

VENDOR

\*709040703

PO BOX E

DATE PRINTED

WINANS SANITARY SUPPLY CO INC

PARKERSBURG WV 26102-2175

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

304-485-4000

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ADDRESS CORRESPONDENCE TO ATTENTION OF:

ROBERTA WAGNER 304-558-0067

ALL STATE AGENCIES BY ORDER

AND POLITICAL SUBDIVISIONS VARIOUS LOCALES AS INDICATED

RECEIVED DEC 1 0 2013

12/05 BID OPENING DA	5/2013 TE: 01/07/:	2014	DID (	DENING BIND	2.0714
LINE	QUANTITY	UOP CAT.	ITEM NUMBER	PENING TIME 1: UNIT PRICE	3 O PM AMOUNT
		STATEWID:	E OPEN-END CONTRA	ACT	
	STATEWIDE OP	EN-END CON'	N IS SOLICITING E TRACT TO PROVIDE NCIES AND POLITIC	TEMPORARY WORKER	
0001	1		946-10-01-001		
	TEMPORARY EMI	PLOYEE SER	ICES		
-	***** THIS	IS THE ENI	OF RFQ TEMP	14 ***** TOTAL:	
		01/07/14 10 West Virgini	:38:20AM a Purchasing Division		
TITLE	**	EIN	TELEPHONE 304-48		6-14 TO BE NOTED ABOVE
	esident !	55045-1730	NISEDT NAME AND ADDE	RESS IN SPACE ABOVE LA	

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: TEMP14

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

### Addendum Numbers Received:

(Check the box next to each addendum received)

[	x ]	Addendum No. 1	]	]	Addendum No. 6
Ī	]	Addendum No. 2	[	]	Addendum No. 7
[	]	Addendum No. 3	[	]	Addendum No. 8
[	]	Addendum No. 4	1	]	Addendum No. 9
1	]	Addendum No. 5	I	]	Addendum No. 10

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Winans Sanitary Supply Co., Inc

Company

Authorized Signature

1-6-14

Date

NOTE: This addendum acknowledgement should be submitted with the bid to expedite document processing.

## 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.

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 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,
<b>4.</b> _X 7	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
<b>5.</b>	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,
	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.
/. /	Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with West Virginia Code §5A-3-59 and West Virginia Code of State Rules.  Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women-and minority-owned business.
against si	nderstands if the Secretary of Revenue determines that a Bidder receiving preference has failed to continue to meet the ents for such preference, the Secretary may order the Director of Purchasing to: (a) reject the bid; or (b) assess a penalty uch Bidder in an amount not to exceed 5% of the bid amount and that such penalty will be paid to the contracting agency ed from any unpaid balance on the contract or purchase order.
By submis authorizes the require	ssion of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and s the Department of Revenue to disclose to the Director of Purchasing appropriate information verifying that Bidder has paid ed business taxes, provided that such information does not contain the amounts of taxes paid nor any other information by the Tax Commissioner to be confidential.
	nalty of law for false swearing (West Virginia Code, §61-5-3), Bidder hereby certifies that this certificate is true trate in all respects; and that if a contract is issued to Bidder and if anything contained within this certificate during the term of the contract, Bidder will notify the Purchasing Division in writing immediately.
	Vinans Sanitary Supply Co., INSigned:
Date: _ 1_	-6-14 Title: President

RFQ No.	TEMP14
KFU NO.	

# STATE OF WEST VIRGINIA Purchasing Division

### **PURCHASING AFFIDAVIT**

MANDATE: Under W. Va. Code §5A-3-10a, 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: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

**EXCEPTION:** The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. 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.

#### **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.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"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.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code* §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

### WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Winans Sanitary Supply Co, Inc	
Authorized Signature:	_Date:1_6_14
State of West Virginia	
County of Word , to-wit:	
Taken, subscribed, and sworn to before me thisday of	, 20 <u>l</u> \
My Commission expires, 20 <u>20</u> .	
AFFIX SEAL HERE NOTARY PUBLIC	le S. S. I

OFFICIAL SEAL
NOTARY PUBLIC
STATE OF WEST VIRGINIA
DEBRA S. TENNANT
P. O. Box E
Parkersburg, WV 26101
My Commission Expires Dec. 21, 2020

Purchasing Affidavit (Revised 07/01/2012)

## **CERTIFICATION AND SIGNATURE PAGE**

By signing below, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid or proposal for review and consideration; that I am authorized by the bidder to execute this bid or any documents related thereto on bidder's behalf; that I am authorized to bind the bidder in a contractual relationship; and that to the best of my knowledge, the bidder has properly registered with any State agency that may require registration.

<u> </u>	y Supply	Co.,	Inc.
(Company)			
	•		
5)-7.1	W		
(Authorized Signature)			
- ,			
James F. Wina	ns, III	Presi	dent
(Representative Name, Title	)		
304-485-4000	304-48	5-7570	)
(Phone Number)			
(Thone Tumber)	(Fax Numb	er)	
97 0			
1/6/14			
(Date)			

## PRICING PAGE - TEMP14 REGION I

Vendor Name:

# Years Providing Temp Svc:

Contact Person:

Phone #: Fax # Winans Sanitary Supply Co., Inc.

