



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
MMB11041

PAGE
1

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

*709063943 919-272-2874
 VENDOR
 INFOLAB INC
 2501 GREENGATE DRIVE
 GREENSBORO NC 27406

SHIP TO
 HEALTH AND HUMAN RESOURCES
 MILDRED MITCHELL-BATEMAN
 HOSPITAL
 1530 NORWAY AVENUE
 HUNTINGTON, WV
 25705 304-525-7801

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
11/23/2010				

BID OPENING DATE: 12/23/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	1	EA		193-12	\$17,600.00	\$17,600.00
IMMONUASSAY CHEMISTRY ANALYZER, TOSOH AIA 360 OR **Extended Warranty: \$12,400.00 for 4 additional years of service. TO PROVIDE ONE CHEMISTRY ANALYZER AND ONE HEMATOLOGY ANALYZER FOR MILDRED MITCHEL-BATEMAN HOSPITAL LOCATED AT 1530 NORWAY AVENUE IN HUNTINGTON, WEST VIRGINIA 25705, PER THE ATTACHED SPECIFICATIONS. CANCELLATION: THE DIRECTOR OF PURCHASING RESERVES THE 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. 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. INQUIRIES WRITTEN QUESTIONS SHALL BE ACCEPTED THROUGH CLOSE OF BUSINESS ON 12/7/2010. 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:						

RECEIVED
 2ND DEC 20 A 10: 35
 PURCHASING DIVISION
 STATE OF WV

SEE REVERSE SIDE FOR TERMS AND CONDITIONS			
SIGNATURE	TELEPHONE	DATE	
TITLE	FEIN	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
MMB11041

PAGE
2

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

VENDOR
 *709063943 919-272-2874
 INFOLAB INC
 2501 GREENGATE DRIVE
 GREENSBORO NC 27406

SHIPTO
 HEALTH AND HUMAN RESOURCES
 MILDRED MITCHELL-BATEMAN
 HOSPITAL
 1530 NORWAY AVENUE
 HUNTINGTON, WV
 25705 304-525-7801

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
11/23/2010				

BID OPENING DATE: 12/23/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
ROBERTA WAGNER DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25311 FAX: 304-558-4115 E-MAIL: ROBERTA.A.WAGNER@WV.GOV THE MODEL/BRAND/SPECIFICATIONS NAMED HEREIN ESTABLISH THE ACCEPTABLE LEVEL OF QUALITY ONLY AND ARE NOT 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. VENDOR PREFERENCE CERTIFICATE THIS TEAM EXHIBIT HAS BEEN REPLACED BY THE ONLINE VERSION WHICH IS AVAILABLE HERE: HTTP://WWW.STATE.WV.US/ADMIN/PURCHASE/VRC/VENPREF.PDF NOTICE A SIGNED BID MUST BE SUBMITTED TO:						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS			
SIGNATURE	TELEPHONE	DATE	
TITLE	FEIN	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
MMB11041

PAGE
3

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

*709063943 919-272-2874
 INFOLAB INC
 2501 GREENGATE DRIVE
 GREENSBORO NC 27406

HEALTH AND HUMAN RESOURCES
 MILDRED MITCHELL-BATEMAN
 HOSPITAL
 1530 NORWAY AVENUE
 HUNTINGTON, WV 25705 304-525-7801

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
11/23/2010				

BID OPENING DATE: 12/23/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
DEPARTMENT OF ADMINISTRATION PURCHASING DIVISION BUILDING 15 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25305-0130 PLEASE NOTE: A CONVENIENCE COPY WOULD BE APPRECIATED. THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED: SEALED BID BUYER:-----RW/FILE 22----- RFQ. NO.:-----MMB11041----- BID OPENING DATE:-----12/23/2010----- BID OPENING TIME:-----1:30 PM----- PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID: (336) 272-0518 ----- CONTACT PERSON (PLEASE PRINT CLEARLY): -Tammy Bridges - Contracts Manager----- tammybridges@infolabinc.com (800) 782-9700						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE	TELEPHONE	DATE
TITLE	FEIN	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
 MMB11041

PAGE
 4

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

VENDOR
 709063943 919-272-2874
 INFOLAB INC
 2501 GREENGATE DRIVE
 GREENSBORO NC 27406

SHIP TO
 HEALTH AND HUMAN RESOURCES
 MILDRED MITCHELL-BATEMAN
 HOSPITAL
 1530 NORWAY AVENUE
 HUNTINGTON, WV
 25705 304-525-7801

