

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

### Request for p

MCH11056

PA	GE :	3
	1	

ROBERTA WAGNER 304-558-0067

RFO COPY TYPE NAME/ADDRESS HERE Joe Boggs & Associates, Inc. PO Box 771 Charleston, WV 25323

HEALTH AND HUMAN RESOURCES BPH - OMCFH

MATERIALS MANAGEMENT 900 BULLITT STREET

CHARLESTON, WV

304-558-3417 2530

ADDRESS CORRESPONDENCE TO ATTENTION OF

DATE PRIN	ITED TER	MS OF SALE	SHIP VIA	<u> </u>	FOB:	FREIGHT TERMS
08/05/	2010			D ODER	ENG BIME O	1:30PM
BID OPENING DATE	09/02/2	1000000000000000000000000000000000000		D OPEN.		AMOUNT
LINE	QUANTITY	UOP CAT NO:	ITEM NUMBER	Š	UNIT PRICE	AMOUN
	OPI	EN-END BLAI	KET CONTRACT			
0001	200	T	193-88-00-001	776	\$1.75 T OR EQUAL	\$350.00
	ONE STEP HCG	URINE/SER	M PREGNANCY T	LEO L	1 OK BOOKE	
	25 TEST/KIT, INFOLAB CATA	FORMAT: CA	SSETTE C-202-25 OR I	EQUAL HERE	\$1.75	42.75
0002	1.500		193-88-00-001 TM PREGNANCY	rest ka	\$1.75 T OR EQUAL	\$2,625.00
	50 TEST/KIT	FORMAT: CA	SSETTE HC-202-50 OR 1		\$1.75	87.50
		(BULK) 20	TO 40 OR 25 To	O 50 TE	STS/BOX. \$1.75	70.00
	THE ACCEPTAB	LE LEVEL O REFLECT A RAND OR VE		Y AND A FAVOR S WHO A	ARE NOT	OD SEP-1 P 1: 30
		SEER	EVERSE SIDE FOR TERMS /			
SIGNATURE	1 -16		TELEPH		345-1396	TE 8-31-10
TITLE		FEIN 55-066-46	39		ADDRESS CHAN	GES TO BE NOTED ABOVE
L CEO (	WEN DECRONDING	TO DECLINE	BT NAME AND ADDE	RESS IN S	PACE ABOVE LAB	ELED 'VENDOR'



VENDOR

RFQ COPY

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

### Request for Quotation

MCH11056

PAGE 2

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER

TYPE NAME/ADDRESS HERE

Joe Boggs & Associates, Inc.

Joe Boggs & Associates, Inc. PO Box 771 Charleston, WV 25323

HEALTH AND HUMAN RESOURCES
BPH - OMCFH
MATERIALS MANAGEMENT
900 BULLITT STREET
CHARLESTON, WV
25301 304-558-3417

DATE PRINTED	TERMS OF SAL	F	SHIP VIA	FOB.	FREIGHT TERMS
08/05/2010					
BID OPENING DATE:	09/02/2010	200000000000000000000000000000000000000	BID C	DENING TIME 0	.30PM
LINE QU	ANTITY UOP	CAT. NO	ITEM NUMBER	UNITPRICE	AMOUNT
		100000000000000000000000000000000000000			
			ATE AND INCLUDE ATIONS. FAILURE	PEKITNENI	Freight Juchded
1	,		ERNATES MAY BE	TO EKOATDE	1.000
	i i		THE STATE RESERV	ROUNDS FOR	Iled
				R SPECIFICATIONS	Tucled
			ION 148-1-4(F)	F THE WEST	
1 1			LES AND REGULATI		
MAY BE	REQUIRED TO	SUBN:	IT SAMPLES PRIOR	TO BID AWARD.	
· •			ES TO BE APPROVE	D BY PROGRAM	
pirect	OR, PRIOR TO	AWARI	D	·	
EXHIBI	.T 3			,	
TTPP C	NE COMPUSA CO.	TUT	S CONTRACT BECOM	CC CCCCCTTTC	
1 :	l I		S CONTRACT BECOME EXTENDS FOR A PE		
			SONABLE TIME" TH		
	i i		EW CONTRACT OR R		
t I		· f		E" PERIOD SHALL	
NOT EX	CEED TWELVE	(12)	MONTHS. DURING	THIS "REASONABLI	3 ∤
TIME"	THE VENDOR N	IAY TEI	RMINATE THIS CON	TRACT FOR ANY	
1		THE I	DIRECTOR OF PURC	HASING 30 DAYS	
WRITTE	EN NOTICE.		· ·		
1			ONS ARE STIPULAT	1	
			NT, THE TERMS, C FIRM FOR THE LIF		
CONTRA	1	ו איני	TIRE FOR THE DIE	E OF THE	
don't lo					1
RENEWA	L: THIS CONT	RACT	MAY BE RENEWED U	PON THE MUTUAL	
WRITTE	EN CONSENT OF	THE S	SPENDING UNIT AN	D VENDOR,	
			OR OF PURCHASING	THIRTY (30)	
I I	RIOR TO THE			H RENEWAL SHALL	
1		1 1	HE TERMS AND CON		
1		AND S	HALL BE LIMITED	TO TWO (2) ONE	
1 1 '	CAR PERIODS.				
	<u> </u>	SEE REV	ERSE SIDE FOR TERMS AND CO	l NDITIONS	_ 1
SIGNATURE ()	B	<u></u>	TELEPHONE	DATI	8-31-16
TITLE	FEIN FF	VC 1601	304-345-	· · · · · · · · · · · · · · · · · · ·	
// CEO	<b>/</b> 55-0	066-4639			ES TO BE NOTED ABOVE
WHEN RES	PONDING TO REQ	INSERT	FNAME AND ADDRESS	IN SPACE ABOVE LABE	LED 'VENDOR'



