

NOTICE

Please note that this bid from Associated Reporters Int'l for WWV17*4 was received at the Purchasing Division office prior to the established bid opening date and time on April 25, 2017, but was not loaded properly within wvOASIS at the public bid opening. This bid has since been loaded and is now posted.



Diane Holley-Brown
Assistant Purchasing Director



West Virginia Purchasing Division

2019 Washington Street, East
Charleston, WV 25305
Telephone: 304-558-2306
General Fax: 304-558-6026
Bid Fax: 304-558-3970

The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header 2

[List View](#)

General Information

[Contact](#)[Default Values](#)[Discount](#)[Document Information](#)

Procurement Folder: 313325

Procurement Type: Central Master Agreement

Vendor ID: VS0000008316



Legal Name: Associated Reporters Int'l., Inc.

Alias/DBA:

Total Bid: \$0.00

Response Date: 04/24/2017



Response Time: 12:25

SO Doc Code: CRFQ

SO Dept: 0323

SO Doc ID: WWW1700000004

Published Date: 4/12/17

Close Date: 4/25/17

Close Time: 13:30

Status: Closed

Solicitation Description: Addendum No. 1 Transcription Services, Legal and Medica

Total of Header Attachments: 2

Total of All Attachments: 2



Purchasing Division
 2019 Washington Street East
 Post Office Box 50130
 Charleston, WV 25305-0130

**State of West Virginia
 Solicitation Response**

Proc Folder : 313325

Solicitation Description : Addendum No. 1 Transcription Services, Legal and Medica

Proc Type : Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2017-04-25 13:30:00	SR 0323 ESR04221700000005123	1

VENDOR

VS0000008316
 Associated Reporters Int'l., Inc.

Solicitation Number: CRFQ 0323 WWV1700000004

Total Bid : \$0.00 **Response Date:** 2017-04-24 **Response Time:** 12:25:02

Comments:

FOR INFORMATION CONTACT THE BUYER

Melissa Pettrey
 (304) 558-0094
 melissa.k.pettrey@wv.gov

Signature on File

FEIN #

DATE

All offers subject to all terms and conditions contained in this solicitation

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	Transcription Services, Legal and Medical	0.00000	EA	\$10.000000	\$0.00

Comm Code	Manufacturer	Specification	Model #
82111603			

Extended Description : Transcription Services, Legal and Medical per the specifications attached herein.

Associated Reporters International, Inc.

*Local, National and International Coverage
Verbatim Reporting & Transcription Services
800.523.7887*

April 24, 2017

Department of Administration
Purchasing Division
2019 Washington Street E
Charleston WV 25305-0130

RFQ: WV-1700000004
Transcription Services

Dear Ms. Pettrey:

We have reviewed the RFQ in its entirety and have no problem complying with the list of requirements set for on page 24, Section 3. We agree with and fully understand the mandatory specifications.

Associated Reporters Int'l., Inc. has been in business for over 30 years and has been providing court reporting, legal and medical transcription services during that time-period.

If you should have any questions, please do not hesitate to contact our office.

Sincerely,

Tracy Williams

Tracy Williams
Marketing Manager

TW/me

•Please note sending office •

□
125 Wolf Road
Albany, New York 12205
Telephone: 518.465.8029
Facsimile: 518.465.0521

XX
213 Main Street, P.O. Box 165
Massena, New York 13662
Telephone: 315.769.6429
Facsimile: 315.769.0322

**New York State Certified WBE
Federally Self-certified WBE**

www.courtsteno.com

E-mail: courtsteno@aol.com

DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

Tracy Williams, Marketing
(Name, Title)
Tracy Williams, Marketing
(Printed Name and Title)
213 Main Street Suite 101 Massena, NY 13662
(Address)
315-769-6429 | 315-769-0322
(Phone Number) / (Fax Number)
arii@courtsteno.com
(email address)

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

Associated Reporters Int'l, Inc
(Company)

Tracy Williams, Marketing
(Authorized Signature) (Representative Name, Title)

Tracy Williams, Marketing
(Printed Name and Title of Authorized Representative)

4/24/17
(Date)

315-769-6429 | 315-769-0322
(Phone Number) (Fax Number)

REQUEST FOR QUOTATION
Transcription Services

- 8.3 Reports:** Vendor shall provide quarterly reports and annual summaries to the Agency showing the Agency's items purchased, quantities of items purchased, and total dollar value of the items purchased. Vendor shall also provide reports, upon request, showing the items purchased during the term of this Contract, the quantity purchased for each of those items, and the total value of purchases for each of those items. Failure to supply such reports may be grounds for cancellation of this Contract.
- 8.4 Contract Manager:** During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Tracy Williams
Telephone Number: 315-769-6429
Fax Number: 315-769-0322
Email Address: ARI@COURTSTENO.COM

Appendix A

(To be completed by the Agency's Procurement Officer prior to the execution of the Addendum, and shall be made a part of the Addendum. PHI not identified prior to execution of the Addendum may only be added by amending Appendix A and the Addendum, via Change Order.)

Name of Associate: Associated Reporters Intl, Inc

Name of Agency: WORK FORCE West Virginia

Describe the PHI (do not include any actual PHI) If not applicable, please indicate the same.

Full name

Address

Medical transcripts which will include the following:

- 1) Social Security number
- 2) Date of birth
- 3) Medical conditions
- 4) Diagnosis
- 5) Medications

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 exceeds 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: ASSOCIATED REPORTERS INTL, INC

Authorized Signature: Judith Springs, PRES Date: 4-24-17

State of N.Y.

County of St. Lawrence, to-wit:

Taken, subscribed, and sworn to before me this 24th day of APRIL, 2017

My Commission expires November 1, 2020.

AFFIX SEAL HERE

NOTARY PUBLIC

[Handwritten Signature]

JENNIFER L. HURLBUT
Notary Public, State of New York
Qualified in St. Lawrence County
No. 01HU6117743
Commission Expires November 1, 2020

ADDENDUM ACKNOWLEDGEMENT FORM

SOLICITATION NO.: **WWV1700000004**

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)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> 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.

Associated Reporters Int'l, Inc.
Company

Tracy Williams
Authorized Signature

4/24/17
Date

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

AGREED

Name of Agency: WORKFORCE WV

Name of Associate: Associated Reporters
Intl, Inc

Signature: Scott Adli

Signature: Tracy Williams

Title: Deputy Executive Dir.

Title: Marketing

Date: 3/16/17

Date: 4/24/17

Form - WVBAA-012004
Amended 6/6/26/2013

APPROVED AS TO FORM THIS 26th
DAY OF Jun 20 17
Patrick Morrissey
Attorney General
BY [Signature]

Hearing Decisions/Orders Transcription Services
 Exhibit "A"
 Pricing Page

ITEM	Description	Unit of Measure	Unit Price	Est. Quantity	Extended Cost
1	Transcribing Hearings from Digital Recordings	Per Page	10.00	1000	10,000
2	Typing of Decisions/Orders	Per Page	10.00	1000	10,000
Total Bid Amount					20,000
<p>** Vendor should not alter pricing page and should fill out the pricing page as it is. The addition or alterations of the pricing page and or addition of commodities other than those listed on the pricing page online or as an attachment, will result in disqualification of bid submittal.</p>					