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
11/23/2010				

BID OPENING DATE: 12/23/2010 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
0002	1	EA	193-12	HEMATOLOGY ANALYZER, SYSMEX XS1000I OR EQUAL	\$29,749.00	\$29,749.00
***Infolab is quoting a functional equivalent. See Attachment #1 ***						
*** Extended warranty: \$16,676.00 for 4 additional years of service. ***						
0003	2	EA	193-12	EXTENDED ON-SITE REPAIR SERVICE FOR FIVE (5) YEARS	\$29,076.00	\$29,076.00
0004	1	JB	193-12	SHIPPING CHARGES, INSTALLATION AND ON-SITE TRAINING	0.00	0.00
***** THIS IS THE END OF RFQ MMB11041 ***** TOTAL:						\$76,425.00

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE: *James D. Bridges* TELEPHONE: (800) 782-9700 DATE: 12/16/2010
 TITLE: Contracts Manager FEIN: 64-0470300 ADDRESS CHANGES TO BE NOTED ABOVE

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

**STATE OF WEST VIRGINIA
PURCHASE CONTINUATION SHEET**

Page <u>2</u> of <u>4</u> Pages		Requisition / P.O. No.: MMB11041
File: RW22	Acct. No.: 5156-2011-2927-335-072 (3133)	
Spending Unit: WVDHHR/BHMF/MMBH		

Vendor: _____ P.O. Date: _____

Item No.	Quantity	Description	Unit Price	Amount
#1	1 EA	<p>Tosoh AIA 360 Immunoassay Chemistry Analyzer or equal</p> <p>METHOD *Analyzer must use Fluorescence Enzyme Immunoassay</p> <p>DETECTION *Analyzer must have LED illuminant *Analyzer must use non-flow cell/TOP-TOP photometry method</p> <p>THROUGHPUT *Must process 36 tests per hour</p> <p>REACTION TIME *Analyzer must have an Antigen antibody reaction within 10 minutes</p> <p>SAMPLE LOADING CAPACITY *Analyzer must allow 25 samples maximum</p> <p>REAGENT LOADING CAPACITY *Analyzer must allow 25 test maximum</p> <p>TEST FOR EACH SAMPLE *Analyzer must allow 4 Tests per sample</p> <p>SAMPLING *Analyzer must have a Fixed probe with Clot Detection function</p> <p>SAMPLE VESSEL *The Sample Vessel must have a minimum 2mL sample cup *The Sample Vessel must have a Primary tube 12 x 75/100mm, 16 x 75/100mm (diameter & length) maximum</p> <p>INTERFACE RS232C or Equal THE SYSTEM MUST INTERFACE TO ANY LIS SYSTEM. (LABORATORY INFORMATION SYSTEM)</p> <p>CURRENTLY INTERFACED WITH DATA INNOVATIONS</p> <p>MUST ANALYZE FULL TESTING LISTED BELOW: *Thyroid - TSH (Thyroid-Stimulating Hormone, Thyrotropin), TT3 (Total Triiodothyronine), T4 (Total Thyroxine), FT3 (Free Triiodothyronine), FT4 (Free Thyroxine), T-UPTAKE (Level of Thyroid-binding Globulin) *Cardiac Markers - CKMB (Creatine Kinase Isoenzyme Mb), Troponin I 2nd Gen, Myoglobin *Reproductive - Beta-HCG, Estradiol, FSH (Follicle-stimulating hormone), LH II (Luteinizing hormone), Prolactin, Progesterone, Testosterone Antigen 27.29), CA 19-9 (Carbohydrate Antigen 19-9 or Sialylated Lewis (a) antigen)</p>		

**STATE OF WEST VIRGINIA
PURCHASE CONTINUATION SHEET**

Page <u>3</u> of <u>4</u> Pages		Requisition / P.O. No.: MMB11041
File: RW22	Acct. No.: 5166-2011-2927-335-072 (3133)	
Spending Unit: WVDHHR/BHHR/MMBH		