26

Jim Winans

304-485-4000

304-485-7570

NOTE: If you do not cover entire region, circle counties where you do supply temporaries.

Region I - Hancock, Brooke, Ohio, Marshall, Wetzel, Monongalia, Marion, Harrison, Doddridge, Gilmer, Pleasants, Calhoun, Wirt, Wood, Tyler and Ritchie

#### CLASSIFICATION

- 1 Accounting Technician 2
- 2 Administrative Services Assistant 1
- 3 Administrative Services Assistant 2
- 4 Cook
- 5 Custodian
- 6 Data Entry Operator 2
- 7 Executive Secretary
- 8 Groundskeeper
- 9 Health Service Worker (Certified Nursing Program)
- 10 Laboratory Assistant 3
- 11 Laborer
- 12 Mail Runner
- 13 Office Assistant 2
- 14 Office Assistant 3
- 15 Painter
- 16 Paralegal
- 17 Parking Attendant
- 18 Word Processor

REGION I			
Worker Pay	Withholding	Overhead	Total
\$14.00	\$3.08	\$2.66	\$19.74
\$12.00	\$2.64	\$2.28	\$16.92
\$11.00	\$2.42	\$2.09	\$15.51
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69
\$15.00	\$3.30	\$2.85	\$21.15
\$9.00	\$2.25	\$2.25	\$13.50
\$10.00	\$2.50	\$2.50	\$15.00
\$9.00	\$1.98	\$1.71	\$12.69
\$99.00	\$2.34	\$2.61	\$13.95
\$ 9.00	\$1.98	\$1.71	\$12.69
\$11.00	\$2.42	\$2.09	\$15.51
\$10.00	\$2.20	\$1.90	\$14.10
\$12.00	\$3.24	\$3.36	\$18.60
\$14.00	\$3.08	\$2.66	\$19.74
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69

#### **REFERENCES - REGION I**

Company Name
Representative
Address
Telephone No.

Company Name
Representative
Address
Telephone No.

Company Name

Representative

Telephone No.

Address

Wheeling Jesuit University

Roy Fuller

316 Washington Avenue Wheeling, WV

304-243-2426

Northwest Pipe

Kelly Shultz

183 Northwest Drive, washington, WV

304-863-3316

Troy Group

Aimee Orum

3 Bryan Drive, Wheeling,

304-232-0899

Signature: S-7-W

#### PRICING PAGE - TEMP14 REGION II

Vendor Name:	
# Years Providing Temp	Svc
Contact Person:	
Phone #	

Fax #

Word Processor

Winans Sanitary Supply Co., Inc

Jim Winans 304-485-4000

304-485-7570

NOTE: If you do not cover entire region, circle counties where you do supply temporaries.

Region II - Mason, Cabell, Wayne, Mingo, Logan, Boone, Lincoln, Kanawha, Putnam, Roane and Jackson

	CLASSIFICATION
1	Accounting Technician 2
2	Administrative Services Assistant 1
3	Administrative Services Assistant 2
4	Cook
5	Custodian
6	Data Entry Operator 2
7	Executive Secretary
8	Groundskeeper
9	Health Service Worker (Certified Nursing Program)
10	Laboratory Assistant 3
11	Laborer
12	Mail Runner
13	Office Assistant 2
14	Office Assistant 3
15	Painter
16	Paralegal
17	Parking Attendant

Worker Pay	Withholding	Overhead	Total
\$14.00	\$3.08	\$2.66	\$19.74
\$12.00	\$2.64	\$2.28	\$16.92
\$11.00	\$2.42	\$2.09	\$15.51
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69
\$15.00	\$3.30	\$2.85	\$21.15
\$ 9.00	\$2.25	\$2.25	\$13.50
\$10.00	\$2.50	\$2.50	\$15.00
\$ 9.00	\$1.98	\$1.71	\$12.69
\$ 9.00	\$2.34	\$2.61	\$13.95
\$ 9.00	\$1.98	\$1.71	\$12.69
\$11.00	\$2.42	\$2.09	\$15.51
\$10.00	\$2.20	\$1.90	\$14.10
\$12.00	\$3.24	\$3.36	\$18.69
\$14.00	\$3.08	\$2.66	\$19.74
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69

**REFERENCES - REGION II** Champion Industries Company Name <u>Kenny Lore</u> Representative 120 Hills Plaza, Charleston WV Address 304-720-0343 Telephone No. Dutch Miller Company Name Cathy McIihenny Representative 1100 Washington Ave Huntington, WV Address 304-529-2301 Telephone No. Stationers Company Name Levi Conaway Representative 1945 5th Avenue Huntington, Address Telephone No. 304-528-2780

## PRICING PAGE - TEMP14 REGION III

Vendor Name: # Years Providing Temp Svc: Contact Person: Phone #: Fax #

<u>Winans Sanitary</u> Supply Co., Inc. <u>26</u> <u>Jim Winans</u> 304-485-4000 304-485-7570

NOTE: If you do not cover entire region, circle counties where you do supply temporaries.