DOCZMA

RFQ COPY

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

### Request for Quotation

MCH11056

PA	GE	
	_	

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER

TYPE NAME/ADDRESS HERE
Joe Boggs & Associates, Inc.
PO Box 771
Charleston, WV 25323

HEALTH AND HUMAN RESOURCES
BPH - OMCFH
MATERIALS MANAGEMENT
900 BULLITT STREET
CHARLESTON, WV
25301 304-558-3417

08/05/	<u> </u>		MS OF SAL		• • • • • • • • • • • • • • • • • • •	HP VIA		0.6	FREIGHT LERWS
BID OPENING DATE		9/02/2	2010			PTD C	DENTIC	TIME 01	- 2.0 DM
LINE		NTITY	UOP	CAT.	ITEM	NUMBER		TPRICE	AMOUNT
	CANCELI RIGHT TO NOTICE SUPPLIF TO THE OPEN MA AUTHORI MARKET, ESTIMAT	LATION: TO CANC TO THE ED ARE SPECIE ARKET ( IZE A S WITHO	THE EL THE OF AN CICATI CLAUSE SPENDI OUT THE	IIS CO OOR II I INFI ONS C II THI ING UN IE FII PECIFI	CTOR OF INTRACT THE CO ERIOR QU OF THE I DIRECT UIT TO I LING OF LED ON T	PURCHASIN IMMEDIATE DMMODITIES JALITY OR SID AND CO FOR OF PURCHASE OF A REQUISICHES CONTE	IG RESER LY UPON AND/OR DO NOT ONTRACT CHASING ON THE OT TION OR	VES THE WRITTEN SERVICES CONFORM HEREIN. MAY PEN COST	
	CAUSES PORTATI OF WORK	(INCLUION OR	DING AN UN UANTI	BUT NIANTIO	OT LIMI IPATED LISTED	ITED TO DE INCREASE IN THE RE	LAYS IN IN THE QUISITI	TRANS- VOLUME ON ARE	
	THE STA THAT TH ORDEREL	ATE SPE IE CONT ) FOR I	NDING RACT ELIVE	UNIT SHALI RY DU	. IT I COVER RING TH	ESTIMATES S UNDERST THE QUANT IE TERM OF QUANTITIE	OOD AND ITIES A THE CO	AGREED CTUALLY NTRACT,	
	WRITTEN THE VEN THE ORI VENDOR MAILED	I STATE IDOR FO IGINAL AS AUT TO THE	CONT R COM COPY HORIZ PURC	RACT MODIT OF TH ATION HASIN	ORDER ( IES COV IE WV-39 FOR SH	INIT(S) SH (FORM NUME VERED BY T O SHALL BE HIPMENT, A GION, AND	ER WV-3 HIS CON MAILED SECOND	9) TO TRACT. TO THE COPY	
	FOR BAN CALLY N ORDER.	KRUPTO	Y PRO D VOI	TECTI D, AN	ON, THI D IS TE	VENDOR/CO	T IS AU WITHOUT	TOMATI- FURTHER	
SIGNATURE	Z B	THE FIND	COMI	SEE RE	VERSE SIDE FO	TNED IN TO DETERMS AND CONTENTS		DATE	8-31-10
TITLE		FE	55_C	166 160				DRESS CHANGE	S TO BE NOTED ABOVE
	CO HEN RESP	ONDING		066-463 , INSER		ND ADDRESS	IN SPACE A	ABOVE LABEL	.ED 'VENDOR'



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

### Request for

PAGE	0.00
4	

146		WITH A THE RELATED BY		
ADDRE	SS CORRES	PONDENCE	DATIEN	HON OF
ACT.				
4000000	TATA CINTER	,		
ROBERTA	MAGNER			
104 550	0007			
304-558 <sup>1</sup>	· UUb /			