Vendor: _____ P.O. Date: _____

Item No.	Quantity	Description	Unit Price	Amount
#2	1	<p>*Tumor Markers - AFP (Alphafetoprotein Testing) CEA (Carcinoembryonic Antigen) , PSA (Prostate-Specific Antigen), CA 125 (Carcinoembryonic Antigen), 27.29 (Cancer Antigen 27.29), CA 19-9 (Carbohydrate Antigen 19-9 or Sialylated Lewis (a) antigen) *Anemia - Ferritin *Metabolic - Cortisol, C-Peptide, HGH, Insulin, IPTH (Intact Parathyroid Hormone) *Others - Beta-2 Microglobulin, IgE II (Immunoglobulin E), PAP</p> <p>ANALYZER MUST BE COMPACT (TABLE TOP) IN SIZE</p> <p>SYSMEX XS1000i Hematology Analyzer or Equal</p> <p>MODEL *Vendor shall bid an analyzer without an Auto Sampler</p> <p>SYSTEM TO INCLUDE *System shall include All-in-one computer/monitor *System shall include a Bar Code Reader *System shall include a Laser Printer</p> <p>MEASUREMENT PRINCIPLES *System shall provide RBC (Red Blood Cell)/PLT(Platelet) *System shall use Sheath flow direct current, Semiconductor laser flow cytometry and/or Colorimetric methodologies.</p> <p>MUST ANALYZE THE FOLLOWING PARAMETERS:</p> <p>TESTING PARAMETERS *Testing parameters must provide CBC & 5-part Differential *Testing parameters must be all of the following 21 Parameters: WBC (White Blood Cell), RBC (Red Blood Cell), HCG (Human Chorionic Gonadotrophin), HCT (Hematocrit), MCV (Mean Corpuscular Volume), MCH (Mean Corpuscular Hemoglobin), MCHC (Mean Corpuscular Hemoglobin Concentration), RDW-SD (Red Blood Cell Distribution Width - Standard Deviation), RDW-CV (Red Blood Cell Distribution Width - Coefficient Variation), PLT (Platelet Count), MPV (Mean Platelet Volume), NEUT% (Neutrophil%), NEUT# (Neutrophil#), LYMPH% (Lymphocytes%), LYMPH# (Lymphocytes#), MONO% (Monocyte%), MONO#(Monocyte#), EOS% (Eosinophil%), EOS# (Eosinophil#), BASO% (Basophil%), BASO# (Basophil#).</p> <p>THROUGHPUT *Systems must allow a Single Sample Mode 60 samples/hr</p>		

**STATE OF WEST VIRGINIA
PURCHASE CONTINUATION SHEET**

Vendor: _____ P.O. Date: _____

Spending Unit:
WVDHHR/BHMF/MMBH

Item No.	Quantity	Description	Unit Price	Amount
		<p>QUALITY CONTROL *System must process 20 files *System must allow L-J (Levy Jennings Graph)OR XbarM Measurement *System must accommodate Common Quality Control material</p> <p>MACHINE SPECIFICATIONS *Machine must have a Windows XP or equal, operating system. *Machine must allow for storage of 10,000 records with scattergrams *Machine must allow Testing Volumes of up to 60 CBC +DIFF/24hr *Machine must provide Discrete test options for CBC or CBC +DIFF *Machine must use common reagents and quality control material</p> <p>ANALYZER MUST BE COMPACT (TABLE TOP) IN SIZE</p>		
#3	2 EA	<p>Vendor shall provided Extended On-Site Repair Service for Five (5) years to cover the following:</p> <p>CHEMISTRY ANALYZER - Service shall be 100% and will include all parts and labor.</p> <p>HEMATOLOGY ANALYZER - Service shall be 100% and will include parts and labor.</p>		
#4	1 EA	<p>SHIPPING CHARGES</p> <p>Vendor will ship and install analyzers at the Facility. Vendor will ship and install within 4-6 weeks ARO. Vendor shall provide all on-site training within 14 days of installation.</p> <p>AGENCY RESERVES THE RIGHT TO SPLIT THE AWARD.</p> <p>AWARD WILL BE MADE TO THE LOWEST BID, MEETING SPECIFICATIONS, FOR EACH MACHINE .</p> <p>VENDOR MAY INVOICE FOR EQUIPMENT ONCE ALL EQUIPMENT HAS BEEN PROVIDED, INSTALLED AND TRAINING COMPLETED AND ACCEPTED BY THE FACILITY.</p>		

**CHEMISTRY ANALYZER
HEMATOLOGY ANALYZER**

The vendor must provide pricing inclusive to all associated cost for the following items including the cost of delivery.

<u>Item No.</u>	<u>Description</u>	<u>Unit Cost</u>		
1	Chemistry Analyzer	\$ 17,600.00		
2	Hematology Analyzer	\$ 29,749.00		
			(A) Subtotal for Analyzers	\$ 47,349.00
3	5 Year On-Site Extended Warranties			
	Chemistry Analyzer	\$ 12,400.00		
	Hematology Analyzer	\$ 16,076.00		
			(B) Subtotal for Warranties	\$ 29,076.00
4	Shipping Charges			
	Chemistry Analyzer	\$ 0.00		
	Hematology Analyzer	\$ 0.00		
			(C) Subtotal for Shipping	\$

BID GRAND TOTAL \$ 76,425.00

(A+B+C)

[Handwritten Signature]
Signature of Bidder

**AGENCY RESERVES THE RIGHT TO SPLIT THE AWARD.
AWARD WILL BE MADE TO THE LOWEST BID, MEETING
SPECIFICATIONS, FOR EACH MACHINE.**

Contracts Manager 12/16/2010

Title

Date

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) 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,
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 affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; 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 veteran for the reason checked: Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard 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 continuously over the entire term of the project, on average at least seventy-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 requirements for such preference, 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.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid the required business taxes, provided that such information does not contain the amounts of taxes paid nor 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 issued to Bidder and if anything contained within this certificate changes during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.