Region III - Lewis, Upshur, Randolph, Pendleton, Hardy, Grant, Hampshire, Mineral, Morgan, Berkeley, Jefferson, Tucker, Barbour, Taylor, and Preston

	CLASSIFICATION
	1 Accounting Technician 2
	2 Administrative Services Assistant 1
	3 Administrative Services Assistant 2
4	Cook
5	Custodian
6	Data Entry Operator 2
7	Executive Secretary
8	Groundskeeper
9	Health Service Worker (Certified Nursing Program)
10	Laboratory Assistant 3
11	Laborer
12	Mail Runner
13	Office Assistant 2
14	Office Assistant 3
15	Painter
16	Paralegal
17	Parking Attendant
18	Word Processor

EGION III			
Worker Pay	Withholding	Overhead	Total
\$14.00	\$3.08	\$2.66	\$19.74
\$12.00	\$2.64	\$2.28	\$16.92
\$11.00	\$2.42	\$2.09	\$15.51
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69
\$15.00	\$3.30	\$2.85	\$21.15
\$ 9.00	\$2.25	\$2.25	\$13.50
\$10.00	\$2.50	\$2.50	\$15.00
\$ 9.00	\$1.98	\$1.71	\$12.69
\$ 9.00	\$2.34	\$2.61	\$13.95
\$ 9.00	\$1.98	\$1.71	\$12.69
\$11.00	\$2.42	\$2.09	\$15.51
\$10.00	\$2.20	\$1.90	\$14.10
\$12.00	\$3.24	\$3.36	\$18.60
\$14.00	\$3.08	\$2.66	\$19.74
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69

### REFERENCES - REGION III

Company Name Representative Address Telephone No.	Percheron, LLC Rod Rogers 320 Southview Drive, Ste 400 Bridgeport WV 304 842 5559
Company Name Representative Address Telephone No.	WVCLE Jessica Justice Morgantown, WV 304-293-6930
Company Name Representative Address Telephone No.	Queen City Systems Sharon Loewenbick P.O. Box 3556 LaVale MD 301-759-4700

Signature: 5-7. W

#### PRICING PAGE - TEMP14 REGION IV

Vendor Name: # Years Providing Temp Svc: Contact Person:

Phone #: Fax #

17 Parking Attendent18 Word Processor

Winans Sanitary Supply Co., Inc.

Jim Winans

304-485-4000

304-485-7570

NOTE: If you do not cover entire region, circle counties where you do supply temporaries.

Region IV - Braxton, Clay, Nicholas, Fayette, Raleigh, Wyoming, McDowell, Mercer, Summers, Greenbrier, Pocahontas, Webster and Monroe

### CLASSIFICATION

Accounting Technician 2 Administrative Services Assistant 1 Administrative Services Assistant 2 4 Cook 5 Custodian Data Entry Operator 2 7 Executive Secretary Groundskeeper 8 Health Service Worker (Certified Nursing Program) 10 Laboratory Assistant 3 11 Laborer 12 Mail Runner 13 Office Assistant 2 14 Office Assistant 3 15 Painter 16 Paralegal

EGION IV Worker Pay	Withholding	T	
	withholding	Overhead	Total
\$14.00	\$3.08	\$2.66	\$19.74
\$12.00	\$2.64	\$2.28	\$16.92
\$11.00	\$2.42	\$2.09	\$15.51
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69
\$15.00	\$3.30	\$2.85	\$21.15
\$ 9.00	\$2.25	\$2,25	\$13.50
\$10.00	\$2.50	\$2.50	\$15.00
\$ 9.00	\$1.98	\$1.71	\$12.69
\$ 9.00	\$2.34	\$2.61	\$13.95
\$ 9.00	\$1.98	\$1.71	\$12.69
\$ 11.00	\$2.42	\$2.09	\$15.51
\$10.00	\$2.20	\$1.90	\$14.10
\$12.00	\$3.24	\$3.36	\$18.60
\$14.00	\$3.08	\$2.66	\$19.74
8.00	\$2.00	\$2.00	\$12.00
\$ 9.00	\$1.98	\$1.71	\$12.69

#### **REFERENCES - REGION IV**

Company Name WV Dept of Tourism Representative Lynda Keeney Address 90 MacCorkle Ave, SW South Charleston WV Telephone No. 304-957-9321 Company Name Capitol Mini Storage Representative Aimee Roberts Address 410 58th St/604 Park Avenue Charleston WV Telephone No. 304-412-2437 Company Name Executive Air Representative Joey Epling Address 300 Eagle Drive, Charleston WV Telephone No. 304-343-8818

Signature: