

Deliver to: Department of Administration, Purchasing Division  
2019 Washington Street East  
Charleston, WV 25305-0130

RECEIVED  
2020 FEB 10 PM 1:16  
WV PURCHASING  
DIVISION

SEALED BID:

BUYER: WEST VIRGINIA DEPARTMENT OF HEALTH & HUMAN RESOURCES

SOLICITATION NO.: CRFQ HHR2000000002

BID OPENING DATE: FEBRUARY 10, 2020

BID OPENING TIME: 1:30 PM EST

FAX NUMBER: 304-343-2788

RESPONDENT: THE MANAHAN GROUP LLC

Owner/CEO: GEORGE B. MANAHAN

ADDRESS: 222 CAPITOL STREET STE 400

CITY/STATE/ZIP: CHARLESTON, WV 25301

PHONE: 304-343-2800

EMAIL: [GMAHAN@MANAHANGROUP.COM](mailto:GMAHAN@MANAHANGROUP.COM)

By signing below, I certify that I have reviewed this Request for Quotation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this 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.

  
George B. Manahan Signature

2-7-2020  
Today's Date

# Table of Contents

Page 1	Table of Contents
Pages 2 – 9	CRFQ 0511 HHR2000000002 Version 4 Forms
Pages 10 – 11	Addendum Acknowledgement Form
Pages 12 – 13	Certificate of Liability Insurance
Pages 14 – 15	Certificate of Workers Compensation Insurance
Pages 16 – 17	Designated Contact and Certification and Signature
Pages 18 – 19	Contract Manager
Pages 20 – 22	Cost Pages
Pages 23 – 24	Purchasing Affidavit
Pages 25 – 27	Disclosure of Interested Parties to Contracts
Pages 28 – 36	WV Business Registration and LLC Designation and Amendments
Pages 37 – 38	Vendor Preference Certificate
Pages 39 – 40	Proof of Vendor Registration

**CRFQ 0511 HHR2000000002 Version 4 Forms**



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

State of West Virginia  
 Request for Quotation  
 33 - Service - Misc

Proc Folder: 655325

Doc Description: Addendum No. 3 - Advertising Services

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2020-02-03	2020-02-10 13:30:00	CRFQ 0511 HHR2000000002	4

**BID RECEIVING LOCATION**

BID CLERK  
 DEPARTMENT OF ADMINISTRATION  
 PURCHASING DIVISION  
 2019 WASHINGTON ST E  
 CHARLESTON WV 25305  
 US


**VENDOR**

Vendor Name, Address and Telephone Number:

THE MANAHAN GROUP LLC  
 222 CAPITOL STREET STE 400  
 CHARLESTON, WV 25301  
 304-343-2800 / FAX 304-343-2788 / gmanahan@manahangroup.com

**FOR INFORMATION CONTACT THE BUYER**

Tara Lyle  
 (304) 558-2544  
 tara.l.lyle@wv.gov

Signature X  FEIN # 200201317 DATE 2/5/2020  
 All offers subject to all terms and conditions contained in this solicitation

CRFQ 0511 HHR2000000002  
 The Manahan Group LLC

**ADDITIONAL INFORMATION:**

Addendum No. 3 - to extend the bid opening from 02/07/2020 to 02/10/2020 at 1:30 pm, to provide responses to vendor questions (see attachment) and revised pricing pages - Exhibit A attached.

No other changes.

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Contract Administration/Consultation	20.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Contract Administration/Consultation

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Account Services	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Account Services

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Television Production	50.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Television Production

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	Radio Production	50.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Radio Production

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Outdoor Advertising	50.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Outdoor Advertising

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Media Buys	50.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Media Buys

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	Print Media	50.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Print Media

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
8	Internet/World Wide Web	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

**Extended Description :**  
Internet/World Wide Web

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Survey, Analysis, Evaluation	50.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

**Extended Description :**  
Survey, Analysis, Evaluation

INVOICE TO		SHIP TO	
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER		VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER	
No City	WV99999	No City	WV 99999
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
10	Design and Copy	50.00000	HOUR		



Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Design and Copy

INVOICE TO	SHIP TO
VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER  No City                                      WV99999  US	VARIOUS AGENCY LOCATIONS AS INDICATED BY ORDER  No City                                      WV 99999  US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
11	Data Acceptance and Transfer	10.00000	HOUR		

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :  
Data Acceptance and Transfer

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	Question deadline by 11:00 am	2020-01-02

<b>HHR200000002</b>	<b>Document Phase</b> Final	<b>Document Description</b> Addendum No. 3 - Advertising Services	<b>Page 7</b> <b>of 7</b>
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**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

# Addendum Acknowledgement Form

CRFQ 0511 HHR2000000002  
The Manahan Group LLC

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: CRFQ HHR2000000002**

**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 checked="" type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7  |
| <input checked="" 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 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.