Bidder: _____ Signed: _____

Date: _____ Title: _____

*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

RFQ No. mmB11041

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 exceeds 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: Penny Hopper / Office Manager

Authorized Signature: *Penny Hopper* Date: 12/16/2010

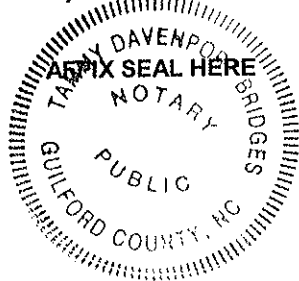
State of North Carolina

County of Guilford, to-wit:

Taken, subscribed, and sworn to before me this 16 day of December, 2010.

My Commission expires 5/11, 2012.

NOTARY PUBLIC *Jenny Davenport Bridges*



ATTACHMENT
P.O.# _____

This agreement constitutes the entire agreement between the parties, and there are no other terms and conditions applicable to the licenses granted hereunder.

Agreed

Signature Date

Title

Company Name

Signature Date

Title

Agency/Division

AGREEMENT ADDENDUM

In the event of conflict between this addendum and the agreement, this addendum shall control:

1. **DISPUTES** - Any references in the agreement to arbitration or to the jurisdiction of any court are hereby deleted. Disputes arising out of the agreement shall be presented to the West Virginia Court of Claims.
2. **HOLD HARMLESS** - Any clause requiring the Agency to indemnify or hold harmless any party is hereby deleted in its entirety.
3. **GOVERNING LAW** - The agreement shall be governed by the laws of the State of West Virginia. This provision replaces any references to any other State's governing law.
4. **TAXES** - Provisions in the agreement requiring the Agency to pay taxes are deleted. As a State entity, the Agency is exempt from Federal, State, and local taxes and will not pay taxes for any Vendor including individuals, nor will the Agency file any tax returns or reports on behalf of Vendor or any other party.
5. **PAYMENT** - Any references to prepayment are deleted. Payment will be in arrears.
6. **INTEREST** - Should the agreement include a provision for interest on late payments, the Agency agrees to pay the maximum legal rate under West Virginia law. All other references to interest or late charges are deleted.
7. **RECOUPMENT** - Any language in the agreement waiving the Agency's right to set-off, counterclaim, recoupment, or other defense is hereby deleted.
8. **FISCAL YEAR FUNDING** - Service performed under the agreement may be continued in succeeding fiscal years for the term of the agreement, contingent upon funds being appropriated by the Legislature or otherwise being available for this service. In the event funds are not appropriated or otherwise available for this service, the agreement shall terminate without penalty on June 30. After that date, the agreement becomes of no effect and is null and void. However, the Agency agrees to use its best efforts to have the amounts contemplated under the agreement included in its budget. Non-appropriation or non-funding shall not be considered an event of default.
9. **STATUTE OF LIMITATION** - Any clauses limiting the time in which the Agency may bring suit against the Vendor, lessor, individual, or any other party are deleted.
10. **SIMILAR SERVICES** - Any provisions limiting the Agency's right to obtain similar services or equipment in the event of default or non-funding during the term of the agreement are hereby deleted.
11. **ATTORNEY FEES** - The Agency recognizes an obligation to pay attorney's fees or costs only when assessed by a court of competent jurisdiction. Any other provision is invalid and considered null and void.
12. **ASSIGNMENT** - Notwithstanding any clause to the contrary, the Agency reserves the right to assign the agreement to another State of West Virginia agency, board or commission upon thirty (30) days written notice to the Vendor and Vendor shall obtain the written consent of Agency prior to assigning the agreement.
13. **LIMITATION OF LIABILITY** - The Agency, as a State entity, cannot agree to assume the potential liability of a Vendor. Accordingly, any provision limiting the Vendor's liability for direct damages to a certain dollar amount or to the amount of the agreement is hereby deleted. Limitations on special, incidental or consequential damages are acceptable. In addition, any limitation is null and void to the extent that it precludes any action for injury to persons or for damages to personal property.
14. **RIGHT TO TERMINATE** - Agency shall have the right to terminate the agreement upon thirty (30) days written notice to Vendor. Agency agrees to pay Vendor for services rendered or goods received prior to the effective date of termination.
15. **TERMINATION CHARGES** - Any provision requiring the Agency to pay a fixed amount or liquidated damages upon termination of the agreement is hereby deleted. The Agency may only agree to reimburse a Vendor for actual costs incurred or losses sustained during the current fiscal year due to wrongful termination by the Agency prior to the end of any current agreement term.
16. **RENEWAL** - Any reference to automatic renewal is hereby deleted. The agreement may be renewed only upon mutual written agreement of the parties.
17. **INSURANCE** - Any provision requiring the Agency to insure equipment or property of any kind and name the Vendor as beneficiary or as an additional insured is hereby deleted.
18. **RIGHT TO NOTICE** - Any provision for repossession of equipment without notice is hereby deleted. However, the Agency does recognize a right of repossession with notice.
19. **ACCELERATION** - Any reference to acceleration of payments in the event of default or non-funding is hereby deleted.
20. **CONFIDENTIALITY**: -Any provision regarding confidentiality of the terms and conditions of the agreement is hereby deleted. State contracts are public records under the West Virginia Freedom of Information Act.
21. **AMENDMENTS** - All amendments, modifications, alterations or changes to the agreement shall be in writing and signed by both parties. No amendment, modification, alteration or change may be made to this addendum without the express written approval of the Purchasing Division and the Attorney General.

