Original

"Innovation With Results"

### **Proposal for Services**

Submitted by: Arnett & Foster, P.L.L.C.

# WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES "BUREAU FOR BEHAVIORAL HEALTH AND HEALTH FACILITIES"

**Welch Community Hospital** 

William R. Sharpe Jr. Hospital

Mildred Mitchell-Bateman Hospital

Proposal in Response to RFQ Number BHS 12026 Buyer: RW/File 22

Bid Opening Date: 9/01/2011 Bid Opening Time: 1:30 p.m.

Fax # 304-346-8333 Contact Person: Greg Gibbs





2011 SEP -1 AM 9: 13

WV PURCHASING DIVISION

#### Charleston office:

101 Washington Street, East Charleston, West Virginia 25329 TEL: 304.346.0441/800.642.3601 FAX: 304.346.8333

### Columbus office:

155 East Broad Street, Suite 2100 PNC Building

Columbus, Ohio 43215

TEL: 304.346.0441/800.642.3601 FAX: 304.346.8333

www.afnetwork.com



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

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ADDRESS CORRESPONDENCE TO ATTENTION OF

ROBERTA WAGNER

VARIOUS AGENCY LOCALES
AS INDICATED BELOW

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#### **OUR MISSION STATEMENT**

"Our mission is to provide specialized and technologically advanced services to help our clients succeed, while providing our people the environment to fulfill their personal and professional goals."





AF Center •101 Washington Street, East Charleston, West Virginia 25301 TEL: 304.346.0441 FAX: 304.346.8333

155 East Broad Street, Suite 2100 PNC Building Columbus, Ohio 43215 TEL: 304.346.0441 / 800.642.3601 FAX:304.346.8333 Steven S. Robey, CPA, CVA
Jack Rossi, CPA
Gary Swingle, CPA
Bill McKee, CPA, CFP
G. Lane Ellis, CPA, CISA, CVA
C. Greg Gibbs, CPA
Keith Hutcheson, CPA
Chris Joseph, CPA, CISA
David D. Hill, CPA
John Guido, CPA

Susan Barber, CPA Marie Castro, CPA Rod Hardy, CPA Harry C. Harless, CPA Chris Nice, CPA, CISA Mark Pendleton, CPA Keith Morgan, CCP, CISA, CISSP, FHFMA

August 31, 2011

Ms. Roberta Wagner Purchasing Division 2019 Washington Street, East P.O. Box 50130 Charleston, West Virginia 25305

Re: RFQ BHS12026

Dear Ms. Wagner:

We appreciate the opportunity to submit this proposal to you to provide professional services to Welch Community Hospital, William R. Sharpe, Jr. Hospital and Mildred Mitchell-Bateman Hospital.

Our responses to RFQ BHS12026 are presented in the following pages. We would, however, like to summarize several key reasons why Arnett & Foster, P.L.L.C. should be engaged as the Hospitals' accounting and consulting firm.

First, we meet all of the mandatory requirements.

Second, we have experience working with these Hospitals.

Our health care staff has extensive experience in serving the state-operated health care facilities. As a result of the compilation and general accounting services that we have provided to the State Hospitals over the years we have become well acquainted with the accounting systems utilized by each facility. We have completed or reviewed numerous Medicare/Medicaid cost reports for all state-operated facilities. Medicaid disproportionate share funding is significant and critical to the funding of the Hospitals operations. We have extensive experience with DSH programs for state hospitals.



Third, we have the resources and experience of a national firm with the personal touch of a local firm.

In addition to being the largest firm in West Virginia with a specialized health care auditing and consulting group, we are also affiliated with the 5th largest accounting firm in the country, RSM McGladrey and Pullen. Through our "alliance" agreement, we work closely with RSM McGladrey's health care staff on special projects and consult with them when needed. Through our network, we have access to the resources of more than 80 offices throughout the United States. RSM McGladrey serves over 300 hospitals nationally.

#### **Extension of Bid Terms to other Political Subdivisions**

We do not wish to extend the terms of this proposal to other political subdivisions.

Finally, and most importantly, we offer value.

As a provider of health care services and a State entity, we realize that you must analyze the cost-benefit of all goods and services you purchase. Since we only utilize professionals with extensive health care experience, the disruption to your staff will be minimized.

We believe the price outlined in our proposal is fair and reasonable considering the financial and management complexities abundant in acute care and psych hospitals. We also believe it is important that approximately 41 percent of all hours provided have been provided by managers and partners, our most experienced professionals, making the proposed fees even more cost effective.

Thanks to WVDHHR and the State of West Virginia for allowing us to submit this proposal. Please call if you have any questions regarding this cost proposal.

Sincerely,

Greg Gibbs, P.L.L.C. Member

CGG/afp

gfr/03005-0001/comp/cost report/ wvdhhr -rfq bhs12026 prop/11/9-30





# **SECTION ONE Mandatory Requirements**

Following is our responses to the Vendor Mandatory requirements and reference to support for the response.

<u>VE</u>	NDOR EXPERIENCE: MANDATORY	Response Yes/No	Reference to Support
•	Be an established Certified Public Accounting Firm with ten (10) years experience and registered with the State of West Virginia.	Yes	Page 4
•	Have at least five (5) years healthcare consulting experience.	Yes	Page 5
•	Have at least three (3) years experience in 339 reporting.	Yes	Page 5
•	Have at least five (5) years experience Health Care Authority (HCA) reporting, including quarterly CBM-9 reports.	Yes	Page 5
•	Have at least five (5) years experience in reimbursement regulation research.	Yes	Page 5
•	Have at east five (5) years experience related to rate regulation.	Yes	Page 5

#### Recent Example of Qualifications

We have notified Welch Community Hospital the last two years of their requirement to submit a Low Volume adjustment request to Medicare to qualify for additional reimbursement of approximately \$500,000 annually. The current vendor nor any other consultant addressed this requirement.





