITOR. THE UNIT WILL MONITOR TRANSMITTER BATTERY CONDITIONS. DOORS MAY BE CODED FOR EXITING FAMILY CODE AND WILL ALLOW FAMILY TO EXIT WITHOUT ALLOW MONITORED RESIDENTS TO FOLLOW. OUTSIDE KEYPAD AT FRONT DOOR WILL ALLOW STAFF TO ENTER WHEN DOOR IS LOCKED (WITH TIMER OPTIONS AT FRONT DOOR AND GRAPE HARBOR DOOR).</p>						
0003	1	EA		936-73	\$1,250.00	\$1,250.00
				TRANSMITTER TESTER <i>Sigma Sentinel</i>		

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>John J Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-10
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						
VENDOR WILL PROVIDE SIGMA SENTINEL MODEL OR EQUAL TRANSMITTER TESTER. TRANSMITTER TESTER/PROGRAMMER, HAND HELD DEVICE TO PROVIDE ACCESS TO WORKING STATUS ON EACH TRANSMITTER AND PROVIDES EASY WIRELESS DATA ENTRY. SYSTEM IS TO BE SELF CHECKING CAPABLE.						
0004	28	EA	936-73	RESIDENT TRANSMITTERS <i>Sigma Sentinel</i>	\$ 118.00	\$ 3,304.00
SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						
VENDOR WILL PROVIDE SIGMA SENTINEL OR EQUAL TRANSMITTER RESIDENT TRANSMITTERS, WATCH SIZE, CAN BE WORN ON WRIST OR ANKLE, WATER TIGHT, THREE (3) YEARS LIFE ON TRANSMITTERS. <i>PRO-RATED WARRANTY FOR YEAR 2 + 3</i>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>John Z Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-10
TITLE <i>President</i>	FEIN 54-189 7951	ADDRESS CHANGES TO BE NOTED ABOVE

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LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0005	50	EA		936-73	\$ 3.00	\$150.00
RESIDENT TRANSMITTER BANDS						
SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						
VENDOR WILL PROVIDE SIGMA SENTINEL OR EQUAL TRANSMITTER BAND. RESIDENT TRANSMITTER BANDS, REINFORCED ONE-WAY SNAP, HYPO-ALLERGENIC PLASTIC-NYLON/KEVLAR REINFORCED, 150 LB. PULL PRESSURE AT SNAP.						
0006	3	EA		936-73	\$ 835.00	\$ 2,505.00
MAGNETIC DOOR LOCKS						
SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						
<i>ROFU Mag Lock 15 Sec DE Sigma does not make Locks</i>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>J. R. Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-16
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
0007	1	EA		936-73 Connections 5	\$1,944.00	\$1,944.00
VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL OR EQUAL MAGNETIC DOOR LOCK WITH 15 SECOND DELAY. PARTS/LABOR WARRANTY TO COVER 3 NEW MAGNETIC DOOR LOCKS, EXISTING DOOR LOCKS NOT COVERED ON PARTS/LABOR WARRANTY.						
SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						
0008	50	EA		936-73 model 929H	\$149.00	\$7,450.00
VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL OR EQUAL CONNECTIONS OF FIVE (5) PAGING TRANSMITTER 4 SERIAL PORTS.						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>J. Bell</i>	TELEPHONE 310 366-4880	DATE 6-22-10
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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R

Advantage Healthcare, LLC
8108 Hunters Trail
Roanoke, VA 24019

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BID OPENING DATE: **06/24/2010** BID OPENING TIME **01:30PM**

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<p>SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411</p> <p>VENDOR WILL PROVIDE SIGMA SENTINEL OR EQUAL ALPHA-NUMERIC PAGERS WITH CAPACITY TO HOLD SIX (6) ADDRESSES (929H).</p>						
0009	1	EA	936-73		# 875.00	# 875.00
<p>NETWORK PC PAGING SOFTWARE, CLIENT & SERVER <i>Connerix V1.9.25</i></p> <p>SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411</p> <p>VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL OR EQUAL NETWORK PC PAGING SOFTWARE, CLIENT AND SERVER. THIS WILL ALLOW PAGING FROM ALL NETWORK COMPUTERS.</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE: *[Signature]* TELEPHONE: **304-366-4880** DATE: **6-29-10**
 TITLE: **President** FEIN: **54-1897951**
 ADDRESS CHANGES TO BE NOTED ABOVE

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LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0010	1	EA		936-73	\$8575.00	\$8,575.00
CPU 17" MONITOR, 2 HARD DRIVES, 2 SERIAL PORTS ETC. <i>Software, UPS + Printer</i> SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411 VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL OR EQUAL CPU 17" MONITOR, 2 HARD DRIVES, 2 SERIAL PORTS, PRINTER UPS, XP PRO AND SIGMA SENTINEL SOFTWARE OR EQUAL.						
0011	5	EA		936-73	\$550.00	\$2,750.00
NON-POWERED WIRELESS RECIEVER <i>Sigma Philips Reciever</i> <i>Sigma does not make Recievers</i> SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411 VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL OR EQUAL NON-POWERED WIRELESS RECEIVER. THIS WILL BE CONNECTED TO THE CENTRAL MONITORING SYSTEM FOR POWER.						

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SIGNATURE <i>John L Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-10
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LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0012	1	EA		936-73	\$ 35,605.00	\$ 35,605.00
TRAINING AND TOTAL SYSTEM PROGRAMMING <i>Including Install and Install materials</i> SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411 VENDOR WILL PROVIDE TRAINING AND TOTAL SYSTEM PROGRAMING. TRAINING WILL INCLUDE ALL REQUIRED STAFF AND THE TRAINING WILL BE DONE ON SITE.						
0013	2	EA		936-73	\$ 332.00	\$ 664.00
FRONT DOOR CODED KEYPAD ENTRY WITH TIMER SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411 VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL OR EQUAL FRONT DOOR CODED KEYPAD ENTRY WITH TIMER, LOCATED AT FRONT DOOR AND GRAPE HARBOR DOOR.						

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SIGNATURE <i>Joe R Bell</i>	TELEPHONE 340 366-4880	DATE 6-29-10
TITLE <i>President</i>	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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0014	28	EA		936-73		
INTERIOR DOOR CODED KEYPAD WITH TIMER CAPABILITY AND <i>Included in line 0002</i>						
SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						
VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL OR EQUAL INTERIOR DOOR CODED KEYPAD WITH THE TIMER CAPABILITY AND DISPLAY.						
0015	1	EA		936-73		
UP-GRADE SYSEM ON THE WIRELESS CALL STATIONS AND <i>sigma Sentinel System is upgradeable</i>						
SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						

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<p>VENDOR WILL PROVIDE AN UP-GRADABLE SYSTEM ON THE WIRELESS CALL STATIONS AND ELEVATOR LOCKOUT FOR FUTURE GROWTH.</p> <p>ALL EQUIPMENT SHALL BE PROVIDED F.O.B. DESTINATION, VENDOR SHALL DELIVER AND COMPLETE INSTALLATION WITHIN 90 DAYS OF ISSUANCE OF NOTICE TO PROCEED.</p> <p>THE VENDOR WITH THE LOWEST GRAND TOTAL OF ALL ITEMS WILL BE AWARDED THE CONTRACT. HOWEVER, THE FACILITY RESERVES THE RIGHT TO ACCEPT OR REJECT THE ALTERNATE ITEMS IF THE COSTS EXCEED WHAT THE FACILITY HAS BUDGETED FOR THE PURCHASE.</p> <p>ITEMS 16 AND 17 ARE ALTERNATE BID ITEMS.</p>						
0016	1	EA	936-73	NURSES STATION MONITOR UNIT - ALTERNATE BID	\$20,828.00	\$20,828.00
				Includes 54 Magnetic Pull Cords \$128.00		
				SHIP TO 98 : CALL Cords with Reset \$142.00		
				HEALTH AND HUMAN RESOURCES		
				HOPMONT HOSPITAL		
				CENTRAL RECEIVING		
				150 HOPMONT DRIVE		
				TERRA ALTA, WV		
				26764-7728		
				304-789-2411		