THE MANAHAN GROUP LLC  
Company  
[Signature]  
Authorized Signature  
2/7/2020  
Date

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

# Certificate of Liability Insurance

CRFQ 0511 HHR2000000002  
The Manahan Group LLC



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/02/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Capital Insurance Group LLC 216 W Washington Street Charleston WV 25302		<b>CONTACT NAME:</b> Donteako Wilson	
		<b>PHONE (A/C, No, Ext):</b> (304)346-5232	<b>FAX (A/C, No):</b> (304)984-6720
		<b>E-MAIL ADDRESS:</b> don@cigww.com	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A :</b> Travelers Cas Ins Co Of Amer	<b>NAIC #</b> 19046
		<b>INSURER B :</b> Burns and Wilcox	
		<b>INSURER C :</b>	
		<b>INSURER D :</b>	
		<b>INSURER E :</b>	
		<b>INSURER F :</b>	

**COVERAGES** **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="checked" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		6800L282488	07/30/2019	07/30/2020	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300000 MED EXP (Any one person) \$ 5000 PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMP/OP AGG deductible \$ 1000
A	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS NON-OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY		BA2N945226	07/30/2019	07/30/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1000000 BODILY INJURY (Per person) \$ 1000000 BODILY INJURY (Per accident) \$ 1000000 PROPERTY DAMAGE (Per accident) \$
A	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE  DED RETENTION \$		CUP1L212693	07/30/2019	07/30/2020	EACH OCCURRENCE \$ 1000000 AGGREGATE \$ 1000000
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y / <input checked="checked" type="checkbox"/> N / A (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	<b>Professional Liability</b>		ESH00717791	07/30/2019	07/30/2020	<b>Professional Liability</b> \$1000000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

Tara Lyle, Buyer Supervisor  
Department of Administration, Purchasing Division  
2019 Washington Street, East  
Charleston, WV 25305

CRFQ 0511 HHR2000000002  
The Manahan Group LLC

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ACORD REPRESENTATIVE

Fax:

Email:

# Certificate of Workers Compensation Insurance

CRFQ 0511 HHR2000000002  
The Manahan Group LLC



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/04/2020

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. IF SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> Automatic Data Processing Insurance Agency, Inc.  1 Adp Boulevard Roseland NJ 07068	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS:  <b>INSURER(S) AFFORDING COVERAGE</b> INSURER A: Twin City Fire Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
<b>INSURED</b>  THE MANAHAN GROUP 222 CAPITOL ST STE 400  Charleston WV 25301	NAIC # 29459

**COVERAGES** **CERTIFICATE NUMBER: 1373151** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDSUBR	NSD	WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	<b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:							EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY							COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$							EACH OCCURRENCE \$ AGGREGATE \$ \$
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	N	76WEGGB4885	10/15/2019	10/15/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE -EA EMPLOYEE \$ 100,000 E.L. DISEASE -POLICY LIMIT \$ 100,000

DESCRIPTION OF OPERATIONS /LOCATIONS /VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

<b>CERTIFICATE HOLDER</b>  <h2 style="font-size: 24px; margin: 0;">INSURED COPY</h2>	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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ACORD 25 (2016/03) The ACORD name and logo are registered marks of ACORD CRFQ 0511 HHR2000000002  
The Manahan Group LLC



# Designated Contact and Certification and Signature

**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.

RON SARRETT, CONTROLLER   
(Name, Title)

RON SARRETT, CONTROLLER  
(Printed Name and Title)

222 CAPITOL STREET STE 400, CHARLESTON, WV 25301  
(Address)

304-343-2800 / 304-343-2788  
(Phone Number) / (Fax Number)

RSARRETT@MANAHANGROUP.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.