RFQ COPY TYPE NAME/ADDRESS HERE

Joe Boggs & Associates, Inc. PO Box 771 Charleston, WV 25323

HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT

900 BUILITT STREET

CHARLESTON, WV

25301 304-558-3417

DATE PRINTED	TERMS OF SAL		SHIP VIA	1000000		
08/05/2010						
BID OPENING DATE:	09/02/2010		RTD	OPEN		:30PM
LINE QUA	NTITY UOP	CAT, NO	ITEM NUMBER		UNITPRICE	AMOUNT
						1
\$HALL S	SUPERSEDE AN	MA YI	ALL SUBSEQUENT	TER	MS AND	
CONDIT:	IONS WHICH N	IAY APP	EAR ON ANY ATT	ACHE	D PRINIED	
DOCUME	NTS SUCH AS	PRICE	LISTS, ORDER F	TATOT	TOTAC ANV	ŀ
AGREEM	ENTS OR MAIN	TENANC	E AGREEMENTS,	INCI	ODING ANI	
ELECTRO	ONIC MEDIUM	SUCH A	S CD-ROM.			
77777 0	4/11/2007			10000		
REV. 04	4/11/2001		•			
				İ		
						1
		NOTIC	E	\$1 12 13 13 13 13 13 13 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	5 6	
				l hing		ì
AN ORI	GINAL, SIGN	D BID	MUST BE SUBMIT	'TED	TO:	
	•					•
	EPARTMENT OF					1
	urchasing Di	vision				İ
. B	UILDING 15	<u> </u>		138913	- 1	
	019 WASHING					
C:	HARLESTON, V	W 253	05-0130	STATE OF THE PERSON NAMED IN COLUMN TO STATE OF THE PERSO		
<u> </u>			CHION MOUTD		DDDDCTATED	
PLEASE	NOTE: A COL	OUT C T	CE COPY WOULD NFORMATION ON		FACE OF	
BIDS M	OST CONTAIN	THIS IT	MAY NOT BE CO	MST	ERED:	
HE EN	VELOPES OR	1	. THI NOT DE CO			
SEALED	חדם				:	
Jeaned .						
BUYER:		RW-2	2	EHE	:	
RFQ. N	o.:		.1056	1 200	; ;	
	ENING DATE:		2010	CHAMMACATA		
	ENING TIME:	1:30	P.M.		it i	
					\$1.75	\$2,975.00
A CONV	ENIENCE COP.	ă молП	BE APPRECIATE ASE SIDE FOR TERMS AND C	iLI.	<u> </u>	1-95
	7	SEE REVE	HSE SIDE FOR TEHMS AND C	CAULT	DAT	E
SIGNATURE J	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			304	345-1396	8-31-10
TITLE	FEIN	066-4639			ADDRESS CHANG	ES TO BE NOTED ABOVE
/CEO		166 (64)		196	PACE ABOVE LABE	



TITLE

CEO

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

### Request for

AFÉ NUMBER

304-558-3417

ADDRESS CHANGES TO BE NOTED ABOVE

AUUME	33 COHRESPONDENCE TO AT
- H	
OBERTA	WAGNER

104-558-0067

2530類

304

RFO COPY TYPE NAME/ADDRESS HERE

Joe Boggs & Associates, Inc PO Box 771 Charleston, WV 25323

HEALTH AND HUMAN RESOURCES BPH - OMCFH MATERIALS MANAGEMENT 900 BULLITT STREET CHARLESTON, WV

FREIGHT TERMS FO.8. TERMS OF SALE SHIP VIA DATE PRINTED 08/05/20<u>10</u> BID OPENING DATE: BID OPENING TIME  $01 \cdot 30PM$ 09/02/2010 AMOUNT UNIT PRICE ITEM NUMBER QUANTITY UOP LINE PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID: 304-345-8907 FAX # CONTACT PERSON: Joe Boggs or Ritchie Boggs INOUIRIES Written Questions shall be accepted through close of QUESTIONS | MAY 8 ¥17/2 \$10. BUSINESS ON BE SENT VIA USPS, FAX, COURIER OR E-MAIL. IN ORDER TO ASSURE NO VENDOR RECEIVES AN UNFAIR ADVANTAGE, NO \$UBSTANTIVE QUEST ONS WILL BE ANSWERED OR LLY. IF POSSIBLE, E-MAIL QUESTIONS ARE PREFERRED. ADDRESS INQUIRIES TO ROBERTA WAGNER DEPARTMENT OF ADMINISTRATION PURCHASING D‡VISIØN 2019 WASHINGTON STREET EAST CHARLESTON, WV 25311 FAX: 304-558-4115 性-MAIL: ROBERTA.A | WAGNER@WV.GOV THE STATE OF WEST VIRGINIA PURCHASING CARD ACCEPTANCE: CHRENTLY UTILIZES A VISA PURCHASING CARD PROGRAM WHICH THE SUCCESSFUL VENDOR IS ISSUED THROUGH A BANK. MUST ACCEPT THE STATE OF WEST VIRGINIA VISA PURCHASING CARD FOR PAYMENT OF ALL ORDERS PLACED BY NY STATE AGENCY AS A CONDITION OF AWARD. \$,2975.00 SEE REVERSE SIDE FOR TERMS AND CONDITIONS TELEPHONE SIGNATURE 345-8907

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

55-066-4639



MODZW

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

Request	for
Quotati	

RΕ	<b>O NUMBER</b>		
	B	- 1	
N	ស្មារាក	56	
1.	<u> </u>	<u>., , , , , , , , , , , , , , , , , , , </u>	

PAC	ìΕ	43	÷
	6		

ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER 804-558-0067

RFQ COPY TYPE NAME/ADDRESS HERE

Joe Boggs & Associates, Inc. PO Box 771 Charleston, WV 25323

HEALTH AND HUMAN RESOURCES
BPH - OMCFH
MATERIALS MANAGEMENT
1 900 BUILLITT STREET

CHARLESTON, WV 25301

304-558-3417

	_							F.O.B.	****************	FREIGHT TERMS
DATE PRIN	TED	TER	MS OF SALE		SHI	PVIA				
08/05/		<u> </u>	<u> </u>	1		DID	ODEN	ING TI	ME 01	30PM
BID OPENING DATE		09/02/7		CAT.		UMBER	Ϋ́	UNIT PRI		AMOUNT
LINE	QUA	NTITY	UOP	NO.	H-CM-	GWPEA				
	IN THE AND CO AND OT TO POLITIES POLITI	GOVERNI BID HI NDITIOI HER LOO ITICAL IA. II CAL SUI Y INDI NOT PR	S REINS OF CAL GO SUBDITO THE SANIBOLVIS	TUSAL THE I OVERNI VENDO CONS SUCH THE EN	TO EXTERIOR TO COMENT BOLD OF THE REFUSAL E AWARD	ESS THE COUNTY, DIES, THE STATE, NOT WIS OF THE STATE, IN HIS OF THIS	E BID THE CONDITION OF SCHOOL CONDITION OF SCH	S, TER L, MUN SHALL WEST EXTEND O ALL VENDOR SUCH TRACT I	TCIPAL EXTEND THE MUST REFUSA N ANY \$1.75 TOTAL:	\$2,975.00
SIGNATURE )	Al					TELEPHON	304	覆 345-139		8-31-10
1	ic for	m -	FEIN _					***		ES TO BE NOTED ABOVE
TITLE	ceo ై 🆊	7		5-066-	-4639		00 111	585 /	1	
L	WHEN RE	SPONDING	3 TO RF	Q, INSE	RT NAME A	AND ADDRE	SS IN	SPACE AB	OAF TARE	LED 'VENDOR'

Requisition / P.O. No.: MCH11056

Pages

WV-36 (Rev. 01/01/07)

### STATE OF WEST VIRGINIA

DIAIL OF MEDITALISM	12:	· · · · · · · · · · · · · · · · · · ·
DUDGUACE CONTINUATION CHEET	File:離	Acct. No.:
PURCHASE CONTINUATION SHEET	File:    RW22	MULTIPLE
Vendor: Toe Boggs & Assoc P.O. Date:	Spending Unit:	
Vendor: <u>Joe Boggs &amp; Assoc</u> P.O. Date:	WVDHHR/BPH/	DMCFH/FPP

vendor:ز			WVOHHR/BP	H/OMCFH/FPP	
Item No.	Quantity	Description		Unit Price	Amount
		SPECIFICATIONS FOR THE ONE STEP HCG URINE/SERUM PRE TEST KIT 25 TEST KIT AND 50 TEST KIT:	GNANCY	\$1.75	\$2,975.00
		MINIMUM SPECIFICATIONS THAT MUST BE MET:	14 14 14 14 14 14 14		
		A MONOCLONAL/POLYCLONAL ANTIBODY ENZYME IMMUNOAS THE QUALITATIVE DETERMINATION OF HUMANCHORIONICGONADOTROPHI (HCG) 50mMIU/ML OR LES SENSITIVITY URINE OR SERUM.			
		MUST BE FDA APPROVED COMBINATION KIT FOR TESTING EIT OR SERUM.	HER URINE		
		TEST KIT MUST BE A ONE STEP ASSAY PROCEDURE; TEST KIT REQUIRE NO PRETREATMENT OF SAMPLE OF REAGENTS OR RECONSTITUTION OF ANY KIT COMPONENT.	WILL		
•		PROCESSING ITEM SHALL NOT EXCEED 5 MINUTES.			
		KIT MUST HAVE CONTROL/END OF ASSAY INDICATOR.			
		SHELF LIFE MUST BE GUARANTEED FOR 12 MONTHS; ROOM TEMPERATURE STORAGE OPTIMAL			
		PACKAGING MUST BE (BULK) 20 TO 40 OR 25 TO 50.	<b>新沙型</b>		
		COMPACT KIT MUST CONTAIN ALL SUPPLIES NEEDED TO RUN	TEST.		
		EXTERNAL/QUALITY ASSURANCE CONTROLS WILL BE PROVID WEST VIRGINIA STATE OFFICE OF LABORATORY SERVICES.	ED BY THE		
		SHIPPING AND HANDLING MUST BE INCLUDED IN COST PER TI	EST.		
		ALL ITEMS OF SPECIFICATIONS ARE MANDATORY. VENDORS ! ALTERNATE PRODUCTS MUST SUBMIT PERTINENT LITERATU PERTAINING TO PRODUCTS AND MAY BE REQUIRED TO SUBM SAMPLES PRIOR TO BID AWARD. ALTERNATE PRODUCT SAMP APPROVED BY PROGRAM DIRECTOR.	RE		
		PROGRAM DIRECTOR TO EVALUATE BIDS PRIOR TO BID AWAF	<b>RD</b> .		
		PRICES MUST BE FIRM 12 MONTHS FROM DATE OF CONTRAC WITH OPTION TO RENEW CONTRACT FOR TWO (2) ONE (1)YEA PERIODS.			
		QUANTITIES LISTED ARE APPROXIMATES ONLY. QUANTITIES ONLY BE MORE OR LESS DURING THE CONTRACT PERIOD.	ORDERED		
		OMCFH/FAMILY PLANNING PROGRAM IS TITLE 10 PHS ELIGIBL	E.		
		CURRENT CONTRACT EXPIRES: SEPTEMBER 30, 2010.	100		
		CONTRACT PERIOD: OCTOBER 1, 2010 - SEPTEMBER 30, 2011			
		ACCOUNT NUMBERS:			
		5360-2011-0506-099-037 5360-2011-3544-099-375 0407-2011-0506-575-037 0407-2011-3010-575-375 8750-2011-0506-096-037-16621 8750-2011-3010-096-375-1662	<u>varinteedestamineestaminingstatistamineestavatistamineestavatistamineestavatistamineestavatistamineestavatista</u>		
			32 E ST 11 11 11 11 11 11 11 11 11 11 11 11 11		
			Personal property of the second secon	!	
	1		N/A		

## COST SHEET FOR MCH11056

<del></del>	Т		-	$\neg$
	2	<b>1-7</b>		Item#
	1500 EA	200 EA	QUANTITY	Apprx. Annual Usage
TOTAL COST	ONE STEP HCG URINE/SERUM PREGNANCY TEST	ONE STEP HCG URINE/SERUM PREGNANCY TEST		DESCRIPTION
	\$1.75	\$1.75		<u>UNIT PRICE</u>
\$2,975.00	\$2,625.00	\$350.00		TOTAL COST

order. Vendor must submit an original itemized invoice for order. Payment will be made in arrears after receipt of each completed Award will be based on the lowest cost per line item who meets specifications.

### hCG

### ⊮e Step Pregnancy Test Device (Urine) Package Insert

id, one step test for the qualitative detection of n chorionic gonadotropin (hCG) in urine.

ofessional in vitro diagnostic use only.

Category

Waived

## INTENDED USE

CG One Step Pregnancy Test Device (Urine) is a chromatographic immunoassay for the qualitative ion of human chorionic gonadotropin (hCG) in to aid in the early detection of pregnancy.

### SUMMARY

n chorionic gonadotropin (hCG) is a glycoprotein me produced by the developing placenta shortly fertilization. In normal pregnancy, hCG can be ed in both urine and serum as early as 7 to 10 after conception. 1-4 hCG levels continue to rise very 1, frequently exceeding 100 mIU/mL by the first d menstrual period, 2-4 and peaking in the 100,000-30 mIU/mL range about 10-12 weeks into ancy. The appearance of hCG in both the urine and soon after conception, and its subsequent rapid 1 concentration during early gestational growth, it an excellent marker for the early detection of ancy.

CG One Step Pregnancy Test Device (Urine) is a lest that qualitatively detects the presence of hCG in specimen at the sensitivity of 25 mlU/mL. The illizes a combination of monoclonal and polycional dies to selectively detect elevated levels of hCG in At the level of claimed sensitivity, the hCG One Pregnancy Test Device (Urine) shows no crossity interference from the structurally related protein hormones hFSH, hLH and hTSH at high logical levels.

### PRINCIPLE

CG One Step Pregnancy Test Device (Urine) is a chromatographic immunoassay for the qualitative ion of human chorionic gonadotropin (hCG) in o aid in the early detection of pregnancy. The test

utilizes a combination of antibodies including mouse monoclonal anti-hCG antibodies and goat polyclonal anti-hCG antibodies to selectively detect elevated levels of hCG. The assay is conducted by adding a urine specimen to the specimen well of the test device and observing the formation of colored lines. The specimen migrates via capillary action along the membrane to react with the colored conjugate.

Positive specimens react with the specific colored antibody conjugates and form a colored line at the test line region of the membrane. Absence of this colored line suggests a negative result. To serve as a procedural control, a colored line will always appear at the control line region if the test has been performed properly.

### REAGENTS

The test device contains anti-hCG particles and anti-hCG coated on the membrane.

### PRECAUTIONS

- For professional *in vitro* diagnostic use only. Do not use after the expiration date.
- The test device should remain in the sealed pouch until use.
- All specimens should be considered potentially hazardous and handled in the same manner as an infectious agent.
- The test device should be discarded in a proper biohazard container after testing.

## STORAGE AND STABILITY

Store as packaged in the sealed pouch at 2-30°C. The test device is stable through the expiration date printed on the sealed pouch. The test device must remain in the sealed pouch until use. **DO NOT FREEZE**. Do not use beyond the expiration date.

# SPECIMEN COLLECTION AND PREPARATION

A urine specimen must be collected in a clean and dry container. A first morning urine specimen is preferred since it generally contains the highest concentration of hCG; however, urine specimens collected at any time of the day may be used. Urine specimens exhibiting visible precipitates should be centrifuged, filtered, or allowed to settle to obtain a clear specimen for testing.

## Specimen Storage

Urine specimens may be stored at 2-8°C for up to 48 hours prior to testing. For prolonged storage, specimens may be frozen and stored below -20°C. Frozen specimens should be thawed and mixed before testing.

### MATERIALS

## Materials Provided

- Test devices
- Disposable specimen droppers
- Package insert

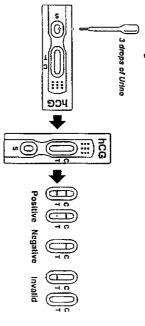
# Materials Required But Not Provided

- Specimen collection container
- lmer

## DIRECTIONS FOR USE

Allow the test device, urine specimen and/or controls to equilibrate to room temperature (15-30℃) prior to testing.

- Remove the test device from the sealed pouch and use it as soon as possible.
- Place the test device on a clean and level surface. Hold the dropper vertically and transfer 3 full drops of urine (approx. 100 μL) to the specimen well (S) of the test device, and then start the timer. Avoid trapping air bubbles in the specimen well (S). See the illustration below.
- Wait for the red line(s) to appear. The result should be read at 3 minutes. It is important that the background is clear before the result is read.



Note: A low hCG concentration might result in a weak line appearing in the test region (T) after an extended period of time; therefore, do not interpret the result after 10 minutes.

## INTERPRETATION OF RESULTS

(Please refer to the illustration.)

**POSITIVE:** Two distinct red lines appear. One line should be in the control region (C) and another line should be in the test region (T).

эn (Т). ATIVE: One red line appears in the control region No apparent red or pink line appears in the est

edure and repeat the test with a new test device. If ediately and contact your local distributor. nost likely reasons for control line failure. Review the imen volume or incorrect procedural techniques are ALID: Control line fails to appear. Insufficient problem persists, discontinue using the test kit

rmined by this qualitative test. present in the specimen. However, neither the Te: The intensity of the red color in the test line on (T) will vary depending on the concentration of titative value nor the rate of increase in hCG can be

## QUALITY CONTROL

line appearing in the control region (C) is the internal ability to read the test result. est is working properly, the background in the result ground is an internal negative background control. If me and correct procedural technique. A clear edural control. It confirms sufficient specimen nal procedural controls are included in the test. A should be white to light pink and not interfere with

s recommended that a positive hCG control taining ≥25 milU/mL hCG) and a negative hCG rai, state, and local guidelines be followed. y proper test performance. It is recommended that rol (containing "0" mIU/mL hCG) be evaluated to

### LIMITATIONS

morning urine specimen should be collected levels of hCG. If pregnancy is still suspected, a first morning urine specimen should be collected 48 specific gravity, may not contain representative nours later and tested. Very dilute urine specimens, as indicated by a low

pregnancy is still suspected, a first morning urine specimen should be collected 48 hours later and hCG are below the sensitivity level of the test. When False negative results may occur when the levels of

specimen collected 48 hours later. confirmed by retesting with a first morning urine a test result that is weakly positive should be However, because a significant number of first trimester pregnancies terminate for natural reasons, 5 Very low levels of hCG (less than 50 mIU/mL) are present in urine specimen shortly after implantation.

trophoblastic neoplasms including testicular tumors. including trophoblastic disease and certain non-A number of conditions other than pregnancy

> prostate cancer, breast cancer, and lung cancer, cause elevated levels of hCG. Therefore, the presence of hCG in urine specimen should not be used to diagnose pregnancy unless these conditions have been ruled out.

Ġ This test provides a presumptive diagnosis for pregnancy. A confirmed pregnancy diagnosis should only be made by a physician after all clinical and laboratory findings have been evaluated.

## EXPECTED VALUES

amount of hCG will vary greatly with gestational age and hCG present in their urine and serum specimens. The women and healthy men. Healthy pregnant women have between individuals. Negative results are expected in healthy non-pregnant

sensitivity of 25 mIU/mL, and is capable of detecting pregnancy as early as 1 day after the first missed The hCG One Step Pregnancy Test Device (Urine) has a menses.

# PERFORMANCE CHARACTERISTICS

### Accuracy

and 71 positive results. The results demonstrated a available urine membrane hCG test. The study included Pregnancy Test Device (Urine) to another commercially comparing the results obtained using the hCG One Step A multi-center clinical evaluation was conducted compared to the other urine membrane hCG test. hCG One Step Pregnancy Test Device (Urine) when 100% overall agreement (for an accuracy of >99%) of the 159 urine specimens: both assays identified 88 negative

## Reference hCG Method

Pregnancy Test hCG One Step Positive Negative Positive 7 0 Negative 88 0

## Sensitivity and Specificity

negative (0 mlU/mL hCG) and positive (25 mlU/mL hCG) International Standard. The addition of LH (300 mIU/mL), FSH (1,000 mIU/mL), and TSH (1,000 μIU/mL) to detects hCG at a concentration of 25 mIU/mL or greater specimens showed no cross-reactivity. The hCG One Step Pregnancy Test Device (Urine) The test has been standardized to the W.H.O. Third

## nterfering Substances

The following potentially interfering substances were added to hCG negative and positive specimens. All substances listed in mg/dL unless otherwise noted.

Acetaminophen Acetone Acetone Acetoselicylic Acid Acetosectic Acid Ampicillin Ascorbic Acid Ascorbic Acid Atropine Albumin β-Hydroxybulyrate salt Benzoylecgonine Bilirubin	1,000 20 20 20 20 20 20 20 20 20 20 20 20	Acetaminophen 20 Ethanol 1% Acetaminophen 1,000 Estriol 2 Acetone 1,000 Estriol 2 Acetone 20 Estrone 3-Sulfate 10 Acetoacetic Acid 2,000 Gentisic Acid 2,000 Ampicillin 20 Glucose 2,000 Ascorbic Acid 20 Hemoglobin 1,000 Ascorbic Acid 20 Heroin 1 Albumin 2,000 Methadone 10 Belizoylecgonine 10 Methamphetamine 10 Bilirubin 20 Methanol 10%	1% 20 20 2,000 1,000 10 10
*	20 20 2,000 2,000	Hemoglobin Heroin Ibuprofen Methadone Methamphelamin	ro
Brompheniramine Caffeine	88	Morphine Oxalic Acid	
Cannabinol Chlomiphene	<del>5</del> 5	Phenothiazine Phenylpropanolamine	nine
Cocaine	5	Pregnanediol	
Codeine Cholesterol	500 500	Salicylic Acid Tetracycline	
Creatine	20	Triglycerides	
Dextromethorphan DMSO	5% 5%	Theophylline Urea	
EDTA	8	Uric Acid	
Ephedrine	22		

interfered in the assay. None of the substances at the concentration tested

## BIBLIOGRAPHY

- Batzer FR. "Hormonal evaluation of early pregnancy", Fertil Steril. 1980; 34(1): 1-13
- Ņ Catt KJ, Ml. Dufau, JL Vaitukaitis "Appearance of hCG in
- pregnancy plasma following the initiation of implantation of the blastocyte", *J. Clin. Endocrinol. Metab.* 1975; 40(3): 537-540 Braunstein GD, J Rasor, H. Danzer, D Adler, ME Wade "Serum human chorionic gonadotropin levels throughout normal pregnancy", *Am. J. Obstet. Gynecol.* 1976; 126(6):
- Lenton EA, LM Neal, R Sulaiman "Plasma concentration of until the second week of pregnancy", Fertil. Steril. 1982. human chorionic gonadotropin from the time of implantation
- Ç 37(6): 773-778
  Steier JA, P Bergsjo, OL Myking "Human chorionic gonadotropin in maternal plasma after induced abortion, spontaneous abortion and removed ectopic pregnancy "
  Obstet. Gynecol. 1984; 64(3): 391-394
- gonadotropin and its subunits in hydatidiform mole and chorlocarcinoma", *Obstet. Gynecol.* 1977; 50(2): 172-181 Braunstein GD, JL Vaitukaitis, PP Carbone, GT Ross Dawood MY, BB Saxena, R Landesman "Human chorlonic
- "Ectopic production of human chorionic gonadotropin by neoplasms", Ann. Intern Med. 1973; 78(1): 39-45

Eff. Date: 2007-09-11 DN: 1155085701

K041946

### AUG 1 6 2004

### XV. 510(k) Summary

#### **Device Names:**

ACON SPECTRUM Urine/Serum Pregnancy Test Device

#### Common Name:

Pregnancy Test Kit, Professionals

#### Medical Specialty:

Clinical Chemistry

#### Intended Use:

The ACON SPECTRUM Urine/Serum Pregnancy Test Device is for the qualitative detection of human Chorionic Gonadotropin (hCG) in urine and serum to aid in the determination of pregnancy. It is for healthcare professionals only.

### **Device Description:**

The test utilizes a combination of mouse monoclonal antibody conjugated with a proprietary dyebinding system and goat polyclonal antibody to qualitatively detect elevated levels of hCG in urine and serum samples. Test may be done by applying sample and observing visually for the formation of colored lines. After sample application, specimen migrates via capillary action along the components of the test. During migration, hCG molecule in the sample reacts with the monoclonal hCG antibodies-dye conjugate, and also reacts with the polyclonal hCG antibody striped down at the test region of the membrane to form an antibody-antigen-antibody-dye complex as a colored test line. Therefore, a colored line forms in the test (T) region indicates a positive result; while absence of this colored line indicates a negative result.

To serve as a procedural control, if the test has been performed properly, a RED colored zone in the control (C) region will always be cleared to expose a BLUE line, indicating adequate sample volume and proper wicking, regardless of the presence of hCG. The presence of the red dye or absence of the blue control line in the C region indicates that the test result is "invalid".

The ACON SPECTRUM Urine/Serum Pregnancy Test Device qualitatively detects hCG in urine or serum sample with a designated cutoff hCG concentration of 25 mIU/mL. The cutoff concentration of this test has been standardized to the World Health Organization Fourth International Standard for Chorionic Gonadotropin (NIBSC Code: 75/589). The addition of hLH (300 mIU/mL), hFSH (1,000 mIU/mL), and hTSH (1,000 µIU/mL) to negative (0 mIU/mL hCG)

and positive (25 mIU/mL hCG) urine and serum samples showed no interference in correctly read the expected test results.

#### **Clinical Studies:**

A clinical study was conducted in two sites in the U.S. by healthcare professionals with varying educational backgrounds and laboratory experience and demonstrated performance equivalency between the current and the new ACON hCG tests by professionals. A retrospective focus group study on reproducibility and precision also demonstrated high degree of correlation between the current and the new ACON hCG tests. The vast majority of the participants also found the ACON SPECTRUM Urine/Serum Pregnancy Test Device very easy to use, and that they have had no trouble understanding the labeling, reading the instructions, or interpreting the results.

### **Additional Laboratory Studies:**

Additional laboratory study results on performance including specificity, interference substances, urinary pH, urinary specific gravity, dose hook effect, time flexibility, and volume flexibility studies are also included in this submission. These results indicate that the ACON SPECTRUM Urine/Serum Pregnancy Test Device is robust and will give accurate results under many adverse conditions.

### Substantial Equivalency on Performance:

The overall performance data indicate that the ACON SPECTRUM Urine/Serum Pregnancy Test Device is safe, effective and substantially equivalent to the ACON hCG Urine/Serum One Step Pregnancy Test Device (K993065) legally sold on the U. S. market.

### DEPARTMENT OF HEALTH & HUMAN SERVICES

Food and Orug Administration 2098 Gaither Road Rockville MD 20850

### AUG 1 6 2004

Edward Tung, Ph.D. Director of Regulatory Affairs **ACON Laboratories** 4108 Sorrento Valley Blvd San Diego, CA 92121

Re:

k041946

Trade/Device Name: ACON SPECTRUM Urine/Serum Pregnancy Test Device

Regulation Number: 21 CFR 862.1155

Regulation Name: Human chorionic gonadotropin (HCG) test system

Regulatory Class: Class II

Product Code: JHI Dated: July 16, 2004 Received: July 19, 2004

Dear Dr. Tung:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820).