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SIGNATURE <i>Jan 2 Bell</i>	TELEPHONE 540 366-7880	DATE 6-29-10
TITLE <i>President</i>	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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0017	1	EA	936-73	VENDOR WILL PROVIDE AND INSTALL SIGMA SENTINEL MODEL OR EQUAL NURSES STATION MONITOR UNIT. NURSES STATION MONITOR WILL PROVIDE AUDIBLE/VISUAL INDICATION OF ALL EXISTS. SYSTEM TO DISPLAY RESIDENT NAME AND EXIT LOCATION. <i>Philips LifeLine Emergency Call System specifications attached</i> <i>Sigma does not make Nurse Call Systems</i> \$ 4,750.00		\$ 4,750.00
WARRANTY: THREE (3) YEAR PARTS WARRANTY - ALTERNATE <i>Includes Install + Install Materials</i>						
SHIP TO : HEALTH AND HUMAN RESOURCES HOPEMONT HOSPITAL CENTRAL RECEIVING 150 HOPEMONT DRIVE TERRA ALTA, WV 26764-7728 304-789-2411						
WARRANTY: THREE (3) YEAR PARTS WARRANTY TWO (2) YEAR LABOR WARRANTY						
BID ON SIGMA SENTINEL OR EQUAL RESIDENT WANDERING SYSTEM: \$ 120,982.00						
BID ON ALTERNATE NURSE STATION MONITOR UNIT: \$ 28,328.00						
GRAND TOTAL ALL ITEMS BID: \$ 149,310.00						
CANCELLATION: THE DIRECTOR OF PURCHASING RESERVES THE						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS			
SIGNATURE <i>Joe Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-10	
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE	

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
HOP11005

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ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER
304-558-0067

VENDOR

RFQ COPY

TYPE NAME/ADDRESS HERE

Advantage Healthcare, LLC
8108 Hunters Trail
Roanoke, VA 24019

SHIP TO

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
05/24/2010				

BID OPENING DATE

06/24/2010

BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE COMMODITIES AND/OR SERVICES SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM TO THE SPECIFICATIONS OF THE BID AND CONTRACT HEREIN.</p> <p>BANKRUPTCY: IN THE EVENT THE VENDOR/CONTRACTOR FILES FOR BANKRUPTCY PROTECTION, THE STATE MAY DEEM THE CONTRACT NULL AND VOID, AND TERMINATE SUCH CONTRACT WITHOUT FURTHER ORDER.</p> <p>INQUIRIES: WRITTEN QUESTIONS SHALL BE ACCEPTED THROUGH CLOSE OF BUSINESS ON 6/8/2010. QUESTIONS MAY BE SENT VIA USPS, FAX, COURIER OR E-MAIL. IN ORDER TO ASSURE NO VENDOR RECEIVES AN UNFAIR ADVANTAGE, NO SUBSTANTIVE QUESTIONS WILL BE ANSWERED ORALLY. IF POSSIBLE, E-MAIL QUESTIONS ARE PREFERRED. ADDRESS INQUIRIES TO:</p> <p>ROBERTA WAGNER DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25311</p> <p>FAX: 304-558-4115</p> <p>E-MAIL: ROBERTA.A.WAGNER@WV.GOV</p>						
<p>THE MODEL/BRAND/SPECIFICATIONS NAMED HEREIN ESTABLISH THE ACCEPTABLE LEVEL OF QUALITY ONLY AND ARE NOT</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>John Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-10
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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ADDRESS CORRESPONDENCE TO ATTENTION OF:
ROBERTA WAGNER 304-558-0067

VENDOR	RFQ COPY
	TYPE NAME/ADDRESS HERE
	Advantage Healthcare, LLC 8108 Hunters Trail Roanoke, VA 24019

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BID OPENING DATE: 06/24/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>INTENDED TO REFLECT A PREFERENCE OR FAVOR ANY PARTICULAR BRAND OR VENDOR. VENDORS WHO ARE BIDDING ALTERNATES SHOULD SO STATE AND INCLUDE PERTINENT LITERATURE AND SPECIFICATIONS. FAILURE TO PROVIDE INFORMATION FOR ANY ALTERNATES MAY BE GROUNDS FOR REJECTION OF THE BID. THE STATE RESERVES THE RIGHT TO WAIVE MINOR IRREGULARITIES IN BIDS OR SPECIFICATIONS IN ACCORDANCE WITH SECTION 148-1-4(F) OF THE WEST VIRGINIA LEGISLATIVE RULES AND REGULATIONS.</p> <p>EXHIBIT 5</p> <p>WEST VIRGINIA CODE 21-1D-5 PROVIDES THAT: ANY SOLICITATION FOR A PUBLIC IMPROVEMENT CONSTRUCTION CONTRACT REQUIRES EACH VENDOR THAT SUBMITS A BID FOR THE WORK TO SUBMIT AT THE SAME TIME AN AFFIDAVIT OF COMPLIANCE WITH THE BID. THE ENCLOSED DRUG-FREE WORKPLACE AFFIDAVIT MUST BE SIGNED AND SUBMITTED WITH THE BID AS EVIDENCE OF THE VENDOR'S COMPLIANCE WITH THE PROVISIONS OF ARTICLE 1D, CHAPTER 21 OF THE WEST VIRGINIA CODE. FAILURE TO SUBMIT THE SIGNED DRUG-FREE WORKPLACE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF SUCH BID.</p> <p>NOTICE TO PROCEED: THIS CONTRACT IS TO BE PERFORMED WITHIN 90 CALENDAR DAYS AFTER THE NOTICE TO PROCEED IS RECEIVED.</p> <p>WAGE RATES: THE CONTRACTOR OR SUBCONTRACTOR SHALL PAY THE HIGHER OF THE U.S. DEPARTMENT OF LABOR MINIMUM WAGE RATES AS ESTABLISHED FOR PRESTON COUNTY, PURSUANT TO WEST VIRGINIA CODE 21-5A, ET, SEQ. (PREVAILING WAGE RATES APPLY TO THIS PROJECT)</p> <p>ARBITRATION: ANY REFERENCES MADE TO ARBITRATION OR</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE	TITLE	FEN	TELEPHONE	DATE
<i>[Signature]</i>	President	54-1897951	54-326-4880	6-29-10

ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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 8108 Hunters Trail
 Roanoke, VA 24019

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BID OPENING DATE: 06/24/2010 BID OPENING TIME 01:30PM

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<p>INTEREST FOR PAYMENTS DUE (EXCEPT FOR ANY INTEREST REQUIRED BY STATE LAW) CONTAINED IN THIS CONTRACT OR IN ANY AMERICAN INSTITUTE OF ARCHITECTS DOCUMENTS PERTAINING TO THIS CONTRACT ARE HEREBY DELETED.</p> <p>WORKERS' COMPENSATION: VENDOR IS REQUIRED TO PROVIDE A CERTIFICATE FROM WORKERS' COMPENSATION IF SUCCESSFUL.</p> <p>ALL OF THE ITEMS CHECKED BELOW WILL BE A REQUIREMENT OF THIS CONTRACT:</p> <p>(XX) INSURANCE: SUCCESSFUL VENDOR SHALL FURNISH PROOF OF COMMERCIAL GENERAL LIABILITY INSURANCE PRIOR TO ISSUANCE OF CONTRACT. UNLESS OTHERWISE SPECIFIED IN THE BID DOCUMENTS, THE MINIMUM AMOUNT OF INSURANCE COVERAGE REQUIRED IS \$250,000.</p> <p>() BUILDERS RISK INSURANCE: SUCCESSFUL VENDOR SHALL FURNISH PROOF OF BUILDERS RISK - ALL RISK INSURANCE IN AN AMOUNT EQUAL TO 100% OF THE AMOUNT OF THE CONTRACT.</p> <p>(XX) BONDS: FIVE PERCENT (5%) OF THE TOTAL AMOUNT OF THE BID PAYABLE TO THE STATE OF WEST VIRGINIA, SHALL BE SUBMITTED WITH EACH BID AS A BID BOND. THE SUCCESSFUL BIDDER SHALL ALSO FURNISH A PERFORMANCE BOND AND LABOR/MATERIAL BOND FOR 100% OF THE AMOUNT OF THE CONTRACT. BONDS MAY BE PROVIDED IN THE FORM OF A CERTIFIED CHECK, IRREVOCABLE LETTER OF CREDIT, OR BOND FURNISHED BY A SOLVENT SURETY COMPANY AUTHORIZED TO DO BUSINESS IN THE STATE OF WEST VIRGINIA. A LETTER OF CREDIT SUBMITTED IN LIEU OF A BOND WILL ONLY BE ALLOWED FOR PROJECTS UNDER \$100,000. PERSONAL OR BUSINESS CHECKS ARE NOT ACCEPCTABLE IN LIEU OF THE 5% BID BOND, PERFORMANCE BOND, OR LABOR AND MATERIAL BOND.</p> <p>() MAINTENANCE BOND: A TWO (2) YEAR MAINTENANCE BON</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Joe Z Bell</i>	TELEPHONE 540 366-4880	DATE 6-29-16
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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 Roanoke, VA 24019