The Partnership of Arnett & Foster, P.L.L.C. (A&F) began business in October, 1967 in Charleston, West Virginia and is the successor of the proprietorship organized in 1950 by deceased partner James M. Arnett. The Firm has enjoyed substantial growth since its organization and maintains a position of dignity and responsibility in the business community. As of October 1, 1996, Arnett & Foster, P.L.L.C. became a Professional Limited Liability Company with all designations of "Partner" changing to "Member". Based on our 40 plus years of conducting business in the State of West Virginia we satisfy the requirement of being an established CPA firm, registered in the State of West Virginia, with at least 10 years of experience. See the "Cost Proposal" section of our proposal for a copy of our WV "business registration certificate".

#### Size and Organizational Structure of the Firm

Arnett & Foster, P.L.L.C. has offices in Charleston and Lewisburg, West Virginia and Columbus, Ohio. The majority of our staff are located in our Charleston office. An analysis of our complete staff is as follows:

- ☐ 17 Members
- 1 Technical Reviewer
- 8 Senior Managers
- 6 Managers
- ☐ 16 Supervisors
- ☐ 15 Senior Associates
- 12 Associates
- 2 Paraprofessionals
- □ 17 Support Staff
- 94 total staff including 42 CPA's

The members of Arnett & Foster, P.L.L.C. are as follows:

- Steven S. Robey, Presiding Member
- Jack Rossi, General Services Member
- Gary L. Swingle, Tax Services Member
- William H. McKee, Jr., Tax Services Member
- Greg Gibbs, Health Care Services Member
- Lane Ellis, Jr., Consulting Services Member
- David D. Hill, Executive Director, Member
- Keith Hutcheson, Health Care Services Member
- Chris Joseph, Consulting Services Member
- John M. Guido, General Services Member
- Keith Morgan, Consulting Services Member
- Marie Castro, Health Care Services Member
- Rod Hardy, Health Care Services Member
- Skip Harless, Tax Services Member
- Mark Pendleton, Tax Services Member
- Susan Barber, General Services Member

Our practice is divided into the following practice groups:

- Accounting and Auditing Services
- Financial Institutions Services
- Consulting Services
- Health Care Services
- Tax Services





## SECTION THREE Project Experience

Arnett & Foster, P.L.L.C. is one of the most highly recognized health care consulting firms in the State of West Virginia. We have achieved this status through a commitment of the firm's resources to health care. We provide our health care clients with a unique mix of services including auditing, reimbursement consulting (Medicare and Medicaid), regulatory assistance, computer consulting, and tax services. Our healthcare consulting services, as they relate to Medicare and Medicaid cost reporting, began in 1985. The healthcare consulting services were then expanded in 1990 to add expertise in the area of West Virginia Healthcare Authority (HCA) rate regulation. This experience satisfies the requirement that the successful vendor has at least: 5 years of healthcare consulting experience, 3 years of CMS 339 reporting experience and 5 years of HCA reporting / rate regulation experience.

Our health care client base continues to grow because of our reputation and the results of the services we provide. Our reputation and quality work have resulted in expansion of our services to Ohio, Pennsylvania, New York, Maryland, Virginia, Georgia, Iowa, Kentucky, and Minnesota. However, our primary market area is West Virginia and our primary client base is hospitals. The experience gained from our wide variety of diversified health care clients will benefit the Hospitals. The types of health care clients served include:

- Hospitals
- Hospitals with hospital-based long-term care units
- Psychiatric hospitals and psychiatric units
- Clinics and large physician groups
- Emergency care centers
- State Department of Health and Human Resources

- Federal government
- Physicians
- · Skilled nursing facilities
- Intermediate care facilities
- Continuing care retirement centers
- Home health agencies

<u>Key Point:</u> Our experience is diverse enough that we can handle any fiscal situation with which the Hospitals may need assistance.

The following is a listing of experience qualifications relating to the services specifically requested in your request for proposal:

#### State Operated Health Care Entities

We have provided services to State operated hospitals and State operated long-term care facilities for over 15 years. These include Mildred Mitchell-Bateman Hospital, Welch Emergency Hospital, William J. Sharpe, Jr. Hospital, WV Rehab Hospital, Lakin State Hospital, and others. We have a thorough understanding of the State's accounting systems, budgetary process, and policies and procedures. Our experience will result in maximum efficiency in completing the task we are requested to perform.

Key Point: We have significant experience with the state operated facilities that no other CPA firm can match.

#### **Medicare Cost Reporting**

We prepare over 100 Medicare cost reports annually. We have assembled the most experienced staff of reimbursement specialists available. Included in our staff are individuals with past Medicare fiscal intermediary audit experience.



Our current healthcare consulting team has an average of 17 years of Medicare & Medicaid cost report preparation experience.

Key Point: We have prepared cost reports for the state operated facilities for the last sixteen years and have worked closely with Medicare and Medicaid intermediaries to maximize reimbursement while ensuring integrity in the financial and statistical data used.

#### **Health Care Authority (HCA)**

We have a thorough understanding of HCA reporting requirements and rate regulatory issues. Annually, we prepare approximately 15 HCA Uniform Reports and prepare or assist in preparing 5 to 10 rate applications. We also prepare, and/or review, the quarterly CBM-9 reports for several hospitals. Additionally, we participate in many rate hearings, working in conjunction with hospital legal counsel.

<u>Key Point</u>: Our experience in this area will ensure the Hospitals stay in compliance with all applicable state regulations.

#### Appeal of Reimbursement Issues

We have successfully filed appeals with the Provider Reimbursement Review board and currently have appeals of reimbursement related issues pending. Our appeals and reopening of prior year cost reports have resulted in significant improvement to third party revenues.

Key Point: The Hospitals have many unique reimbursement issues, such as Medicare and Medicaid DSH, that are not always properly understood by the intermediaries. Appeals may be necessary in the future and we can ensure they are properly handled.