ACCEPTED BY:

STATE OF WEST VIRGINIA

VENDOR

Spending Unit: _____

Company Name: Infolab, Inc.

Signed: _____

Signed: _____

Title: _____

Title: Contracts Manager

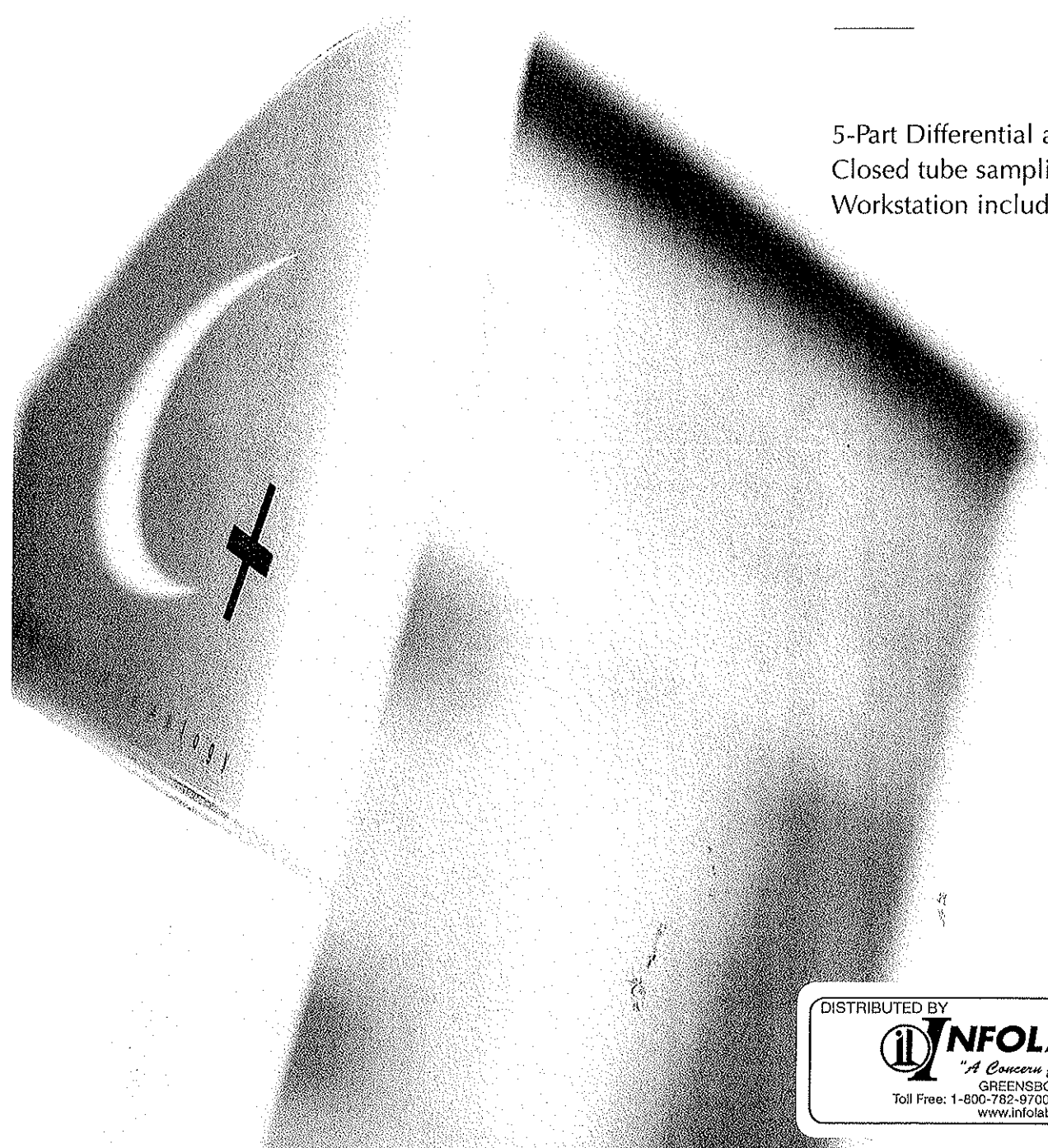
Date: _____

Date: 12/16/2010

ABX Pentra 60 C+

Hematology Analyzer

5-Part Differential analysis
Closed tube sampling
Workstation included



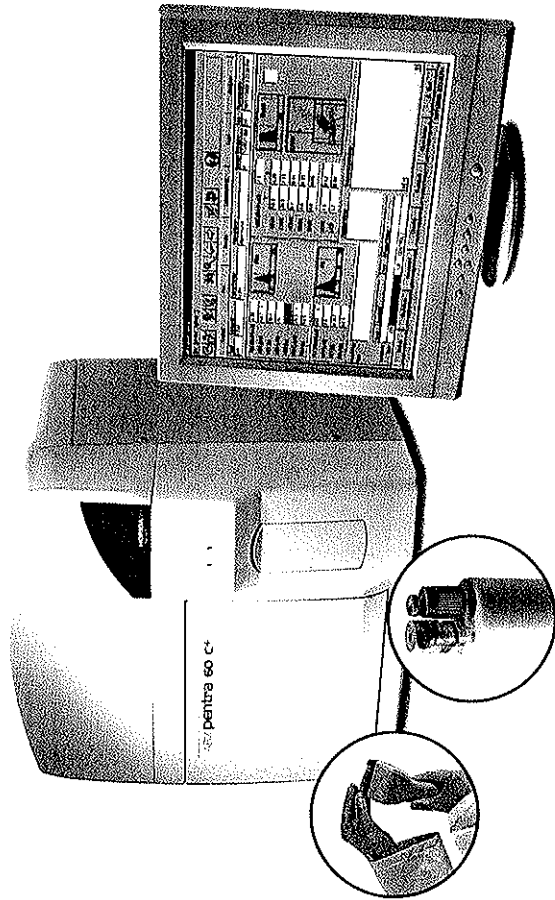
DISTRIBUTED BY

INFOLAB, INC.
"A Concern for the Laboratory"

GREENSBORO, NC
Toll Free: 1-800-782-9700 Fax: 1-336-272-0518
www.infolabinc.com

Pentra 60 C+

Small size. Big impression.



Microsampling of 30 μ L (CBC) or 53 μ L (CBC+DIFF)
 Exceptional results with 30 sample types,
 even very small volumes (Respirator, Oncology, etc.)

Data management on external PC
 Stand alone capability

Windows Platform
 Easy to use

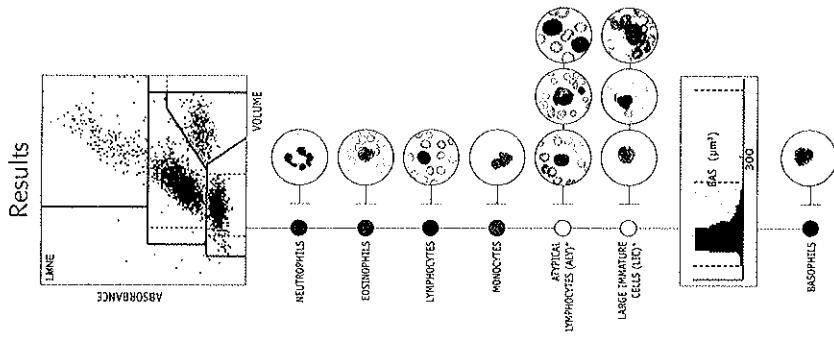
Closed tube sampling
 Reduces biohazard risk