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05/24/2010				

BID OPENING DATE: 06/24/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
COVERING THE ROOFING SYSTEM WILL BE A REQUIREMENT OF THE SUCCESSFUL VENDOR.						
REV. 11/00						
EXHIBIT 7						
DOMESTIC ALUMINUM, GLASS & STEEL IN PUBLIC WORKS PROJECTS						
IN ACCORDANCE WITH WEST VIRGINIA CODE 5-19-1 ET., SEQ., EVERY CONTRACT FOR CONSTRUCTION, RECONSTRUCTION, ALTERATION, REPAIR, IMPROVEMENT OR MAINTENANCE OF PUBLIC WORKS, WHERE THE COST IS MORE THAN \$50,000 AND, IN THE CASE OF STEEL ONLY, WHERE THE COST OF STEEL IS MORE THAN \$50,000 OR WHERE MORE THAN 10,000 POUNDS OF STEEL ARE REQUIRED, THE STATE WILL ACCEPT ONLY ALUMINUM GLASS, OR STEEL PRODUCTS PRODUCED IN THE UNITED STATES. IN ADDITION, ITEMS OF MACHINERY OR EQUIPMENT PURCHASED FOR USE AT THE SITE OF PUBLIC WORKS SHALL BE MADE OF DOMESTIC ALUMINUM, GLASS OR STEEL, UNLESS THE COST OF THE PRODUCT IS LESS THAN \$50,000 OR LESS THAN 10,000 POUNDS OF STEEL ARE USED IN PUBLIC WORKS PROJECTS.						
FOREIGN MADE ALUMINUM, GLASS OR STEEL PRODUCTS MAY BE ACCEPTED ONLY IF THE COST OF DOMESTIC PRODUCTS IS FOUND TO BE UNREASONABLE. SUCH COST IS UNREASONABLE IF IT IS 20% OR MORE HIGHER THAN THE BID PRICE FOR FOREIGN MADE PRODUCTS. IF THE DOMESTIC ALUMINUM, GLASS OR STEEL PRODUCTS TO BE SUPPLIED OR PRODUCED IN A "SUBSTANTIAL LABOR SURPLUS AREA", AS DEFINED BY THE UNITED STATES DEPARTMENT OF LABOR, FOREIGN PRODUCTS MAY BE SUPPLIED ONLY IF DOMESTIC PRODUCTS ARE 30% OR MORE HIGHER IN PRICE THAN THE FOREIGN MADE PRODUCTS.						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE: *For Z Bell* TELEPHONE: 340 366-7880 DATE: 6-29-10
 TITLE: President FEIN: 54-1897951 ADDRESS CHANGES TO BE NOTED ABOVE

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Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

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<p>IF, PRIOR TO THE AWARD OF A CONTRACT UNDER THE ABOVE PROVISIONS, THE SPENDING OFFICER OF THE SPENDING UNIT DETERMINES THAT THERE EXISTS A BID FOR LIKE FOREIGN ALUMINUM, GLASS OR STEEL THAT IS REASONABLE AND LOWER THAN THE LOWEST BID DOMESTIC PRODUCTS, THE SPENDING OFFICE MAY REQUEST, IN WRITING, A REEVALUATION AND REDUCTION IN THE LOWEST BID FOR SUCH DOMESTIC PRODUCTS. ALL VENDORS MUST INDICATE IN THEIR BID IF THEY ARE SUPPLYING FOREIGN ALUMINUM, GLASS OR STEEL.</p> <p>REV. 3/88</p> <p>EXHIBIT 9</p> <p>NOTICE FOR ISSUANCE & ACKNOWLEDGEMENT OF CONSTRUCTION PROJECT ADDENDA</p> <p>THE ARCHITECT/ENGINEER AND/OR AGENCY SHALL BE REQUIRED TO ABIDE BY THE FOLLOWING SCHEDULE IN ISSUING CONSTRUCTION PROJECT ADDENDA FOR STATE AGENCIES:</p> <p>(1) THE ARCHITECT/ENGINEER SHALL PREPARE THE ADDENDUM AND A LIST OF ALL PARTIES THAT HAVE PROCURED DRAWINGS AND SPECIFICATIONS FOR THE PROJECT. THE ADDENDUM AND LIST SHALL BE FORWARDED TO THE BUYER IN THE STATE PURCHASING DIVISION. THE ARCHITECT/ENGINEER SHALL ALSO SEND A COPY OF THE ADDENDUM TO THE STATE AGENCY FOR WHICH THE CONTRACT IS ISSUED.</p> <p>(2) THE BUYER SHALL SEND THE ADDENDUM TO ALL INTERESTED PARTIES AND, IF NECESSARY, EXTEND THE BID OPENING DATE. ANY ADDENDUM SHOULD BE RECEIVED BY THE BUYER WITHIN FOURTEEN (14) DAYS PRIOR TO THE BID OPENING DATE.</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>John Bell III</i>	TELEPHONE 576 366-4880	DATE 6-29-10
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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304-558-0067

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Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

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<p>(3) ALL ADDENDA SHOULD BE FORMALLY ACKNOWLEDGED BY ALL BIDDERS AND SUBMITTED TO THE STATE PURCHASING DIVISION. THE SAME RULES AND REGULATIONS THAT APPLY TO THE ORIGINAL BIDDING DOCUMENT SHALL ALSO APPLY TO AN ADDENDUM DOCUMENT. THE ONLY EXCEPTION MAY BE FOR AN ADDENDUM THAT IS ISSUED FOR THE SOLE PURPOSE OF CHANGING A BID OPENING TIME AND/OR DATE.</p> <p>REV. 11/96</p> <p>EXHIBIT 10</p> <p>ADDENDUM ACKNOWLEDGEMENT</p> <p>I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO MY PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.</p> <p>ADDENDUM NOS. :</p> <p>NO. 1 ✓</p> <p>NO. 2 ✓</p> <p>NO. 3 ✓</p> <p>NO. 4 ✓</p> <p>NO. 5</p> <p>I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF THE BIDS.</p> <p>VENDOR MUST CLEARLY UNDERSTAND THAT ANY VERBAL</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS	
SIGNATURE <i>Or 2 Bell</i>	TELEPHONE 340 366-4880
TITLE President	DATE 6-29-10
FEIN 84-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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State of West Virginia
 Department of Administration
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Request for Quotation

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HOP11005

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ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER 304-558-0067

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Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