### West Virginia Disproportionate Share Calculation (DSH)

A substantial amount of the Hospital's funding comes from Medicaid disproportionate share payments. Arnett & Foster, P.L.L.C.'s reimbursement staff have a detailed understanding of Federal regulations and the State Plan provisions relating to disproportionate share payments. We have performed these calculations for all qualifying state hospitals in the past and

have assembled documentation to support the amounts claimed for future Federal audit purposes.

We also understand the interrelationship between each hospital's Medicaid utilization and the effect that changes in Medicaid utilization can have on the State's overall Federal Matching pool of DSH funds. We can provide advice on how changes in patient services, changes in the number of beds per facility, etc. can affect the Federal Matching dollars that the State of WV currently receives. We realize that changes in operations at the stateowned hospitals not only effect the DSH payment received by these hospitals but can also have a significant domino effect on the Federal matching funds received by the entire State of WV.

Key Point: We are the only firm that has actually performed those calculations, which are very critical to the Hospitals' revenues. Our calculations have been reviewed by Federal and state auditors.

### Medicare Disproportionate Share Calculation (DSH)

Acute care hospitals can benefit from the additional payments that the Medicare program will provide to hospitals that experience a large Medicare Part A inpatient population combined with a relatively large Medicaid inpatient population. The patient volume factors that influence the Medicare DSH payment must be reviewed periodically to ensure that a hospital is receiving its fair share of Medicare DSH payments. Arnett & Foster PLLC has partnered with Passport Health Communications, Inc. to assist several hospitals in increasing their Medicare DSH reimbursement. Passport Health provides Medicaid eligibility information that is readily accepted by the local Medicare intermediary.

Key Point: We are well-versed in the specifics of the Medicare DSH payment regulations. We can provide the means to increase a hospital's Medicare DSH payments and, more importantly, we can provide the documentation to the Medicare intermediary to support an increase in Medicare DSH payments.



#### **Feasibility Studies**

Because of our experience and understanding of health care, we regularly perform feasibility studies for health care providers. Examples of feasibility studies completed include bond refinancing, new medical services, new hospitals, union wage negotiations, and rural health clinics.

Key Point: Accurate and reliable financial feasibility studies are necessary to make management decisions about new services or ventures. With our background and knowledge of the Hospitals, experience with financial projections, and understanding of reimbursement issues, we can provide management the information they need.

#### **Hospital Based Physicians**

Hospital/physician relationships have changed much over the past five years. Arnett & Foster, P.L.L.C. has considerable experience reviewing and analyzing physician contracts and employment agreements. The structure of these arrangements has a direct bearing on the amount of thorough understanding of the Medicare Part B program, Medicare reimbursement under the RBRVS methodology, proper coding of procedures and proper billing practices.

Key Point: Our experience will help ensure that physician services are properly structured and revenues maximized.

#### Revenue Cycle

With changes in recent years to the Medicare cost report reimbursement methodology for psychiatric services, as well as the expansion in the number of Diagnostic Related Groups (DRG's) for payment of acute services, correct coding and billing now occupies a larger role in the overall reimbursement scheme than it did even four to five years ago. We have assembled a revenue cycle team that has experience in all phases of the revenue cycle process. Our revenue cycle experience includes charge master reviews, assistance with coding, regulatory compliance review and "complete on-site revenue cycle reviews" which encompass the admission process thru billing & collection.

Key Point: Our knowledge of Medicare and WV Medicaid billing processes, coupled with our team of personnel who are well-versed in all aspects of the revenue cycle, makes us uniquely qualified to assist in ensuring that each hospital receives the appropriate payment for patient services rendered.





## SECTION FOUR References

Following is a list of references for which we have asked permission to use their name:

- Angie Swearingen, Chief Financial Officer, St. Mary's Hospital Phone: (304) 526-1270 Services performed include audit, cost reports, HCA filings and consulting services.
- Dodie Arbogast, Chief Financial Officer, Stonewall Jackson Memorial Hospital Phone: (304) 269-8059 Services performed include audit, cost reports, HCA filings and consulting services.
- Beth Boyd, Director of Accounting, Thomas Memorial Hospital Phone: (304) 766-3537 Services performed include cost reports and consulting services.
- Sondra Love, Controller, Winchester Medical Center Phone: (540) 536-2747 Services performed include annual audit and various consulting.
- Dora Douglas, CFO, Summersville Memorial Hospital Phone (304) 872-8571 Services performed include audit, cost reports, HCA filings and consulting services.
- Frank Sinicrope, Chief Financial Officer, Princeton Community Hospital Phone: (304) 487-7263 Services include audit, cost reports, HCA filings and consulting services.

Doug Bentz, Roane General Hospital Phone: (304) 927-6200 Services include annual audit, cost reports, HCA filings and consulting services.





# SECTION FIVE Project Liaison, Staffing and Qualifications

Arnett & Foster, P.L.L.C. utilizes the client-member concept for all engagements. Under this concept, the client-member has the ultimate responsibility for the engagement. **Greg Gibbs, CPA** has been designated as client-member and he will have the following major responsibilities:

- Acting as primary contact at Arnett & Foster, P.L.L.C. for the Hospital and related entities to assure an
  open and effective channel of communication at all times.
- Determining the final content of the accountant's reports and ascertaining compliance with Firm and professional standards.
- Director, controlling, and supervising the efforts of all personnel assigned to the engagements.
- Offering assistance in the solution of technical or sensitive problem areas encountered during the performance of the audits.
- Reviewing all working papers, cost reports, financial statements, and other reports to be issued.

Mr. Gibbs will also be assisted by other members of our staff having accounting, reimbursement and health care experience.

The following is a listing of the other key personnel to be assigned to the engagements.