THE MANAHAN GROUP LLC  
(Company)

 GEORGE B. MANAHAN  
CEO  
(Authorized Signature) (Representative Name, Title)

GEORGE B. MANAHAN / OWNER/CEO  
(Printed Name and Title of Authorized Representative)

2/7/2020  
(Date)

304-343-2800 / 304-343-2788  
(Phone Number) (Fax Number)

# Contract Manager

REQUEST FOR QUOTATION  
CRFQ HHR2000000002 - ADVERTISING SERVICES

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**11. MISCELLANEOUS:**

**11.1. 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: RON JARRETT  
Telephone Number: 304-343-2900  
Fax Number: 304-343-2788  
Email Address: RJARRETT@MANAHANGROUP.COM

# Cost Pages

REQUEST FOR QUOTATION  
CRFQ HHR2000000002 – Addendum No. 3  
ADVERTISING SERVICES

**Exhibit A - PRICING PAGE – Revised by Addendum No. 3 issued 2/3/2020**

Service	Estimated Hours	All-Inclusive Hourly Rate	Extended Cost
Contract Administration / Consultation	20	\$ 105	\$ 2100.00
Account Services	10	\$ 105	\$ 1050.00
Television Production	50	\$ 20	\$ 1000.00
Radio Production	50	\$ 20	\$ 1000.00
Outdoor Advertising	50	\$ 20	\$ 1000.00
Media Buys	50	\$ 105	\$ 5250.00
Print Media	50	\$ 20	\$ 1000.00
Internet/World Wide Web	10	\$ 75	\$ 750.00
Survey, Analysis, Evaluation	50	\$ 20	\$ 1000.00
Design and Copy	50	\$ 105	\$ 5250.00
Data Acceptance and Transfer	10	\$ - 0 -	\$ - 0 -
<b>Advertising Services / Hourly Rates Subtotal</b>			<b>\$ 19,400.00</b>

**A. Advertising Services / Hourly Rates**

**B. Media Buys Add-On**

All vendors responding to this CRFQ must provide a percentage of add-on or “markup” for media buying activities if the vendor will charge the agency an add-on to the actual costs for media buys. Vendors not intending to charge an add-on will use an add-on percentage of Zero (0) with a multiplier of 1.0. If a vendor fails to provide an add-on percentage, it will be interpreted as no add-on for media buys during the life of the contract.

Add-on for Media Buys Percentage 0 %

Multiplier (Convert percentage to a decimal and add to 1) (For example, 10% would be .10 making multiplier 1.10) \$2,750,000 is the amount of estimated media buys.

1.00 x \$2,750,000 = 2,750,000 Media Buys Add-on Subtotal

**See next page.**

REQUEST FOR QUOTATION  
CRFQ HHR2000000002 – Addendum No. 3  
ADVERTISING SERVICES

Advertising Services/Hourly Rates Subtotal (A): \$ 19,400.00  
Media Buys Add-ons Subtotal (B): \$ 2,750,000.00  
Overall Total Cost: \$ 2,769,400.00  
(Advertising Services/Hourly Rates  
Subtotal plus Media Buys Add-on Subtotal)

Note: Bids will be evaluated on the basis of the lowest Overall Total Cost following confirmation of compliance with all mandatory specification requirements. Estimated hours and media buys noted on the Pricing Page for service categories are estimates for evaluation purposes only; actual hours may be more or less at the discretion of DHHR. The contract will be awarded to the lowest overall total cost meeting all mandatory requirements.

THE MANAHAN GROUP LLC

Vendor

By: GEORGE B. MANAHAN  
Title: OWNER/CEO  
Date: 2/7/2020

Address:  
222 CAPITAL ST STE 400  
CHARLESTON, WV 25301

Business Phone Number: 304-343-2800

Email: G.MANAHAN@MANAHANGROUP.COM

Authorized Signature: 

# Purchasing Affidavit



STATE OF WEST VIRGINIA  
Purchasing Division

**PURCHASING AFFIDAVIT**

**CONSTRUCTION CONTRACTS:** Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

**ALL CONTRACTS:** 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: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, 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: THE MANAHAN GROUP LLC

Authorized Signature: [Signature] Date: 2-7-2020

State of West Virginia

County of Kanawha, to-wit:

Taken, subscribed, and sworn to before me this 7 day of February, 2020.

My Commission expires August 22, 2023.