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<p>REPRESENTATION MADE OR ASSUMED TO BE MADE DURING ANY ORAL DISCUSSION HELD BETWEEN VENDOR'S REPRESENTATIVES AND ANY STATE PERSONNEL IS NOT BINDING. ONLY THE INFORMATION ISSUED IN WRITING AND ADDED TO THE SPECIFICATIONS BY AN OFFICIAL ADDENDUM IS BINDING.</p> <p><i>[Signature]</i> SIGNATURE <i>Advantage Healthcare, LLC</i> COMPANY <i>6-29-10</i> DATE</p> <p>REV. 11/96</p> <p>CONTRACTORS LICENSE</p> <p>WEST VIRGINIA STATE CODE 21-11-2 REQUIRES THAT ALL PERSONS DESIRING TO PERFORM CONTRACTING WORK IN THIS STATE MUST BE LICENSED. THE WEST VIRGINIA CONTRACTORS LICENSING BOARD IS EMPOWERED TO ISSUE THE CONTRACTORS LICENSE. APPLICATIONS FOR A CONTRACTORS LICENSE MAY BE MADE BY CONTACTING THE WEST VIRGINIA DIVISION OF LABOR CAPITOL COMPLEX, BUILDING 3, ROOM 319, CHARLESTON, WV 25305. TELEPHONE: (304) 558-7890.</p> <p>WEST VIRGINIA STATE CODE 21-11-11 REQUIRES ANY PROSPECTIVE BIDDER TO INCLUDE THE CONTRACTORS LICENSE NUMBER ON THEIR BID.</p> <p>BIDDER TO COMPLETE:</p> <p>CONTRACTORS NAME: <i>Advantage Healthcare, LLC</i></p> <p>CONTRACTORS LICENSE NO.: <i>Pending - See Attached</i></p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS		
SIGNATURE <i>[Signature]</i>	TELEPHONE 540 366-4880	DATE 6-29-10
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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<p>THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FURNISH A COPY OF THEIR CONTRACTORS LICENSE PRIOR TO ISSUANCE OF A PURCHASE ORDER/CONTRACT</p> <p>APPLICABLE LAW</p> <p>THE WEST VIRGINIA STATE CODE, PURCHASING DIVISION RULES AND REGULATIONS, AND THE INFORMATION PROVIDED IN THE "REQUEST FOR QUOTATION" ISSUED BY THE PURCHASING DIVISION IS THE SOLE AUTHORITY GOVERNING THIS PROCUREMENT.</p> <p>ANY INFORMATION PROVIDED IN SPECIFICATION MANUALS, OR ANY OTHER SOURCE, VERBAL OR WRITTEN, WHICH CONTRADICTS OR ALTERS THE INFORMATION PROVIDED FROM THE SOURCES AS DESCRIBED IN THE ABOVE PARAGRAPH IS VOID AND OF NO EFFECT.</p> <p>NOTICE</p> <p>A SIGNED BID MUST BE SUBMITTED TO:</p> <p>DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION BUILDING 15 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25305-0130</p> <p>THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED:</p> <p>SEALED BID</p> <p>BUYER: -----RW/FILE 22-----</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Joe R Bell</i>	TELEPHONE 304 366-4880	DATE 6-29-10
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

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	Advantage Healthcare, LLC 8108 Hunters Trail Roanoke, VA 24019

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BID OPENING DATE: 06/24/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
REQ. NO.: -----HOP11005----- BID OPENING DATE: -----6/24/2010----- BID OPENING TIME: -----1:30 PM----- PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID: ----- 540 366-4012 ----- PLEASE PRINT OR TYPE NAME OF PERSON TO CONTACT CONCERNING THIS QUOTE: ----- John L. Bell ----- ***** THIS IS THE END OF RFQ HOP11005 ***** TOTAL: <u>\$149,310.00</u>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS			
SIGNATURE <i>John L. Bell</i>	TELEPHONE 540 366-4886	DATE 6 29-10	
TITLE President	FEIN 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE	

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STATE OF WEST VIRGINIA
PURCHASE CONTINUATION SHEET

Page 2 of 3 Pages

Requisition / P.O. No.:
HOP11005File:
RW22 Acct. No.:
P20603Spending Unit:
HOPEMONT HOSPITALVendor: Advantage Healthcare LLC Date: _____

Item No.	Quantity	Description	Unit Price	Amount
		Bids to include all products, new wiring, labor and installation material to install a resident wandering system at Hopemont Hospital, located at 150 Hopemont Drive, Terra Alta WV 26784, according to the following specifications.		
1.	1ea.	Warranty: Three(3) year parts warranty Two(2) year labor warranty Warranty will exclude existing magnetic door locks.		
2.	28ea.	Vendor will provide and install Sigma Sentinel model or equal self checking system door control units. Monitored residents will activate the door locks and will be prevented from leaving through locked doors. The system will identify the resident by number or name at the exit and nurses's monitor. The unit will monitor transmitter battery conditions. Doors may be coded for exiting Family code that will allow family to exit without allowing monitored residents to follow. Outside keypad at the front door will allow staff to enter when door is locked (with timer options at front door and grape harbor door).	\$ 2,095.00	58,660.00
3.	1ea.	Vendor will provide Sigma Sentinel or equal Transmitter Tester. Transmitter tester/programmer, hand held device to provide access to working status on each transmitter and provides wireless data entry. System is to be self checking capable.	\$ 1,250.00	\$ 1,250.00
4.	28ea.	Vendor will provide Sigma Sentinel or equal Transmitter. Resident transmitters, watch size, can be worn on wrist or ankle, water tight, three(3) year life on transmitters.	\$ 118.00	\$ 3,304.00
5.	50ea.	Vendor will provide Sigma Sentinel or equal Transmitter Band. Resident Transmitter Bands, reinforced one-way snap, hypo-allergenic plastic-nylon/kevlar reinforced, 150lb pull pressure strap.	\$ 3.00	\$ 150.00
6.	3ea.	Vendor will provide and install Sigma Sentinel or equal Magnetic door lock with 15 second delay. Parts/labor Warranty to cover 3 new magnetic door locks, existing door locks not covered on Parts/Labor Warranty.	\$ 835.00	\$ 2,505.00
7.	1ea.	Vendor will provide and install Sigma Sentinel or equal connections of 5 Paging Transmitter 4 Serial Ports.	\$ 1,944.00	\$ 1,944.00
8.	50ea.	Vendor will provide Sigma Sentinel or equal Alphanumeric pagers with capacity to hold Six(6) addresses (929H).	\$ 149.00	\$ 7,450.00
9.	1ea.	Vendor will provide and install Sigma Sentinel or equal Network PC Paging Software, Client & Service. This will allow paging from all network computers.	\$ 875.00	\$ 875.00
10.	1ea.	Vendor will provide and install Sigma Sentinel or equal CPU 17" Monitor, 2-Hard Drives, 2 Serial Ports, Printer UPS, XP Pro and Sigma Sentinel Software or equal.	\$ 8,575.00	\$ 8,575.00

WV-38 (Rev 01/01/07)

STATE OF WEST VIRGINIA
PURCHASE CONTINUATION SHEET

Page 3 of 3 Pages

Requisition / P.O. No.:
HOP11005

File: RW22 Accl. No.: P20803

Spending Unit:
HOPEMONT HOSPITAL

Vendor: Advantage Healthcare LLC Date: _____

Item No.	Quantity	Description	Unit Price	Amount
11.	5ea.	Vendor will provide and install Sigma Sentinel or equal non-powered wireless receiver. This will be connected to the Central Monitoring System for power.	\$550.00	\$2,750.00
12.	1ea.	Vendor will provide training and total system programming. Training will include all required staff and the training will be done on site.	\$35,605.00	\$35,605.00
13.	2ea.	Vendor will provide and install Sigma Sentinel or equal front door coded keypad entry with timer, located at front door and grape harbor door.	\$332.00	\$664.00
14.	28ea.	Vendor will provide and install Sigma Sentinel or equal interior door coded keypad with the timer capability and display.	<i>Included in line 0002</i>	
15.	1ea.	Vendor will provide a up-gradable system on the wireless call stations and elevator lockout for future growth. All equipment shall be provided FOB destination, vendor shall deliver and complete installation within 90 days of issuance of notice to proceed. The vendor with the lowest grand total of all items will be awarded the contract. However the facility reserves the right to accept or reject the alternate items if the costs exceed what the facility has budgeted for the purchase.	<i>Sigma Sentinel is upgradable</i>	
		Bid on Sigma Sentinel or equal resident wandering system: Alternate bid requested: Nurses Station Monitor Unit.	\$120,982.00	\$120,982.00
16.	1ea.	Vendor will provide and install Sigma Sentinel model or equal Nurses Station Monitor unit. Nurses Station Monitor will provide audible/visual indication of all exits. System to display resident name and exit location.	\$20,828.00	\$20,828.00
17.	1ea.	Warranty: Three(3) year parts warranty Two(2) year labor warranty	\$4750.00	\$4750.00
		Bid on Sigma Sentinel or equal Nurses Station Monitor Unit:	\$28,328.00	\$28,328.00
		Grand Total of the RFQ:		\$149,310.00



State of West Virginia
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 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
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WV PURCHASING DIV. Fax 304-558-3970

May 27 2010 04:17pm P001/003

Request for Quotation

REQ NUMBER	PAGE
HOP11005	1

ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER 304-558-0067

RFQ COPY
 TYPE NAME/ADDRESS HERE

Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

HEALTH AND HUMAN RESOURCES
 HOPEMONT HOSPITAL
 CENTRAL RECEIVING
 150 HOPEMONT DRIVE
 TERRA ALTA, WV
 26764-7728 304-789-2411

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHT TERMS
05/27/2010				

BID OPENING DATE: 06/24/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
				ADDENDUM NO. 1		
				1. QUESTIONS AND ANSWERS ARE ATTACHED.		
				2. TO ADD MANDATORY PRE-BID MEETING AND 98 RESIDENT CALL CORDS AND 54 BATHROOM CALL CORDS TO ALTERNATE FOR WIRELESS NURSES CALL STATION PER THE ATTACHED.		
				3. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR BID.		
				EXHIBIT 10		
				REQUISITION NO.: HOP11005		
				ADDENDUM ACKNOWLEDGEMENT		
				I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO M PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.		
				ADDENDUM NO. S:		
				NO. 1		
				NO. 2		
				NO. 3		
				NO. 4		

SEE REVERSE SIDE FOR TERMS AND CONDITIONS			
SIGNATURE <i>Or 2 Belle</i>	TELEPHONE 540 366-4880	DATE 6-29-10	
TITLE President	FAX 54-1897951	ADDRESS CHANGES TO BE NOTED ABOVE	

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

WV PURCHASING DIV. Fax 304-558-3970

May 27 2010 04:18pm P002/003

Request for Quotation

REQ NUMBER	PAGE
HOPL1005	2

ADDRESS CORRESPONDENCE TO ATTENTION OF:
ROBERTA WAGNER 304-558-0067

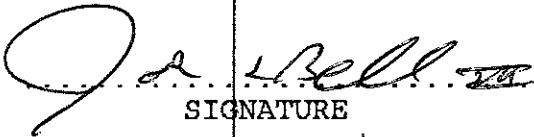
RFQ COPY
 TYPE NAME/ADDRESS HERE

Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

HEALTH AND HUMAN RESOURCES
 HOPEMONT HOSPITAL
 CENTRAL RECEIVING
 150 HOPEMONT DRIVE
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 26764-7728 304-789-2411

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHT TERMS
05/27/2010				

BID OPENING DATE: 06/24/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO	ITEMNUMBER	UNIT PRICE	AMOUNT
NO. 5						
<p>I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF BIDS.</p> <p>VENDOR MUST CLEARLY UNDERSTAND THAT ANY VERBAL REPRESENTATION MADE OR ASSUMED TO BE MADE DURING ANY ORAL DISCUSSION HELD BETWEEN VENDOR'S REPRESENTATIVES AND ANY STATE PERSONNEL IS NOT BINDING. ONLY THE INFORMATION ISSUED IN WRITING AND ADDED TO THE SPECIFICATIONS BY AN OFFICIAL ADDENDUM IS BINDING.</p> <p style="text-align: center;">  SIGNATURE Advantage Healthcare, LLC COMPANY 6-29-10 DATE </p> <p>NOTE: THIS ADDENDUM ACKNOWLEDGEMENT SHOULD BE SUBMITTED WITH THE BID.</p> <p>REV. 09/21/2009</p> <p style="text-align: center;">END OF ADDENDUM NO. 1</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS			
SIGNATURE	TELEPHONE	DATE	
	540 366-4880	6-29-10	
TITLE	FEIN	ADDRESS CHANGES TO BE NOTED ABOVE	
President	54-1397957		

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
HOP11005

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
**ROBERTA WAGNER
304-558-0067**

RFQ COPY
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Advantage Healthcare, LLC
8108 Hunters Trail
Roanoke, VA 24019

HEALTH AND HUMAN RESOURCES
HOPEMONT HOSPITAL
CENTRAL RECEIVING
150 HOPEMONT DRIVE
TERRA ALTA, WV
26764-7728 304-789-2411

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHT TERMS
06/15/2010				

BID OPENING DATE: **06/24/2010** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 2						
<p>1. QUESTIONS AND ANSWERS ARE ATTACHED.</p> <p>2. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR BID.</p> <p>EXHIBIT 10</p> <p style="text-align: center;">REQUISITION NO.: HOP11005</p> <p>ADDENDUM ACKNOWLEDGEMENT</p> <p>I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO MY PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.</p> <p>ADDENDUM NO. 'S:</p> <p>NO. 1</p> <p>NO. 2</p> <p>NO. 3</p> <p>NO. 4</p> <p>NO. 5</p> <p>I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF BIDS.</p> <p>VENDOR MUST CLEARLY UNDERSTAND THAT ANY VERBAL REPRESENTATION MADE OR ASSUMED TO BE MADE DURING ANY ORAL DISCUSSION HELD BETWEEN VENDOR'S REPRESENTATIVES</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>For 2 Bell</i>	TELEPHONE 846 366-9880	DATE 6-29-10
TITLE <i>President</i>	FEIN 94-1897951	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for Quotation

REQ NUMBER
HOP11005

ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER
304-558-0067

RFQ COPY
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Advantage Healthcare, LLC
8108 Hunters Trail
Roanoke, VA 24019

HEALTH AND HUMAN RESOURCES
HOPEMONT HOSPITAL
CENTRAL RECEIVING
150 HOPEMONT DRIVE
TERRA ALTA, WV
26764-7728 304-789-2411

DATE PRINTED	TERMS OF SALE	SHP. WA.	FOB	FREIGHT TERMS		
06/15/2010						
BID OPENING DATE: 06/24/2010		BID OPENING TIME 01:30PM				
LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>AND ANY STATE PERSONNEL IS NOT BINDING. ONLY THE INFORMATION ISSUED IN WRITING AND ADDED TO THE SPECIFICATIONS BY AN OFFICIAL ADDENDUM IS BINDING.</p> <p><i>J. A. Bell</i> SIGNATURE Advantage Healthcare, LLC COMPANY 6-29-10 DATE</p> <p>NOTE: THIS ADDENDUM ACKNOWLEDGEMENT SHOULD BE SUBMITTED WITH THE BID.</p> <p>REV. 09/21/2009</p> <p>END OF ADDENDUM NO. 2</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE *J. A. Bell* TELEPHONE **540 366-4886** DATE **6-29-10**

TITLE **President** FEIN **54-1897951** ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

**request for
 Quotation**

RFQ NUMBER
HOP11005

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
**ROBERTA WAGNER
 304-558-0067**

RFQ COPY
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Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

HEALTH AND HUMAN RESOURCES
 HOPEMONT HOSPITAL
 CENTRAL RECEIVING
 150 HOPEMONT DRIVE
 TERRA ALTA, WV
 26764-7728 304-789-2411

DATE PRINTED:	TERMS OF SALE:	SHIP VIA:	F.O.B.:	FREIGHT TERMS:
06/16/2010				

BID OPENING DATE: **06/24/2010** BID OPENING TIME: **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
ADDENDUM NO. 3						
1. TO CORRECT RESPONSES TO TWO VENDOR QUESTIONS PER THE ATTACHED.						
2. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR BID.						
EXHIBIT 10						
REQUISITION NO.: HOP11005						
ADDENDUM ACKNOWLEDGEMENT						
I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO M PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.						
ADDENDUM NO.'S:						
NO. 1						
NO. 2						
NO. 3						
NO. 4						
NO. 5						
I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF BIDS.						
VENDOR MUST CLEARLY UNDERSTAND THAT ANY VERBAL REPRESENTATION MADE OR ASSUMED TO BE MADE DURING ANY						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE: *[Signature]* TELEPHONE: **340 366-4880** DATE: **6-29-10**

TITLE: **President** FEIN: **34-1897951** ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

request for Quotation

RFQ NUMBER
HQP11005

2

ADDRESS CORRESPONDENCE TO ATTENTION OF
ROBERTA WAGNER
304-558-0067

RFQ COPY
TYPE NAME/ADDRESS HERE

Advantage Healthcare, LLC
8108 Hunters Trail
Roanoke, VA 24019

HEALTH AND HUMAN RESOURCES
HOPEMONT HOSPITAL
CENTRAL RECEIVING
150 HOPEMONT DRIVE
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26764-7728 304-789-2411

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHT TERMS
06/16/2010				

BID OPENING DATE: 06/24/2010	BID OPENING TIME: 01:30PM					
LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT

ORAL DISCUSSION HELD BETWEEN VENDOR'S REPRESENTATIVES AND ANY STATE PERSONNEL IS NOT BINDING. ONLY THE INFORMATION ISSUED IN WRITING AND ADDED TO THE SPECIFICATIONS BY AN OFFICIAL ADDENDUM IS BINDING.

John Z. Bell
SIGNATURE

Advantage Healthcare, LLC
COMPANY

6-29-10
DATE

NOTE: THIS ADDENDUM ACKNOWLEDGEMENT SHOULD BE SUBMITTED WITH THE BID.

REV. 09/21/2009

END OF ADDENDUM NO. 3

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>John Z. Bell</i>	TELEPHONE 540 366-9880	DATE 6-29-10
TITLE President	FAX 54-189-7357	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
 HOP11005

PAGE
 1

ADDRESS CORRESPONDENCE TO ATTENTION OF
 ROBERTA WAGNER
 304-558-0067

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Advantage Healthcare, LLC
 John Bell
 8108 Hunters Trail
 Roanoke, VA 24019

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HEALTH AND HUMAN RESOURCES
 HOPEMONT HOSPITAL
 CENTRAL RECEIVING
 150 HOPEMONT DRIVE
 TERRA ALTA, WV
 26764-7728 304-789-2411

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
06/18/2010				

BID OPENING DATE: 07/01/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
				ADDENDUM NO. 4		
				1. QUESTIONS AND ANSWERS ARE ATTACHED. TO CLARIFY THE LOCATION OF INSTALLATION OF NEW LOCKS PER ATTACHED NEW LISTING.		
				2. BID OPENING DATE BEING MOVED FROM 6/24/2010 TO 7/1/2010.		
				3. ADDENDUM ACKNOWLEDGEMENT IS ATTACHED. THIS DOCUMENT SHOULD BE SIGNED AND RETURNED WITH YOUR BID. FAILURE TO SIGN AND RETURN MAY RESULT IN DISQUALIFICATION OF YOUR BID.		
				EXHIBIT 10		
				REQUISITION NO.: HOP11005		
				ADDENDUM ACKNOWLEDGEMENT		
				I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO MY PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.		
				ADDENDUM NO.'S:		
				NO. 1		
				NO. 2		
				NO. 3		

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE: *John Bell III* TELEPHONE: 540 366-4800 DATE: 6-29-10
 TITLE: President FEIN: 54-1897951 ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



State of West Virginia
 Department of Administration
 Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

Request for Quotation

RFQ NUMBER
 HOP11005

PAGE
 2

ADDRESS CORRESPONDENCE TO ATTENTION OF
 ROBERTA WAGNER
 304-558-0067

RFQ COPY
 TYPE NAME/ADDRESS HERE
 Advantage Healthcare, LLC
 8108 Hunters Trail
 Roanoke, VA 24019

SHIP TO
 HEALTH AND HUMAN RESOURCES
 HOPEMONT HOSPITAL
 CENTRAL RECEIVING
 150 HOPEMONT DRIVE
 TERRA ALTA, WV
 26764-7728 304-789-2411

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B	FREIGHT TERMS
06/18/2010				

BID OPENING DATE: 07/01/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
NO. 4						
NO. 5						
<p>I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF TH ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF BIDS. VENDOR MUST CLEARLY UNDERSTAND THAT ANY VERBAL REPRESENTATION MADE OR ASSUMED TO BE MADE DURING ANY ORAL DISCUSSION HELD BETWEEN VENDOR'S REPRESENTATIVES AND ANY STATE PERSONNEL IS NOT BINDING. ONLY THE INFORMATION ISSUED IN WRITING AND ADDED TO THE SPECIFICATIONS BY AN OFFICIAL ADDENDUM IS BINDING.</p> <p style="text-align: center;"><i>Joe Bell</i> SIGNATURE</p> <p style="text-align: center;"><i>Advantage Healthcare, LLC</i> COMPANY</p> <p style="text-align: center;"><i>6-29-10</i> DATE</p> <p>NOTE: THIS ADDENDUM ACKNOWLEDGEMENT SHOULD BE SUBMITTED WITH THE BID.</p> <p>REV. 09/21/2009</p> <p style="text-align: center;">END OF ADDENDUM NO. 4</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Joe Bell</i>	TELEPHONE <i>540 366-4880</i>	DATE <i>6-29-10</i>
TITLE <i>President</i>	FEIN <i>54-189 7957</i>	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, Advantage Healthcare, LLC
of 8108 Hunters Trail, Roanoke, VA 24019, as Principal, and Western Surety Company
of 101 S. Phillips Ave, Sioux Falls, SD 57117, a corporation organized and existing under the laws of the State of South Dakota with its principal office in the City of Sioux Falls, SD, as Surety, are held and firmly bound unto the State of West Virginia, as Obligee, in the penal sum of Seven Thousand Four Hundred Sixty Five and 50/100 (\$ 7,465.50) for the payment of which, well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for Hopemont Hospital Terra Alta, WV: Install Wandering and Wireless Nurse Call Systems

NOW THEREFORE,

- (a) If said bid shall be rejected, or
- (b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no way impaired or affected by any extension of the time within which the Obligee may accept such bid, and said Surety does hereby waive notice of any such extension.

IN WITNESS WHEREOF, Principal and Surety have hereunto set their hands and seals, and such of them as are corporations have caused their corporate seals to be affixed hereunto and these presents to be signed by their proper officers, this 1st day of July, 2010.

Principal Corporate Seal

Surety Corporate Seal

Advantage Healthcare, LLC
(Name of Principal)
By Jon Z Bell
(Must be President or Vice President)
President
(Title)
Western Surety Company
(Name of Surety)
Michael John Herranen
Attorney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance. Raised corporate seals must be affixed, a power of attorney must be attached.

**ACKNOWLEDGMENT OF SURETY
(Attorney-in-Fact)**

STATE OF Arizona
COUNTY OF Maricopa } ss

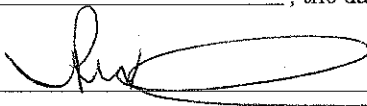
Bond No. 70954436

On this 1st day of July, 2010, before me, a notary public in and for said County, personally appeared Michael John Herranen to me personally known and being by me duly sworn, did say, that he is the Attorney-in-Fact of WESTERN SURETY COMPANY, a corporation of Sioux Falls, South Dakota, created, organized and existing under and by virtue of the laws of the State of South Dakota, that the said instrument was executed on behalf of the said corporation by authority of its Board of Directors and that the said Michael John Herranen

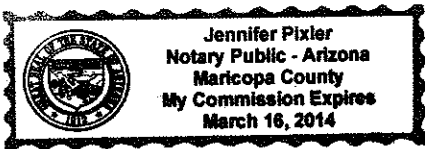
acknowledges said instrument to be the free act and deed of said corporation and that he has authority to sign said instrument without affixing the corporate seal of said corporation.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal at 22601 N 19th Ave, Suite 210
Phoenix, Arizona, the day and year last above written.

My commission expires March 16th, 2010



Jennifer Pixler Notary Public



Western Surety Company

POWER OF ATTORNEY - CERTIFIED COPY

Bond No. 70954436

Know All Men By These Presents, that WESTERN SURETY COMPANY, a corporation duly organized and existing under the laws of the State of South Dakota, and having its principal office in Sioux Falls, South Dakota (the "Company"), does by these presents make, constitute and appoint Michael John Herranen

its true and lawful attorney(s)-in-fact, with full power and authority hereby conferred, to execute, acknowledge and deliver for and on its behalf as Surety, bonds for:

Principal: Advantage Healthcare, LLC

Obligee: State of West Virginia

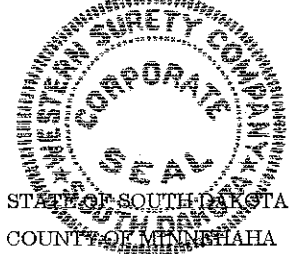
Amount: \$149,310.00

and to bind the Company thereby as fully and to the same extent as if such bonds were signed by the Senior Vice President, sealed with the corporate seal of the Company and duly attested by its Secretary, hereby ratifying and confirming all that the said attorney(s)-in-fact may do within the above stated limitations. Said appointment is made under and by authority of the following bylaw of Western Surety Company which remains in full force and effect.

"Section 7. All bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation shall be executed in the corporate name of the Company by the President, Secretary, any Assistant Secretary, Treasurer, or any Vice President or by such other officers as the Board of Directors may authorize. The President, any Vice President, Secretary, any Assistant Secretary, or the Treasurer may appoint Attorneys in Fact or agents who shall have authority to issue bonds, policies, or undertakings in the name of the Company. The corporate seal is not necessary for the validity of any bonds, policies, undertakings, Powers of Attorney or other obligations of the corporation. The signature of any such officer and the corporate seal may be printed by facsimile."