Individual	Classification	Responsibility
Keith Hutcheson	Member	Responsible for technical reviews in the completion of the Medicare and Medicaid Cost Reports.
Rod Hardy	Member	Responsible for technical reviews in the completion of the Medicare and Medicaid Cost Reports
Chris Joseph	Member	Responsible for providing accounting systems software support and training.
Chad Wright	Supervisor	Responsible for assistance with completion of Medicare and Medicaid Cost Reports.
Jill Newberry	Senior Manager	Responsible for providing support for all phases of the revenue cycle including assistance with Medicare billing and coding

These individuals listed as key personnel have experience, at Welch Emergency Hospital, Mildred Mitchell-Bateman Hospital and William J. Sharpe, Jr. Hospital from previous work we performed. This continuity in staff is of great benefit to the Hospitals since it limits training time for any learning curve that is typical with a new client





# SECTION SIX Proposed Cost

#### CONSIDERATIONS FOR DETERMINATION OF HOURLY RATE

The hourly rate submitted by Arnett & Foster, P.L.L.C. for RFQ #BHS12026 is \$95.00. During the course of evaluating the Arnett & Foster, P.L.L.C. bid, it is important for the State of WV Purchasing Division to be aware of the factors that we considered in arriving at this hourly rate.

#### **UTILIZATION OF RESOURCES**

All of the work requires an understanding of the unique accounting systems utilized by the State hospitals. In addition, the third-party payment issues related to WV Medicaid and the Federal Medicare program call for the use of specialized personnel with several years of experience working with Medicaid and Medicare reimbursement. For these reasons noted, Arnett & Foster, P.L.L.C. has historically utilized personnel who possess a significant level of healthcare experience in order to fulfill the mandatory requirements outlined in the contract.

The following summary is presented to illustrate the experience level of the personnel that have been utilized in recent years.

O/ of Hours /historically/ Dodicated

Employee Title	to the State Hospital Contract
Member / Manager	41%
Supervisor / Senior	40%
Associate (staff)	19%

Please note that the experience "mix" noted above has been utilized by Arnett & Foster, P.L.L.C. in arriving at the \$95.00 hourly rate submitted with this RFQ. We wish to emphasize that the mandatory requirements outlined in the RFQ cannot be performed by entry-level personnel or by personnel who do not possess specialized governmental third-party knowledge.

KEY POINT: Any comparisons made of the hourly rate submitted by the various vendors, to this RFQ, must consider the compliment of personnel that the vendor has "factored" into their submitted rate.

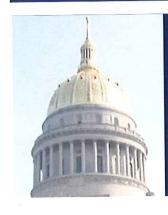


#### TRAVEL AND ADMINISTRATIVE EXPENSES

Page #9 RFQ BHS12026 dated August 17, 2011 state that separate reimbursement will not be made for travel and administrative expenses. Each vendor is required to note if their submitted hourly rate includes travel expenses.

Our \$95.00 hourly rate does not include any travel or administrative expenses. Arnett & Foster, P.L.L.C. has historically never billed any out-of-pocket expenses to the State in conjunction with the State Hospital contract nor has our hourly rate included a provision for travel-related expenses.





# SECTION SEVEN License Requirements

# WEST VIRGINIA STATE TAX DEPARTMENT BUSINESS REGISTRATION CERTIFICATE

ISSUED TO:
ARNETT & FOSTER P L L C
DBA ARNETT & FOSTER

101 WASHINGTON ST E CHARLESTON, WV 25301-1516

BUSINESS REGISTRATION ACCOUNT NUMBER:

1035-2299

This certificate is issued on:

06/9/2010

This certificate is issued by the West Virginia State Tax Commissioner in accordance with W.Va. Code § 11-12.

The person or organization identified on this certificate is registered to conduct business in the State of West Virginia at the location above.

This certificate is not transferrable and must be displayed at the location for which issued.

This certificate shall be permanent until cessation of the business for which the certificate of registration was granted or until it is suspended, revoked or cancelled by the Tax Commissioner.

Change in name or change of location shall be considered a cessation of the business and a new certificate shall be required.

TRAVELING/STREET VENDORS: Must carry a copy of this certificate in every vehicle operated by ther CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS: Must have a copy of this certificate displayed at every job site within West Virginia.

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Marie Barre 14 June

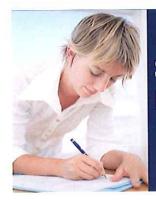


Your fee has been received for renewal of your firm permit. This registration may be detached from the perforation at left and used until the date indicated.

Any errors in the attached information should be reported to the Board office at 304/558-3557

South Hollows





# SECTION EIGHT Purchasing Affidavit

RFO No. BHS 12026

### 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 FOLLO	NING SIGNATURE
Vendor's Name:	nett & toster of PHS
Authorized Signature: _	C. July Julits Date: 9/1/201/
State of WV	
County of   Can a	
Taken, subscribed, and	
My Commission expires	1/17 . 2020 Story A Briggers
AFFIX SEAL HERE	NOTARY PUBLIC OFFICIAL SEAL
	NOTARY PUBLIC STATE OF WEST VIRGINIA STACY A. BOGGESS 1 Saint Francis Place

Charleston, West Virginia 25314

My Commission Expires Nov. 17, 2020



ARNETT&FOSTER
Certified Public Accountants, P.L.L.C.



# Section Nine Addendums





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

SHIP TO

RFQ NUMBER BHS12026

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ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 304-558-0067

VARIOUS AGENCY LOCALES AS INDICATED BELOW

\*709041713 304-346-0441 ARNETT & FOSTER PLLC PO BOX 2629

CHARLESTON WV 25329

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	ADDENDUM(S)	AND HAVE M	ECEIPT OF THE FC ADE THE NECESSAR OR SPECIFICATIO	Y REVISIONS TO	
	ADDENDUM NO.				E
	NO. 2 NO. 3				
	NO. 4			,	
	NO. 5	.].			
	뭐니까요		URE TO CONFIRM T CAUSE FOR REJEC	1	
CNATURE	<u>, j 1)</u>	SEE RE	VERSE SIDE FOR TERMS AND CO	ONDITIONS    DAT	re /
IGNATURE C	Jug B	ilis	TELEPHONE	346 0441	9/1/20/1
TITLE Menbe	1	55-0486	667	ADDRESS CHANG	GES TO BE NOTED ABOVE
	IEN RESPONDING		RT NAME AND ADDRESS	SIN SPACE ABOVE LARE	I FD 'VENDOR'



NODZEK

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

#### Request for Quotation

T

BHS12026

ų.	PAGE
	2

ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 804-558-0067

VARIOUS AGENCY LOCALES
AS INDICATED BELOW

\*709041713 304-346-0441 ARNETT & FOSTER PLLC PO BOX 2629 CHARLESTON WV 25329

DATE PRINTED	TERM	MS OF SAL	E	SHIP VIA		F.O.B,	FREIGHT TERMS
08/17/2011							
RID OPENING DATÉ:	09/01/2	2011		BID	OPEN	IING TIME 0	1:30PM
LINE QUAI	NTITY	UOP	CAT. NO.	ITEM NUMBER		UNIT PRICE	AMOUNT
VENDOR REPRES ORAL D AND AN INFORM SPECIF	MUST ( ENTATION ISCUSS ATION ICATION	CLEARI ON MAI ION HI E PER ISSUE NS BY	LY UNDE OR ELD BOUNDED IN AN O	DERSTAND THAT AN ASSUMED TO BE METWEEN VENDOR'S LIS NOT BINDING WRITING AND ADDEFICIAL ADDENDUM	TADE REPI CONTROL TO T	ERBAL DURING ANY RESENTATIVES DNLY THE D THE BINDING. FURE OSE NY ZO //	7.5
					ALC: P	MA.	
IIGNATURE			SEE HE	VERSE SIDE FOR TERMS AND CO	ONDITIC	DAT	
				1444.110114			
TITLE	FE	EIN				ADDRESS CHANG	ES TO BE NOTED ABOVE

#### **ADDENDUM**

### BHS12026

1. Question: Is there an anticipated start date for the new contract?

Answer: Yes, October 1, 2011

Question: Want to confirm that there is no pre bid conference.

Answer: Correct, there is no pre bid conference.



Request for Quotation RFQ # BHS 12026

12

Rev 09/08

#### 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.

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,
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 employee working on the project being bid are residents of West Virginia who have resided in the state continuously for the two year immediately preceding submission of this bid; or,
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 a affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing 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,
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,
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 Gua and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid submitted, or,
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, f purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid ar continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees a residents of West Virginia who have resided in the state continuously for the two immediately preceding years.
idder understands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the quirements for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penagainst such Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agent educted from any unpaid balance on the contract or purchase order.
y submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division a uthorizes the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has pa ie required business taxes, provided that such information does not contain the amounts of taxes paid nor any other informati eemed by the Tax Commissioner to be confidential
nder penalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is trend accurate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate hanges during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.  Sept. 1, 2011 Signed: Member
Check any combination of preference consideration(s) indicated above, which you are entitled to receive



# SECTION ELEVEN BID COST SHEET

STATE OF WEST VIRGINIA	Buyer: RW22 Spending		Requisition or P.O. No.: BHS12026
BID COST SHEET			
All INCLUSIVE HOURLY RATE: \$ 95 X 3350 (estimated servi	ices liste	d herein	)
AMET & Foster, CPA'S COMPANY NAME  C. Sugy Subs SIGNATURE  Soft. 1, 2011			



# Section Twelve Insurance Information

## DECLARATIONS ACCOUNTANTS PROFESSIONAL LIABILITY POLICY

PRODUCER BRANCH PREFIX POLICY NUMBER
003613 970 APL 128570554

1. Named Insured and Mailing Address

Arnett & Foster, PLLC P.O. Box 2629 Charleston, WV 25329-2629 INSURANCE IS PROVIDED BY CONTINENTAL CASUALTY COMPANY CNA PLAZA, CHICAGO, IL 60685 A STOCK INSURANCE COMPANY REFERRED TO AS WE, US, OR OUR.

\* \* \* NOTICE \* \* \* \*

THIS IS A CLAIMS-MADE POLICY AND COVERS ONLY CLAIMS FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD. PLEASE READ THIS POLICY CAREFULLY AND DISCUSS THE COVERAGE WITH YOUR INSURANCE AGENT.

2. POLICY PERIOD:

FROM:

10/01/10 TO:

10/01/11

at 12:01 A.M. Standard time at your address shown above.

PRIOR ACTS DATE:

NO PRIOR ACTS DATE LIMITATION APPLIES

4. \$200,000

PROFESSIONAL LIABILITY PER CLAIM/AGGREGATE DEDUCTIBLE

5. LIMITS OF LIABILITY:

(INCLUDES CLAIM EXPENSES UNLESS AMENDED BY ENDORSEMENT)

\$10,000,000 PER CLAIM \$10,000,000 AGGREGATE

FOR NON-RENEWAL :

60 days notice will be given you in accordance with policy conditions.

7. PRINTED ENDORSEMENTS ATTACHED AT POLICY ISSUANCE INCLUDE:

G-127136-A(1/08) Policy

G-127151-A Prior Acts Date - Predecessor

G-127137-A(5/00)-Declarations Page —

-GSL7660XX-Broad-Form-Bridge-Endorsement-

G-127157-A(6/97) Nuclear Energy & Pollution Excl.

G-127164-A47(6/97) Amend. Termination Provisions - WV

G-141584-A(6/03) Policyholder Notice

G300201-A(10/05) WV Civil Justice Reform

G300202A(10/05) WV Surcharge

GSL2656XX(5/08) Network Risk & Privacy Claim

G-127139-A Excl Named Individuals or Entities

8.

\$176,942.00 \$973.18 \$177,915.18 ANNUAL PREMIUM STATE SURCHARGE TOTAL PREMIUM

THIS POLICY IS NOT VALID UNTIL SIGNED BY OUR AUTHORIZED REPRESENTATIVE.

Authorized Representative



INSURANCE	POLICY
Sharing Knowledge, Building Trust.® A M	ENDED DECLARATIONS
COMPANY PROVIDING COVERAGE	WESTFIELD INSURANCE COMPANY
ITEM #1 NAMED INSURED & MAILING ADDRESS	AGENCY 47-05077 PROD. 000
101 WASHINGTON ST E	FERRELL & HILL INS AGCY LLC PO BOX 277 MADISON WV 25130-0277 TELEPHONE 304-369-1111
Policy Number: BOP 3 056 812	WIC ACCOUNT NUMBER: 4701245703 A
	at 12:01 A.M. Standard Time at your mailing address shown above.
Effective 07/01/11 This amended and supersedes all other declarations	d declarations changes this policy s issued during this policy period
Business: CPA FIRM	Named Insured is: A PLLC
In return for the payment of the premium, a policy, we agree with you to provide the in	and subject to all terms of this nsurance as stated in this policy.
Endorsement Addl. Premium	\$0,00
Addl. Terrorism Premium Total Additional Premium	\$0.00 \$0.00
SCHEDULE OF DESILOR. Bldg. Address, City & State  001 001 200 WASHINGTON ST.  LEWISBURG WV 24901  002 001 101 WASHINGTON ST E  CHARLESTON WV 25301  003 001 1545 HANSFORD ST  CHARLESTON WV 25311  004 001 155 E BROAD ST  STE 2100  COLUMBUS OH 43215	CRIBED PREMISES Construction Masonry Non- Combustible Combustible Combustible Combustible
PROPERTY	
Loc. Bldg. Coverage 001 001 Business Income & Extra Expense 001 001 Business Personal Property 002 001 Business Income & Extra Expense 002 001 Business Personal Property 003 001 Business Income & Extra Expense 003 001 Business Personal Property 004 001 Business Income & Extra Expense 004 001 Business Personal Property	Limits of Insurance Actual Loss Sustained \$8,000 Actual Loss Sustained \$1,566,000 Actual Loss Sustained \$20,000 Actual Loss Sustained \$40,000
BUSINESS LIABILITY Each Occurrence Limit General Aggregate Limit Products/Completed Operations Aggregate Personal & Advertising Injury Limit(Per Medical Expenses Damage to Premises Rented To You Limit(A	Limits of Insurance \$1,000,000 \$2,000,000 Limit Person or Organization)\$1,000,000 Each Person \$10,000
Each paid claim for the above coverages reduring the applicable annual period. Pleas Businessowners Coverage Form and any attac	se refer to Section II - Liability in the
OPTIONAL Loc. Bldg. ALL ALL Terrorism Insurance Coverage ALL ALL Business Income (Extended) Extended Period of Indemnity ALL ALL Business Income - Ordinary Payrol	COVERAGES  Limits of Insurance  Number of Days 30



#### AMENDED DECLARATIONS

5	haring Knowledge, Building Trust. <sup>3</sup>	MENDED	DECLARATI	ONS
COI	MPANY PROVIDING COVERAGE	WESTFIELD	INSURANCE COMPANY	
ITEM #1	NAMED INSURED & MAILING ADDRESS	AGENCY	47-05077 PROD.	000
101 WASHI PO BOX 20	FOSTER, PLLC INGTON ST E 629 ON WV 25329	FERRELL & HIL PO BOX 277 MADISON WV 25 TELEPHONE 304	LL INS AGCY LLC 5130-0277 4-369-1111	
Policy No	umber: BOP 3 056 812	WIC ACCOUNT	NUMBER: 4701245703	3 A
Loc. Bldg	OPTIONAL		Limits of In	surance
ALL ALL	Cove Electronic Data	erage Period	60	\$10,000
ALL ALL	Employee Benefits Liability This insurance contains claim be otherwise provided herein insurance are limited general for which claims are first mance carefully and discuss the insurance limit Aggregate Limit Retroactive Date: 07/01/This insurance does not seen of the contains which	n, specified co ally to liabili ade against th Please read and the coverage wi	overages of this ity for injuries he insured while treview the insurtith your agent.	,000,000 ,000,000
rena na rama na	e if any shown above.	occurred peror	e the ketroactive	
ALL OO1 001	Employee Dishonesty Forgery and Alteration Fire Department Service Charge Hired Auto and Non-Owned Auto L Interruption of Computer Operat Personal Property Off Premises Accounts Receivable	ilons	\$1 <i>,</i>	\$10,000 \$10,000 \$10,000 \$10,000 \$10,000 \$10,000
001 001 001 001	Business Income from Dependent Business Income and Extra Exper	Properties ise -	12	\$5,000 Months
001 001 001 001 001 001 001 001 001 001	Revised Period of Indemnity Debris Removal Additional Insur Fine Arts Coverage Money and Securities - Inside F Money and Securities - Outside Outdoor Property	remises		\$10,000 \$5,000 \$10,000 \$5,000
001 001 001 001	Any One Occurrence Any One Tree, Shrub or Plant Outdoor Signs Utility Services - Direct Damag Covered Property:	t ge		\$10,000 \$1,000 \$2,500
	Building Utility Services:			A10 000
	Water Supply Communication Supply - No	nt Including Over	verhead	\$10,000 \$10,000
	Power Supply - Not Includ Transmissi	ling Overhead	ies	\$10,000
	Covered Property: Business Personal Property	ton taries		.==,
	Utility Services: Water Supply			\$10,000
	Communication Supply - No Tr	ansmission Lir	verhead nes	\$10,000
001 001	Power Supply - Not Includ Transmissi Valuable Papers and Records			\$10,000 \$10,000
001 001	Water Back-Up and Sump Overflow Covered Property Annual Aggr	regate		\$5,000
002 001	Business Income and Extra Ex Accounts Receivable	opense Annual A	Aggregate	\$5,000 \$10,000 \$5,000
002 001 002 001	Business Income from Dependent Business Income and Extra Exper Revised Period of Indemnity	rroperties ISE -	12	Months
002 001 002 001	Debris Removal Additional Insur Fine Arts Coverage	ance		\$10,000 \$5,000

08/02/11



#### AMENDED DECLARATIONS

Sharing Knowledge. Building Trust.®	AMENDED DECLARATIONS
COMPANY PROVIDING COVERAGE	WESTFIELD INSURANCE COMPANY
ITEM #1 NAMED INSURED & MAILING ADDRES	S AGENCY 47-05077 PROD. 000
ARNETT & FOSTER, PLLC 101 WASHINGTON ST E PO BOX 2629 CHARLESTON WV 25329	FERRELL & HILL INS AGCY LLC PO BOX 277 MADISON WV 25130-0277 TELEPHONE 304-369-1111
Policy Number: BOP 3 056 812	WIC ACCOUNT NUMBER: 4701245703 A
OPTIONALOC. Bldg. 002 001 Money and Securities - Inside 002 001 Money and Securities - Outsid 002 001 Outdoor Property	Premises Limits of Insurance \$10,000
Any One Occurrence Any One Tree, Shrub or Pla 002 001 Outdoor Signs 002 001 Protective Safeguards	
Protective Safeguards Symb 002 001 Utility Services - Direct Dam Covered Property: Building Utility Services:	ol Applicable: P-1 age
Water Supply Communication Supply	\$10,000
And the state of t	Transmission Lines \$10,000
Power Supply - Not Incl Transmis	sion Lines \$10,000
Covered Property: Business Personal Property Utility Services:	\$10,000
Water Supply Communication Supply -	Not Including Overhead
Power Supply - Not Incl	uding Overhead
002 001 Valuable Papers and Records	\$10,000
002 001 Water Back-Up and Sump Overfl Covered Property Annual Ag	gregate
Business Income and Extra	\$10,000
003 001 Business Income from Dependen 003 001 Business Income and Extra Exp	ense - 12 Months
Revised Period of Indemnit 003 001 Debris Removal Additional Ins	urance \$10,000
003 001 Fine Arts Coverage 003 001 Money and Securities - Inside 003 001 Money and Securities - Outsid	\$5,000 Premises \$10,000 e Premises \$5,000
003 001 Outdoor Property Any One Occurrence Any One Tree, Shrub or Pla	\$10,000 \$1,000 \$2,500
003 001 Outdoor Signs 003 001 Utility Services - Direct Dam Covered Property: Building	
Utility Services: Water Supply	\$10,000
Communication Supply -	Transmission Lines \$10,000
Power Supply - Not Incl Transmis	
Covered Property: Business Personal Property	
Utility Services: Water Supply	\$10,000
Communication Supply -	Not Including Overhead Transmission Lines \$10,000
Power Supply - Not Incl	
003 001 Valuable Papers and Records 004 001 Accounts Receivable	\$10,000 \$10,000
001 NOCONUIC VECSTABDIS	.10,000



#### AMENDED DECLARATIONS

COMPANY PROVIDING COVERAGE	WESTFIEL	D INSURANCE	COMPANY	
ITEM #1 NAMED INSURED & MAILING ADDRESS	AGENCY	47-05077	PROD.	000
ARNETT & FOSTER, PLLC 101 WASHINGTON ST E PO BOX 2629 CHARLESTON WV 25329	PO BOX 277 MADISON WV	HILL INS AGCY 25130-0277 304-369-1111	LLC	
Policy Number: BOP 3 056 812	WIC ACCOUN	NT NUMBER: 47	01245703	Α
OPTIONAL	COVERAGE	ES	7 × 102	

		OPTIONAL COVERAGES		
Loc. 004 004	Bldg. 001 001	Business Income from Dependent Properties Business Income and Extra Expense -	Limits	of Insurance \$5,000 12 Months
004 004 004 004	001 001 001 001	Revised Period of Indemnity Debris Removal Additional Insurance Fine Arts Coverage Money and Securities - Inside Premises Money and Securities - Outside Premises		\$10,000 \$5,000 \$10,000 \$5,000
004	001	Outdoor Property Any One Occurrence Any One Tree, Shrub or Plant Outdoor Signs		\$10,000 \$1,000 \$2,500
004	ööi	Utility Services - Direct Damage Covered Property: Building		500 American (1990)
		Utility Services: Water Supply Communication Supply - Not Including Overhead		\$10,000
		Transmission Lines Power Supply - Not Including Overhead		\$10,000
		Transmission Lines Covered Property:		\$10,000
		Business Personal Property Utility Services:		\$10,000
		Water Supply Communication Supply - Not Including Overhead Transmission Lines	I	\$10,000
504	001	Power Supply - Not Including Overhead Transmission Lines		\$10,000 \$10,000
004	001	Valuable Papers and Records		+10,000

#### Only the coverages listed above are afforded

#### OTHER INTERESTS

		OTHER ZITTEREOTO
Loc.	Bldg.	
ALL	ALL	Additional Incured - Owners, lessees or Contractors
		Name of Person or Organization: THE OHIO STATE UNIVERSITY & ITS
		THE OHIO STATE UNIVERSITY & ITS
		BOARD OF TRUSTEES
		2650 KENNY RD
		COLUMBUS OH 43210
002	001	
		Loss Payee (Name & Address):
		KONICA MINOLTA PREMIER
		CONTRACT # 25061612 1111 OLD EAGLE SCHOOL RD
		WAYNE PA 19087
		Description of Property: 6 KOMIN COPIERS VALUED AT \$117,203
004	001	Additional Insured - Managers or Lessors of Premises
007	001	Name of Person or Organization (Additional Insured):
		NC PLAZA, LLC
		C/O ARTHUR GOLDNER & ASSOC, INC
		707 SKOKIE BLVD SUITE 100
		NORTHBROOK IL 60062
		45.55.55.70.00.00.00.00.00.00.00.00.00.00.00.00.