**NOTARY PUBLIC** [Signature]  
Purchasing Affidavit (Revised 01/19/2019)

# Disclosure of Interested Parties to Contracts

## West Virginia Ethics Commission



### Disclosure of Interested Parties to Contracts

Pursuant to *W. Va. Code* § 6D-1-2, a state agency may not enter into a contract, or a series of related contracts, that has/have an actual or estimated value of \$1 million or more until the business entity submits to the contracting state agency a Disclosure of Interested Parties to the applicable contract. In addition, the business entity awarded a contract is obligated to submit a supplemental Disclosure of Interested Parties reflecting any new or differing interested parties to the contract within 30 days following the completion or termination of the applicable contract.

For purposes of complying with these requirements, the following definitions apply:

*"Business entity"* means any entity recognized by law through which business is conducted, including a sole proprietorship, partnership or corporation, but does not include publicly traded companies listed on a national or international stock exchange.

*"Interested party"* or *"Interested parties"* means:

- (1) A business entity performing work or service pursuant to, or in furtherance of, the applicable contract, including specifically sub-contractors;
- (2) the person(s) who have an ownership interest equal to or greater than 25% in the business entity performing work or service pursuant to, or in furtherance of, the applicable contract. (This subdivision does not apply to a publicly traded company); and
- (3) the person or business entity, if any, that served as a compensated broker or intermediary to actively facilitate the applicable contract or negotiated the terms of the applicable contract with the state agency. (This subdivision does not apply to persons or business entities performing legal services related to the negotiation or drafting of the applicable contract.)

*"State agency"* means a board, commission, office, department or other agency in the executive, judicial or legislative branch of state government, including publicly funded institutions of higher education: Provided, that for purposes of *W. Va. Code* § 6D-1-2, the West Virginia Investment Management Board shall not be deemed a state agency nor subject to the requirements of that provision.

The contracting business entity must complete this form and submit it to the contracting state agency prior to contract award and to complete another form within 30 days of contract completion or termination.

*This form was created by the State of West Virginia Ethics Commission, 210 Brooks Street, Suite 300, Charleston, WV 25301-1804. Telephone: (304)558-0664; fax: (304)558-2169; e-mail: [ethics@wv.gov](mailto:ethics@wv.gov); website: [www.ethics.wv.gov](http://www.ethics.wv.gov).*

### West Virginia Ethics Commission Disclosure of Interested Parties to Contracts

(Required by W. Va. Code § 6D-1-2)

Name of Contracting Business Entity: THE MANAHAN GROUP LLC Address: 222 CAPITOL ST STE 400  
CHARLESTON, WV 25301

Name of Authorized Agent: GEORGE B. MANAHAN Address: (SAME AS ABOVE)

Contract Number: HHR2000000002 Contract Description: ADVERTISING SERVICES

Governmental agency awarding contract: WEST VIRGINIA DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Check here if this is a Supplemental Disclosure

List the Names of Interested Parties to the contract which are known or reasonably anticipated by the contracting business entity for each category below (attach additional pages if necessary):

**1. Subcontractors or other entities performing work or service under the Contract**

Check here if none, otherwise list entity/individual names below.

**2. Any person or entity who owns 25% or more of contracting entity (not applicable to publicly traded entities)**

Check here if none, otherwise list entity/individual names below.

**3. Any person or entity that facilitated, or negotiated the terms of, the applicable contract (excluding legal services related to the negotiation or drafting of the applicable contract)**

Check here if none, otherwise list entity/individual names below.

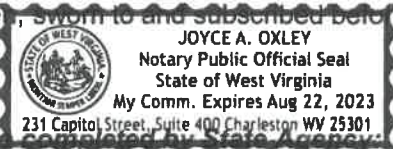
Signature: [Handwritten Signature] Date Signed: 2-7-2020

**Notary Verification**

State of West Virginia, County of Kanawha

I, \_\_\_\_\_, the authorized agent of the contracting business entity listed above, being duly sworn, acknowledge that the Disclosure herein is being made under oath and under the penalty of perjury.

Take, sworn to and subscribed before me this 7 day of February, 2020.



[Handwritten Signature]  
Notary Public's Signature

To be completed by State Agency:  
Date Received by State Agency: \_\_\_\_\_  
Date submitted to Ethics Commission: \_\_\_\_\_  
Governmental agency submitting Disclosure: \_\_\_\_\_

# **Business Registration and LLC Designation and Amendments**

**WEST VIRGINIA  
STATE TAX DEPARTMENT  
BUSINESS REGISTRATION  
CERTIFICATE**

ISSUED TO:  
**MANAHAN GROUP LLC THE  
DBA MANAHAN GROUP THE  
222 CAPITOL ST 400  
CHARLESTON, WV 25301-2415**

**BUSINESS REGISTRATION ACCOUNT NUMBER: 1008-7832**

This certificate is issued on: **11/16/2010**

*This certificate is issued by  
the West Virginia State Tax Commissioner  
in accordance with Chapter 11, Article 12, of the West Virginia Code*

*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 them.  
**CONTRACTORS, DRILLING OPERATORS, TIMBER/LOGGING OPERATIONS:** Must have a copy of this certificate displayed at every job site within West Virginia.

aIL006 v.4  
L1614938112

CRFQ 0511 HHR2000000002  
The Manahan Group LLC

CR

# State of West Virginia



## Certificate

*I, Joe Manchin III, Secretary of State of the State of West Virginia, hereby certify that*

**MANAHAN & PAULEY LLC**

**Control Number: 59437**

has filed its "Articles of Organization" in my office according to the provisions of West Virginia Code §§31B-2-203 and 206. I hereby declare the organization to be registered as a limited liability company from its effective date of September 4, 2003 until the expiration of the term or termination of the company.

Therefore, I hereby issue this

### **CERTIFICATE OF A LIMITED LIABILITY COMPANY**



*Given under my hand and the Great Seal of the State of West Virginia on this day of September 4, 2003*

*Secretary of State*

CRFQ 0511 HHR200000002  
The Manahan Group LLC

Joe Manchin III  
Secretary of State  
State Capitol Building  
1900 Kanawha Blvd. East  
Charleston, WV 25305-0770

Penney Barker, Team Leader  
Corporations Division  
Tel: (304) 558-8000  
Fax: (304) 558-5758  
Hours: 8:30 a.m. - 5:00 p.m. ET

**WEST VIRGINIA  
ARTICLES OF ORGANIZATION  
OF LIMITED LIABILITY COMPANY**

Control # 59437

We, acting as organizers according to West Virginia Code §31B-2-202, adopt the following Articles of Organization for a West Virginia Limited Liability Company:

1. The name of the West Virginia limited liability company shall be: (The name must contain one of the required terms such as "limited liability company" or abbreviations such as "LLC" or "PLLC"--see instructions for list of acceptable terms.)  
Manahan & Pauley LLC

2. The company will be a:  LLC  professional LLC for the profession of \_\_\_\_\_

3. The address of the initial designated office of the company will be: (need not be a place of the company's business)  
Street: Suite 1710, 900 Lee Street, East  
City/State/Zip: Charleston WV 25301

4. The mailing address of the principal office, if different, will be:  
Street/Box: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

5. The name and street address of the person to whom notice of process may be sent, if any, is:  
Name: Brent Pauley  
Street: Suite 1710, 900 Lee Street, East  
City/State/Zip: Charleston, WV 25301

The mailing address of the above agent of process, if different, is:  
Street/Box: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_

**FILED**  
SEP 4 2003

6. The name and address of each organizer and member with signature authority.

<u>Name</u>	<u>No. &amp; Street</u>	<u>City, State, Zip</u>
<u>Brent Pauley</u>	<u>Suite 1710, 900 Lee Street, East</u>	<u>Charleston, WV 25311</u>
<u>George Manahan</u>	<u>Suite 1710, 900 Lee Street East</u>	<u>Charleston, WV 25311</u>

IN OFFICE OF  
JOE MANCHIN III  
SECRETARY OF STATE

7. The company will be:  an at-will company, for an indefinite period.  
 a term company, for the term of 100 years.



8. The company will be:  member-managed. [Professional LLCs, please list all members on attached sheet to assure compliance with licensing requirements.]  
 manager-managed, and the name and address of each initial manager is listed below. [Attach extra sheet if needed.]  
George Manahan Suite 1710, 900 Lee Street, East, Charleston WV 25311  
Brent Pauley Suite 1710, 900 Lee Street, East, Charleston WV 25311

9. All or specified members of a limited liability company are liable in their capacity as members for all or specified debts, obligations or liabilities of the company.  NO— All debts, obligations and liabilities are those of the company.  
 YES— Those persons who are liable in their capacity as members for all debts, obligations or liability of the company have consented in writing to the adoption of the provision or to be bound by the provision.

10. The purposes for which this limited liability company is formed are as follows:  
 (Describe the type(s) of business activity which will be conducted, for example, "real estate," "construction of residential and commercial buildings," "commercial printing," "professional practice of architecture.")  
 marketing, advertising, public relations and any other lawful business

11. Other provisions which may be set forth in the operating agreement or matters not inconsistent with law:  
 [See instructions for further information; use extra pages if necessary.]  
 NONE

12. The number of pages attached and included in these Articles is 0.

13. The requested effective date is:  the date & time of filing  
 [Requested date may not be earlier than filing nor later than 90 days after filing.]  the following date \_\_\_\_\_ and time \_\_\_\_\_

14. Contact and Signature Information:

a. Contact person to reach in case there is a problem with filing: Brent Pauley

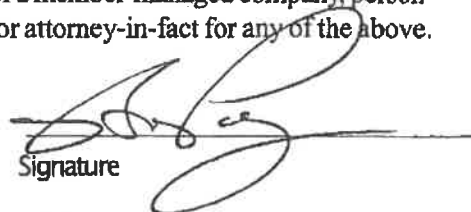
Phone # (304) 343-2800

b. Print Name of person who is signing articles of organization: Brent Pauley

c. Signature of : (manager of a manager-managed company, member of a member-managed company, person organizing the company, if the company has not been formed or attorney-in-fact for any of the above.

Brent Pauley  
 Name [print or type]

Organizer  
 Title/Capacity

  
 Signature

State of West Virginia  
  
Certificate

*I, Betty Ireland, Secretary of State of the  
State of West Virginia, hereby certify that*

originals of the Articles of Amendment to the Articles of Organization of  
**MANAHAN & PAULEY LLC**

are filed in my office, signed and verified, as required by the provisions of West Virginia Code  
§31B-2-204 and conform to law. Therefore, I issue this

**CERTIFICATE OF AMENDMENT TO THE  
ARTICLES OF ORGANIZATION**

changing the name of the limited liability company to

**THE MANAHAN GROUP LLC**

and I attach to this certificate a duplicate original of the Articles of Amendment.



*Given under my hand and the  
Great Seal of the State of  
West Virginia on this day of  
June 14, 2005*

*Betty Ireland*

*Secretary of State*

Secretary of State  
State Capitol Bldg.  
1900 Kanawha Blvd. East  
Charleston, WV 25305



Corporations Division  
Tel: (304) 558-8000  
Fax: (304) 558-5758  
Hrs - 8:30am-5:00pm

[www.wvsos.com](http://www.wvsos.com)

WEST VIRGINIA  
ARTICLES OF AMENDMENT TO  
ARTICLES OF ORGANIZATION

[business@wvsos.com](mailto:business@wvsos.com)

FEE: 525

In accordance with §31B-2-204 of the Code of West Virginia, the undersigned organization adopts the following Articles of Amendment to its Articles of Organization:

The name of the organization is Manahan & Pauley LLC

Date of filing Articles of Organization with the West Virginia Secretary of State: 9/4/03

Change of Name information or Text of Amendment

Change of name from Manahan & Pauley LLC

To: The Manahan Group LLC

Other amendment (use additional pages if necessary)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Contact name and number of person to reach in case of problem with filing: (optional, however, listing one may help to avoid a return or rejection of filing if there appears to be a problem with the document)

Name: Charles O. Lorensen Phone: 343-5555

Signature of person executing document:

Signature

Member  
Capacity in which he/she is signing  
(Example: member, manager, etc.)

**FILED**

JUN 14 2005

PRINT THIS COPY, THEN CLICK HERE TO RESET.

IN THE OFFICE OF  
SECRETARY OF STATE

Form LLD-2

Issued by the WV Secretary of State

Revised 1/05

CRFQ 0511 HHR2000000002  
The Manahan Group LLC

# State of West Virginia

## Certificate

*I, Natalie E. Tennant, Secretary of State of the  
State of West Virginia, hereby certify that*

**THE MANAHAN GROUP LLC**

has filed a "Certificate of Registration of Trade Name" in my office according to the provisions of Chapter 47 of the West Virginia Code and was found to conform to law.