### Page 2

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific information about the application of labeling requirements to your device, or questions on the promotion and advertising of your device, please contact the Office of *In Vitro* Diagnostic Device Evaluation and Safety at (301) 594-3084. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address <a href="http://www.fda.gov/cdrh/dsma/dsmamain.html">http://www.fda.gov/cdrh/dsma/dsmamain.html</a>.

Sincerely yours,

Jean M. Corper MS, DVM. Jean M. Cooper, MS, D.V.M.

Director

Division of Chemistry and Toxicology

Office of In Vitro Diagnostic Device

Evaluation and Safety

Center for Devices and

Radiological Health

Enclosure

### Indications for Use

510(k) Number (if known): KU41946				
Device Name: ACON	SPECTRUM Urine/Serum Pregna	ancy Test Device		
Indications For Use:	Chorionic Gonadotropin (hCG) in	ication the elevated level of human		
Prescription Use	XAND/OR	Over-The-Counter Use		
Prescription Use	art D)	(21 CFR 807 Subpart C)		
(PLEASE DO NOT NEEDED)	WRITE BELOW THIS LINE-CO	ONTINUE ON ANOTHER PAGE IF		
Concurrer	nce of CDRH, Office of In Vitro [	Diagnostic Devices (OIVD)		
	Carof Benery Division Sign-Off  Office of In Vitro Diagnostic Device Evaluation and Safety  510(k) 14041946	Page 1 of <u>1</u>		

### State of West Virginia

### **VENDOR PREFERENCE CERTIFICATE**

Certification and application\* is hereby made for Preference in accordance with **West Virginia Code**, §5A-3-37. (Does not apply to construction contracts). **West Virginia Code**, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the West Virginia Code. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable

1. Application is made for 2.5% resident vendor preference for the reason checked:  Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,  Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,  Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4)
ing the date of this certification; or, Bidder is a partnership, association or corporation resident vendor and has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or 80% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or, Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4)
business continuously in West Virginia for four (4) years immediately preceding the date of this certification, of 60% of the ownership interest of Bidder is held by another individual, partnership, association or corporation resident vendor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,  Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4)
ownership interest of Bidder is held by another individual, partnership, association of corporation resident verticor who has maintained its headquarters or principal place of business continuously in West Virginia for four (4) years immediately preceding the date of this certification; or,  Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4)
maintained its headquarters or principal place of business continuously in twest Virginia for four (4) years infinediately preceding the date of this certification; or,  Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4)
preceding the date of this certification; or,  Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one hundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4)
Bidder is a nonresident vendor which has an affiliate or subsidiary which employs a minimum of one nundred state residents and which has maintained its headquarters or principal place of business within West Virginia continuously for the four (4)
and which has maintained its headquarters or puncipal place of business within vvest virginia continuously for the four (4)
years immediately preceding the date of this certification; or,
2. Application is made for 2.5% resident vendor preference for the reason checked:
Bidder is a resident vendor who certifies that, during the life of the contract, on average at least 75% of the employees working on the project being bid are residents of West Virginia who have resided in the state continuously for the two years
immediately preceding submission of this bid; or,
¥6:
3. Application is made for 2.5% resident vendor preference for the reason checked:  Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an
affire ar subsidion, which maintains its headquarters or principal place of pusiness within west virginia employing a
minimum of and bundred state residents who certifies that during the life of the contract, on average at least 70% of the
employees or Bidder's affiliate's or subsidiary's employees are residents on vivest virginia who have resided in the state
continuously for the two years immediately preceding submission of this big, or,
4. Application is made for 5% resident vendor preference for the reason checked:
Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,
5. Application is made for 3.5% resident vendor preference who is a verteran for the reason checked:
Distance on individual recident vendor who is a velocation of the Holled States armed forces. (The reserves of the National Outline
and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is
submitted; or,
6. Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:
Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and
purposes of producing or distributing the continuously over the entire term of the project, on average at least severity-five percent of the vendor's employees are
residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
Bidder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the
will be such proference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty
against such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency
or deducted from any unpaid balance on the contract or purchase order.
Business of this partificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and
the
the required business taxes, provided that such information contain the amounts of taxes paid not any other information
deemed by the Tax Commissioner to be confidential.
Under penalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true
and accurate in all respects; and that if a contract is is selected to blodder and wanting contained within this certificate
changes during the term of the contract, Bidder will not the Purchasing Division in writing immediately.
Bidder: se Boggs & Associates, the Signed: Toe Byg
Bidder: Selloggs 47155 ociales the 3ned:
Date: 6-31-10e: / C.60
*Check any combination of preference consideration(s) indicated 6. We which you are entitled to receive.

RFQ No. MCH 11056

### 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: <u>Joe Boggs &amp; Associates</u>	, Inc.
Authorized Signature:	Date:
State of WV	
County of KANALMA , to-wit:	
Taken, subscribed, and sworn to before me this 23 day	of <u>Aug</u> , 20 <u>10</u> .
My Commission expires MAY 8	, 20 <u>3</u> 0.
AFFIX SEAL HERE	NOTARY PUBLIC hour Cayling