#### AMENDED DECLARATIONS

COMPANY PROVIDING COVERAGE	WESTFIEL	D INSURANCE (	COMPANY	
ITEM #1 NAMED INSURED & MAILING ADDRESS	AGENCY	47-05077	PROD.	000
ARNETT & FOSTER, PLLC 101 WASHINGTON ST E PO BOX 2629 CHARLESTON WV 25329	PO BOX 277 MADISON WV	25130-0277 04-369-1111	LLC	

Policy Number: BOP 3 056 812

WIC ACCOUNT NUMBER: 4701245703

Α

#### **DEDUCTIBLES**

Deductible is \$500
Optional Coverage/Exterior Building Glass Deductible is \$500
Employee Benefits Deductible is \$1,000 (Each Employee)
Employee Dishonesty Deductible is \$500
Money & Securities Deductible is \$500
Outdoor Signs Deductible is \$500
Loc. Bldg.
001 001 Fine Arts Coverage Deductible \$500
001 001 Water Back-Up and Sump Overflow Deductible is \$500
002 001 Fine Arts Coverage Deductible \$500
002 001 Water Back-Up and Sump Overflow Deductible is \$500
003 001 Fine Arts Coverage Deductible \$500
004 001 Fine Arts Coverage Deductible \$500
005 006 Fine Arts Coverage Deductible \$500
007 008 Fine Arts Coverage Deductible \$500

				FORMS A		ORSEME			01/0/
ALC2000	01/87×		01/06	BP0158	04/08	BP1203	01/10	BP0430 BP0417	01/06 01/10
BP0402	01/06	BP0407	01/06	BP0409 BP0456	01/06 01/10	BP0410 BPW0105	01/06		01/08
BP0404 ID7004	01/10 08/10	BP0446 BP0577	01/06 01/06	BPW0207	01/07	BP0003	01/10	BPW0186	
BP7029	03/11	BP0453	01/10	BP0483	01/10×	BP7034	03/11	BP1405	01/10
BP0501	07/02	BP0498	01/10	BP0493	01/06	BPW0187	03/06	BPW0203	01/06
RDOGEO	01/06	RPWn2n1	03/06						

COUNTERSIGNED: Date 8 17 11

By (authorized representative)

AIC 2000 (Ed 01-87)

08/02/11



#### WORKERS COMPENSATION AND **EMPLOYERS LIABILITY POLICY**

#### INFORMATION PAGE WC 00 00 01 (A)

RENEWAL OF POLICY NUMBER: WC10034687-07 POLICY NUMBER: WC10034687-08

**INSURER: BRICKSTREET MUTUAL INSURANCE COMPANY** 

INSURED: 1.

ARNETT & FOSTER PLLC

PO BOX 2629

**CHARLESTON, WV 25329-2629** 

PRODUCER:

FERRELL & HILL INSURANCE

AGENCY LLC **PO BOX 277** 

MADISON, WV 25130

Insured is a(n) LLC

Other work places and identification numbers are shown in the schedule(s) attached.

- The policy period is from 06/12/2011 to 06/12/2012 12:01 A.M. at the insured's mailing address. 2.
- WORKERS COMPENSATION INSURANCE: Part One of the policy applies to the Workers Α. Compensation Law of the state(s) listed here:

WEST VIRGINIA

EMPLOYERS LIABILITY INSURANCE: Part Two of the policy applies to work in each state listed in item В. 3.A. The limits of our liability under Part Two are:

Bodily Injury by Accident:

\$1,000,000

Each Accident

Bodily Injury by Disease:

\$1,000,000

Policy Limit

Bodily Injury by Disease:

\$1,000,000

Each Employee

- OTHER STATES INSURANCE: Part Three of the policy applies to the states, if any, listed here: C.
  - "Part Three of the policy applies to the states, if any, listed here: All states and U.S. territories except, North Dakota, Ohio, Washington, Wyoming, Puerto Rico, and the U.S. Virgin Islands, and states designated in Item 3.A. of the Information Page. "
- This policy includes these endorsements and schedules: D.

SEE LIST OF ENDORSEMENTS - EXTENSION OF INFORMATION PAGE

The premium for this policy will be determined by our Manuals of Rules, Classifications, Rates and Rating Plans. All required information is subject to verification and change by audit to be made in accordance with Part Five of the Policy.

DATE OF ISSUE: 06/14/2011 ISSUING OFFICE: Charleston, WV

PRODUCER:

FERRELL & HILL INSURANCE AGENCY LLC



#### WORKERS COMPENSATION AND **EMPLOYERS LIABILITY POLICY**

**EXTENSION OF INFORMATION PAGE - LIST OF** ADDITIONAL NAMED INSURED(S) WC 00 00 01 (A)

RENEWAL OF POLICY NUMBER: WC10034687-07

**POLICY NUMBER:** 

WC10034687-08

LIST OF ADDITIONAL NAMED INSURED(S):

ARNETT & FOSTER ARNETT & FOSTER P O BOX 2629 CHARLESTON WV 25329-0000

A & F FINANCIAL HOLDINGS LLC

101 WASHINGTON STREET EAST CHARLESTON WV 25301 55-0786007

A F CONSULTING LLC

101 WASHINGTON ST E **CHARLESTON WV 25301** 55-0763517

DATE OF ISSUE: 06/14/2011 ISSUING OFFICE: Charleston, WV

PRODUCER:

FERRELL & HILL INSURANCE AGENCY LLC