External barcode reader
 100% secure sample identification

Concept and Technology

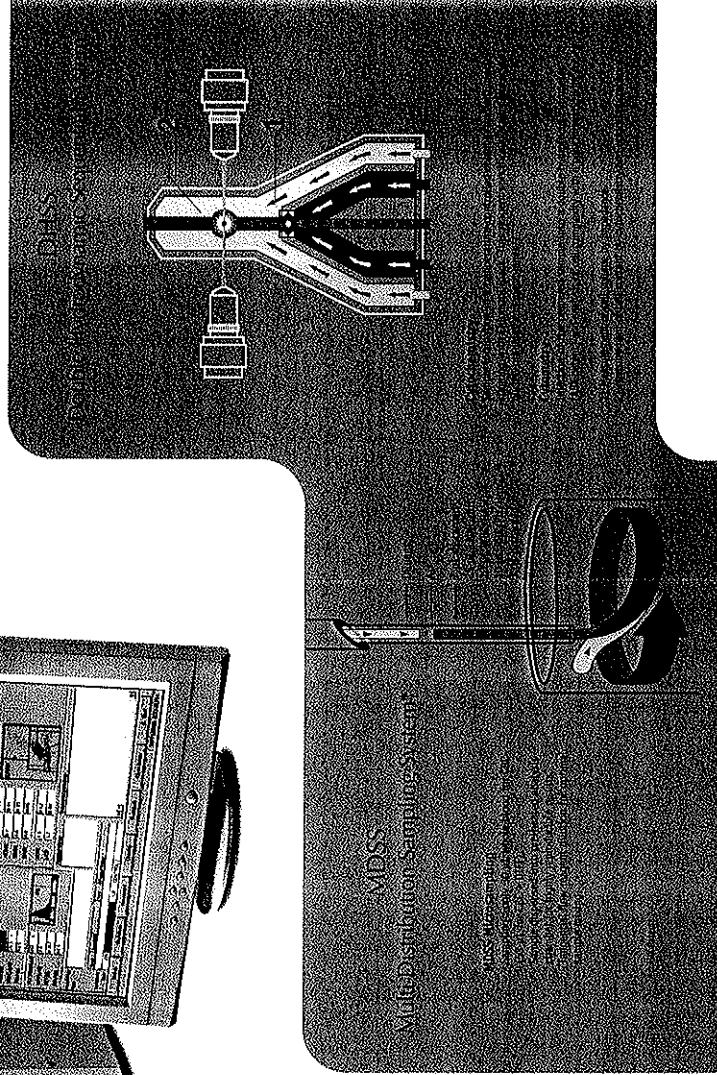
- MDSS*
- DHSS*
- No compressor
- No shear valve, less maintenance

*Bayer Patent

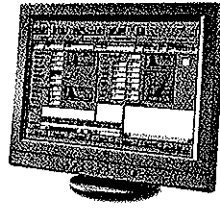


- 26 parameters.
- WBC, RBC and Platelet histograms
- Color matrix for WBC Differential
- Pathological and morphological alarms.
- WBC Differential measured by DHSS technology.
- Basophil measurement performed in a specific channel
- Percentage and absolute value of neutrophils, eosinophils, basophils, lymphocytes and monocytes.
- Determination of 2 additional sub-populations (% and #):
 - Atypical lymphocytes (ALY)*
 - Large immature cells (LIC)*

* For Laboratory Use only (see file: 414 approved)



Pentra 60 C+



Hematology Analyzer Specifications

PHYSICAL SPECIFICATIONS

• DIMENSIONS & WEIGHT:

	Height	Width	Depth	Weight
Analyzer	22.3 in	17.5 in	19 in	77 lbs
	51,6 cm	44,4 cm	48,1 cm	35 Kg

• PRINTER:

Okidata B4250 laser

• THROUGHPUT:

Up to 60 samples/hour

• SOUND PRESSURE LEVEL:

< 60 dBa

• OPERATING TEMPERATURE & HUMIDITY:

16 - 34°C (61 - 93°F) room temperature
Maximum relative humidity 80% for temperature up to 31°C (88°F) decreasing linearity humidity at 40°C (104°F).