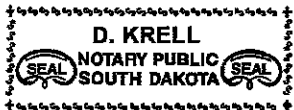
All authority hereby conferred shall expire and terminate, without notice, unless used before midnight of October 1, 2010, but until such time shall be irrevocable and in full force and effect.

In Witness Whereof, Western Surety Company has caused these presents to be signed by its Senior Vice President, Paul T. Bruflat, and its corporate seal to be affixed this 1st day of July, 2010.



WESTERN SURETY COMPANY
Paul T. Bruflat
Paul T. Bruflat, Senior Vice President

On this 1st day of July, in the year 2010, before me, a notary public, personally appeared Paul T. Bruflat, who being to me duly sworn, acknowledged that he signed the above Power of Attorney as the aforesaid officer of WESTERN SURETY COMPANY and acknowledged said instrument to be the voluntary act and deed of said corporation.



My Commission Expires November 30, 2012

D. Krell
Notary Public - South Dakota

I the undersigned officer of Western Surety Company, a stock corporation of the State of South Dakota, do hereby certify that the attached Power of Attorney is in full force and effect and is irrevocable, and furthermore, that Section 7 of the bylaws of the Company as set forth in the Power of Attorney is now in force.

In testimony whereof, I have hereunto set my hand and seal of Western Surety Company this 1st day of July, 2010.

WESTERN SURETY COMPANY
Paul T. Bruflat
Paul T. Bruflat, Senior Vice President



State of West Virginia
DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT
West Virginia Code §21-1D-5

STATE OF Va.

COUNTY OF Roanoke, TO-WIT:

I, John L. Bell III, after being first duly sworn, depose and state as follows:

- 1. I am an employee of Advantage Healthcare LLC; and,
(Company Name)
- 2. I do hereby attest that Advantage Healthcare, LLC
(Company Name)

maintains a valid written drug free workplace policy and that such policy is in compliance with **West Virginia Code §21-1D-5**.

The above statements are sworn to under the penalty of perjury.

Advantage Healthcare, LLC
(Company Name)

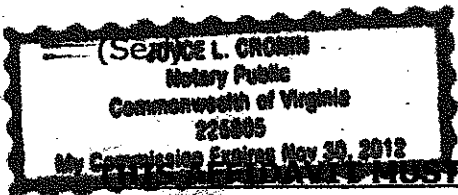
By: John L. Bell III

Title: President

Date: 6-23-10

Taken, subscribed and sworn to before me this 23 day of June, 2010

By Commission expires Nov-30, 2012



Se Joyce L. Crown
(Notary Public)

MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

RFQ No. HOP 11005

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: No contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and the debt owed is an amount greater than one thousand dollars in the aggregate.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

Under penalty of law for false swearing (*West Virginia Code* §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

WITNESS THE FOLLOWING SIGNATURE

Vendor's Name: Advantage Healthcare, LLC

Authorized Signature: [Signature] Date: 6-23-10

State of VA

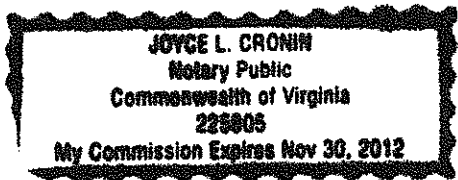
County of Roanoke, to-wit:

Taken, subscribed, and sworn to before me this 23 day of June, 2010

My Commission expires Nov. 30, 2012

AFFIX SEAL HERE

NOTARY PUBLIC [Signature]





John L. Bell III, President
8108 Hunters Trail
Roanoke, VA 24019
877 366-4880 Fax 540 366-4012
john@advantagehealthcarellc.com

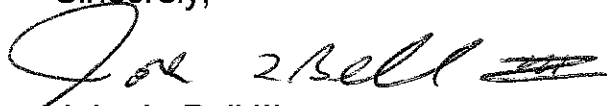
June 29, 2010

Ms. Roberta Wagner
West Virginia Department of Administration
Purchasing Division
PO Box 50130
Charleston, WV 25305-0130

Dear Roberta:

Our contractor license has been delayed due to the back order of the Business and Law study guide. Plans have been made to complete this exam within the next two weeks. It is my understanding that we will need a low voltage license, which only requires a Business and Law test. I apologize and hope this will not affect your decision. Thank you for your time.

Sincerely,


John L. Bell III



Philips Healthcare

CarePoint Resident Safety System

Functional Specification

Overview

This specification provides the technical description and functional requirements for a Resident Safety System designed to service Independent Living, Assisted Living, Skilled Nursing and Continuing Care Retirement Communities. Items and system function described herein are accurate at the time of this writing. Readers are encouraged to contact their local Philips Senior Living Solutions representative if using this document for proposal or building design to confirm that this is the latest revision available.

General Specification – System Purpose

The Resident Safety System (*system*) shall provide emergency call functionality for residents in all specified areas including living units, selected common areas, and any other specified interior or exterior space as defined by community. It may provide *secondary* notification of fire or smoke activity. *System shall never be the primary method of fire or smoke detection for any installation.*

General System Structure and Function

- The system shall be comprised of Wireless Transmitters, Receivers (WR), Links (WL), alert devices, a Central Monitoring Station (CMS) and ancillary equipment as applicable to customer-desired options. Communication between discrete alert devices and wireless receivers shall be accomplished utilizing wireless (RF) technology.
- With the exception of the communication between alert devices and wireless receivers, the system network shall afford the ability to allow all other inter-device communication to be accomplished in either a wired, wireless, or hybrid fashion – allowing the use of wired and wireless signal transmission components in the same system.
- Alert device signals shall be transmitted via Radio Frequency to the Wireless Receiver (WR). WR's report to the CMS via wireless or direct connection. The alarm signal shall be received, decoded, and processed by the CMS software program.
- The software shall be programmable. The software shall evaluate the digital signal, identify the transmitter that places the alarm, activate the appropriate alarm signal(s), and visually display – if required - the resident's name, apartment number, and which transmitter was activated.
- System shall have the capability to display resident information, medical information, health history and responder list at the CMS and at networked stations as well. System shall have the ability to act as a host network CPU, allowing up to eight remote client's access to the resident safety software application.
- System shall provide customizable escalation protocols for both resident alerts and



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- system alerts and will provide the ability to escalate calls off-site via telephony, email or internet connection.
- Alert devices are to communicate wirelessly with an electronic receiver network which is empirically derived utilizing system-specific range testing equipment such that there are no coverage gaps in customer-specified coverage area.
 - System shall have the capability to regularly report its own status to the Central Station.
 - System shall transmit digitally coded information for processing specific transmitter identification, alarm information, and messages.
 - System shall be capable of providing off-site monitoring and response capability for resident and system alerts with no 3rd party integration required.
 - System shall not require a FCC license, but shall meet applicable FCC requirements.
 - The paging system may require a FCC site license if >5 Watt system is indicated (provided by Philips).
 - The system shall operate as a stand-alone alert system and have the capability to integrate with:
 - an on-site paging system or
 - Spectralink® or other proprietary wireless telephone or
 - Other proprietary IP telecom systems
 - The Network shall funnel all calls to a Central Monitoring Station for processing. Up to 8 networked monitoring stations may be incorporated with the central station for remote access to database information.
 - Alerts shall be delivered to public pagers, VOIP phones or other electronic device as agreed with community.
 - System to provide full call history logging and reporting capability as well as remote log-in capability.
 - System shall be modular in construction and implementation to allow for expanded coverage area via addition of standard system components at a later date.
 - System shall provide for automatic-answering, 2-way, hands-free in-room voice communication capability for triage of resident alerts. This communication link shall be available from inside the community or remotely (Call Center).
 - System shall provide full database and function integration for controlled access and wandering whereby the same software and resident information database are utilized for both functions.
 - The complete system: all transmitters, WR's and CMS must be supervised, automatically checking in to the CMS on an hourly or bi-hourly basis and alerting staff to any problems.
 - The system shall have the capability to initiate alarms from fixed or mobile alert devices. Alert devices shall be provided in bedrooms, bathrooms and selected common rooms and/or as otherwise required by community or local/regional ordinance.
 - System shall integrate with an on-site alphanumeric paging system, allowing staff to receive alarms while away from the CMS.
 - The system shall have the capability to interface with the building smoke detection



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- system, both common areas and residences, via specified RS232 data, reporting fire alarms to the Central Station. At no time and in no case shall the system be the primary means of fire or smoke notification for the community/residents.
- The system shall have the capability to send alert signal to an indicator light, for visual notification of alarm state. Such device must have the ability to visually distinguish between a call from the bath and other calls and contain a Form C Relay with Normally Open and Normally Closed dry contacts. Such light must be re-set-able by acknowledgement of device in room.
 - The system shall have the ability to escalate alert calls to specific pagers if the alert is not responded to in a specified time period.
 - The CMS shall have the capability of auto-logging alarms.
 - System shall have the capability to acknowledge/cancel alarms from the transmitter location.
 - All alert devices:
 - Shall be automatically supervised units, sending low battery and supervisory signals to the CMS.
 - Shall operate on battery power.
 - The system shall have the capability to incorporate different wireless alert and transmitting devices into one system. These transmitting devices shall be individually programmed and shall report to the CMS for supervisory and alarm messages. These devices include mobile Personal Help Button (PHB) transmitters, PIR/motion sensor, emergency call buttons and pull cords, check-in notification buttons and universal transmitters.