• SPECIMEN VOLUME:

CBC Mode 30 µL
CBC + DIFF 53 µL

• POWER REQUIREMENTS:

Power supply from 100 Vac to 240 Vac ± 10%
50 Hz to 60 Hz
Power consumption Analyzer and computer 400 VA

• REAGENTS:

5 reagents only: Diluent
Alphalyse
Cyanide-free lyse (currently not available in USA)
Cleaner
Eosinofix
Basolyse II

METHODS & TECHNOLOGIES

MULTI DISTRIBUTION SAMPLING SYSTEM "MDSS"

• RBC/PLT DETECTION PRINCIPLES

Method Impedance
Aperture diameter 50 µm
Counting depression 200 mb
Counting duration 2 x 5 seconds
Dilution ratio 1/10 000
Reaction temperature 35°C

• HGB MEASUREMENT

Method Photometry
Wavelength 555 nm
Dilution ratio 1/250
Reaction temperature 35°C

• HCT MEASUREMENT

Method Numeric integration

• WBC & BASO COUNT

Method Impedance
Aperture diameter 80 µm
Counting depression 200 mb
Counting duration 2 x 6 seconds
Dilution ratio 1/200
Reaction temperature 35°C

• LEUKOCYTE DIFFERENTIATION

Method Focused-flow impedance
Cytochemistry
Aperture diameter 60 µm
Diameter of the flow 42 µm
Injection duration 12 seconds
Dilution ratio 1/80
Incubation duration 12 seconds
Reaction temperature 35°C

• MCV, MCH, MCHC, RDW, PCT*, PDW*

Calculation parameters

SOFTWARE SPECIFICATIONS

• DATA PROCESSING:

15" Flat Screen LCD
Motherboard: Intel Processor w/ SIS Chipset, On Board audio & video
Capacity: 10,000 results + graphics
OS: Windows NT 4.0 w/Service Pack 6A
PC: Intel Celeron 1.8 GHz (min.)
RAM: 256M min., Hard Disk (40 Gb) min.
Floppy Disk and CD ROM Drive
RS232C
User defined flagging Limits
Transmit patient and QC to LIS connection
Uni & Bi-directional connections
ABX and ASTM interfacing protocol
HemaLink Data Management ready

• QUALITY CONTROL MANAGEMENT:

12 selectable QC files
XB: 60 operator selectable files with statistics (20 samples per file)
Within run
Levey-Jennings graphs
Unlimited QC results storage with HemaLink™

• LOGS:

Reagents, calibration, maintenance, errors, blank cycle

PARAMETERS & PERFORMANCE DATA

• 26 PARAMETERS:

WBC	RBC	PLT
N# & N%	HGB	MPV
L# & L%	HCT	PCT*
M# & M%	MCV	PDW*
EOS# & EOS%	MCH	
BAS# & BAS%	MCHC	
ALY*# & ALY*%	RDW	LIC*# & LIC*%

• LINEARITY: (VERSION V2.3)

Parameters	Linearity range	Visible range**	Units
WBC	0 - 120	120 - 150	10 ⁹ /µL
RBC	0 - 8	8 - 18	10 ¹² /µL
HGB	0 - 24	24 - 30	G/dL
HCT	0 - 67	67 - 80	%
PLT (whole blood)	0 - 1900	1900 - 2800	10 ⁹ /µL
PLT (plt concentrate mode)	0 - 2800	2800 - 3200	10 ⁹ /µL

• PRECISION:

Parameters	%CV	Range
WBC	< 1.5	4.0 - 11.0 x 10 ⁹ /µL
RBC	< 1.5	4.0 - 6.0 x 10 ¹² /µL
HGB	< 1.0	11.0 - 18.0 g/dL
HCT	< 1.5	35 - 55 %
RDW	< 2.0	80 - 100
PLT	< 5.0	150 - 400 x 10 ⁹ /µL
MPV	< 3.0	7.6 - 10.9

• ACCURACY:

Parameters	Mean % Difference	Mean Difference
WBC	< 3	± 0.2
RBC	< 3	± 0.10
HGB	< 3	± 0.3
HCT	< 4	± 1.5
PLT	< 5	± 10

* RUO parameters (For Laboratory Use Only)

** From software release V2.3.0

HORIBAABX
Diagnostics

HORIBA ABX INTERNATIONAL (33 / 4 67 14 15 16) - HORIBA ABX - FRANCE (33 / 4 67 14 15 15) - HORIBA ABX - BENELUX (32 / 3 281 49 08) - HORIBA ABX - ITALY (39 / 06 51 59 22 1)
HORIBA ABX - SPAIN (34 / 91 353 3010) - HORIBA ABX - PORTUGAL (351 / 2 14 72 17 70) - HORIBA ABX - U.K. (44 / 1462 8144 00) - HORIBA ABX - POLAND (48 / 22 673 20 22)
HORIBA ABX - USA (1 / 949 453 0500) - HORIBA ABX - BRAZIL (55 / 11 55 45 1500) - AUSTRIA AXON LAB AG (43 / 1 718 78 44 00) - GERMANY AXON LAB AG (49 / 7153 92260)
ABX ONLINE : <http://www.horiba-abx.com>