Central Monitoring Station, (CMS):

The CMS shall consist of a:

- Central Alarm Receiver,
 - Commercial-grade computer
 - Flat Panel Monitor
 - Mouse
 - Printer
 - Microsoft® Windows™ XP Operating System
 - Uninterruptible Power Supply
 - Anti-virus software
 - Resident Safety Software
-
- The CMS shall be equipped with and powered through an Uninterruptible Power Supply (UPS) which is to provide a temporary power source in the event of momentary power loss.
 - The CMS shall be equipped with a printer capable of printing all system and transmitter alarm reports and resident data.
 - System shall support both Attended and Unattended modes.
 - Each alert shall be logged in a file that allows for review, inquiry and printing. Reports must include the ability to sort alarms by different parameters.

System Redundancy

- System shall provide multiple levels of redundancy focused on the delivery resident and system alerts to staff responders. A customizable, three-level escalation function shall continue to send resident or system alerts to staff or designated contact until the call is closed at the monitoring station or at the point of alert generation. The system shall have the capability to send help calls to on-site staff as well as off-site contacts through voice or e-mail or other means.
- System computing device shall employ the use of two (2) RAID-2 configured hard drives to ensure data integrity in the event of a hard drive failure.
- System must automatically restart the resident safety application if closed, and provide a specific, operator acknowledged on-screen alert that indicates the implications of system shutdown prior to closing the resident safety application.
- The system shall have a back-up paging functionality in which the central alarm receiver will process alert calls in the event of CPU failure.

Redundancy - Resident Alert Escalation

- Resident alerts shall be managed by a multilevel call escalation engine. The escalation engine shall provide for the ability for the system to notify up to two other caregivers or groups of caregivers of a resident's need for assistance should the first caregiver fail to respond or acknowledge a call.
- Staff notification shall not be limited to on-site staff alert devices. The system shall have the ability to send an e-mail message, text message (via email) to a mobile phone, voice message to a mobile or land phone or call a public pager with the intention of notifying not only the local staff but also site management, corporate management or a call center in the case of a delayed response to a resident alert.

Redundancy - Integrated Off-Site monitoring

- System shall have the ability to integrate with an off-site call center to send a resident alert or detected system trouble.
- Call center protocol shall stipulate that once the call is received, the Personal Response Associate (operator) will follow a community-prescribed protocol to notify the designated responder, and also confirm that the resident has been assisted in "closed-loop" fashion.
- If call center is unable to contact a community responder to address the resident alert, call center will call local emergency services for response and will confirm resident contact with responding emergency services party.
- The call center shall be exclusively dedicated to handling distress calls from seniors.

Redundant Protection and Continuous System Monitoring

All critical system components shall be in constant communication with each other. If an error is detected, System shall report the error to community staff or the Call Center. Key system components shall buffer alarms and/or take over staff notification if a system malfunction occurs.

- **CMS - Central Alarm Receiver**
The CMS shall employ the use of a Central Alarm Receiver (CAR). The CAR shall:
 - Manage the wireless/wired communication infrastructure,
 - Monitor that all system devices are present and functioning
 - Receive, process and forward signals transmitted over the communication network to the main software application for processing.
- The CAR shall be protected by watchdog electronics which allow it to automatically reset if an error is detected.
- If the CAR should malfunction:
 - Wireless links shall buffer all alarms until the CAR is restored to working order and forward alarms to the CAR upon restoration of function.
 - Should the off-site monitoring function be enabled, the PC/Software application shall notify the call center of the system issue and send an alert to the proper maintenance contact.

Redundancy - Central Monitoring Station – PC and Software

- The PC and Software component of the CMS shall receive alarms and system status reports from the Central Alarm Receiver. The application shall store the information in a Resident Safety Database for future reporting and also send the appropriate information to community staff for action.
- The Software shall run on a commercial PC platform. In addition to the following, The PC shall have a manufacturer-guaranteed 5-year replacement parts warranty.
- **Protection**
 - The Resident Safety PC shall include a system watchdog which will restart the software application if an error is detected in the software function, or if the software is accidentally closed.
 - PC failure – In the remote chance that the watchdog fails to restore the Resident Safety PC to correct operation, Staff notification shall be transferred to the Central Alarm Receiver for back-up alert paging.
 - The PC shall be equipped with dual hard drives arranged in a RAID-2 configuration. All data shall be written simultaneously to both drives – maintaining a real-time back-up of all system data.
 - If the primary hard drive shall fail, the system shall generate a staff alert, and then automatically re-boot from the second, mirrored drive. During the re-boot, staff notification shall be transferred to the Central Alarm Receiver.

Redundancy - System Network Backbone - Alarm Buffered and Supervised

The system network shall consist of Wireless Receivers which receive signals from all alert devices, and Wireless Links - which collect information from Wireless Receivers and forward the information to the Central Alarm Receiver.

- **Protection**
 - **Supervision** – The system shall employ a method by which both Wireless Links and Wireless Receivers are supervised by the CAR. In the event of a failure, the Central Alarm Receiver shall notify staff through software

- escalation engine.
- Alarm Buffering – Wireless Links shall store alarms. If the Wireless Link is unable to communicate with the Central Alarm Receiver, the Link shall store all alarms until communication is restored.

Redundancy - Staff Communication

System shall send alerts to staff through either a paging transmitter or other proprietary phone system. To ensure communication, the Central Alarm Receiver shall forward alerts as follows if the PC/software is unavailable to process calls.

- Protection
 - Proprietary Phone System - Main Control Unit fails
 - Staff phone shall display "System Unavailable"
 - Unanswered calls are forwarded by the software escalation engine to e-mail, text or voice message through land line or Ethernet connection.
 - Paging Transmitter
 - Unanswered calls are forwarded by the software escalation engine to e-mail, text or voice message through land line or Ethernet connection.

Redundancy - Remote System Monitoring

- System shall employ use of a mechanism that allows connectivity to a primary (not 3rd party) Call Center capable of monitoring system signals indicating the health of the Resident Safety System.
- Call Center shall notify either a designated community responder or a local service technician of specific system issues which may compromise the system's ability to detect and report distress calls.
- The mechanism shall be capable of providing status signals regarding:
 - PC/Software
 - Central Alarm Receiver
 - Resident Safety Back-Bone
 - Resident Pull Cords
- The connection mechanism shall also maintain connectivity with the call center in the following manner:
 - System shall send a signal to the Call Center every half hour. If the Call Center does not receive 2 signals in a row, the call center will immediately contact the community.
 - The on-site system callout mechanism shall maintain an electronic communication "ping" link with the resident safety PC/software. If the callout mechanism fails to receive a ping from the PC/software as scheduled, callout mechanism will notify the Call Center.

Miscellaneous

- Personal Help Button (pendant or "PHB")
 - PHB shall be waterproof for swimming and bathing and utilize an integrated



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- mechanical design to prevent against accidental button depression.
- Warranty
 - System warranty shall be extendable for up to 7 years
 - Warranty to include software upgrades, extended hardware warranty, training service and support.

Agency Approvals

System shall carry the following industry certifications:

- UL 1069 – 7th edition – Requirements for Hospital Signaling and Nurse Call Equipment

Also See

- Philips Range Tester Manual
- Philips RS-485 Wiring Guidelines
- Philips Backbone and Wandering Power Supply Manual