Therefore, I hereby issue this

### **CERTIFICATE OF REGISTRATION OF TRADE NAME**

authorizing it to transact business in West Virginia under the assumed name of

**THE MANAHAN GROUP**



*Given under my hand and the  
Great Seal of the State of  
West Virginia on this day of  
November 18, 2010*

*Natalie E. Tennant*

*Secretary of State*

CRFQ 0511 HHR2000000002  
The Manahan Group LLC

FILED

NOV 18 2010

Natalie E. Tennant  
Secretary of State  
1900 Kanawha Blvd E.  
Bldg 1, Suite 157-K  
Charleston, WV 25305



IN THE OFFICE OF  
SECRETARY OF STATE

Penney Barker, Manager  
Corporations Division  
Tel: (304)558-8000  
Fax: (304)558-8381  
[www.wvsos.com](http://www.wvsos.com)

FILE ONE ORIGINAL  
(Two if you want a filed  
stamped copy returned to you)  
FEE: \$25.00

APPLICATION FOR  
TRADE NAME

Hrs: 8:30 a.m. - 5:00 p.m. ET

1. The name of the company applying to register a trade name is:

THE MANAHAN GROUP LLC

2. The above company is applying to do business within West Virginia under the following trade name:

THE MANAHAN GROUP

3. The address of the principal office:

222 CAPITOL ST STE 400  
CHARLESTON, WV 25301

4. The name, title, address and signature of the person having authority to make application:

Name: GEORGE B. MANAHAN  
Street: 222 CAPITOL ST STE 400  
City/State/Zip: CHARLESTON, WV 25301

5. Signature:

Title: OWNER/CEO

**BEFORE you fill out the application:** The name you select will be approved only if it is available--- that is, if the name is not the same as and is distinguishable from any other name which has been reserved or filed. Before you prepare this application, call the Corporations Division at (304)558-8000 to find out if the name you have chosen is available. A telephone check on availability of a name is not a guarantee, but it will help find a name you can use.

As required by §47-8-4 of the West Virginia Code, corporations, associations, limited partnerships, limited liability partnerships, business trusts, and limited liability companies may not conduct business under a trade name or assumed name without first filing an application for registration of trade name with the Secretary of State.

**FILE THE APPLICATION AT THE ADDRESS ON THE TOP OF THE APPLICATION  
FEE -- \$25 Make checks payable to the WV Secretary of State.**

# Vendor Preference Certificate

CRFQ 0511 HHR2000000002  
The Manahan Group LLC

VENDOR PREFERENCE CERTIFICATE

Certification and application is hereby made for Preference in accordance with *West Virginia Code*, §5A-3-37, (as amended by 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 Vendor Preference, if applicable.

1.  **Application is made for 2.5% vendor preference for the reason checked:**  
Bidder is an individual resident vendor and has resided continuously in West Virginia, 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,

Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; 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% 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% vendor preference for the reason checked:**  
Bidder is a nonresident vendor that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's bid; or,

4.  **Application is made for 5% 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% 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% 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.

7.  **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.

8.  **Application is made for reciprocal preference.**  
 Bidder is a West Virginia resident and is requesting reciprocal preference to the extent that it applies.

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) rescind the contract or purchase order; 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.

**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: THE MANAHAN GROUP LLC

Signed: [Signature]

Date: 2/7/2020

Title: OWNER/CEO

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

# Proof of Vendor Registration

CRFQ 0511 HHR2000000002  
The Manahan Group LLC





Welcome, Ronald

[View Frequently](#)

[Home](#) | [Help](#) | [Accessible Help](#) | [Site Map](#) | [Privacy Report](#) | [Logout](#)

[Account Information](#) | [Financial Transactions](#) | [Business Opportunities](#) | [Solicitation Responses](#) | [Catalog Management](#)

**Summary** | [Business Info](#) | [Addresses & Contacts](#) | [Users](#) | [Commodities](#) | [Business Types](#) | [Service Areas](#) | [Disclosures](#)

▼ **Account Information**

Vendor Code : 00000106305 Vendor Status : Active  
Legal Business Name : THE MANAHAN GROUP LLC 1099 Reportable : No

▼ **EFT Information**

EFT information may be entered at an account level or at the payment address level. If the Address Level field displays a value of 'N' (at least one address has address-specific EFT information), navigate to the Addresses page to view the EFT Status for each address.

Account Level EFT Status : N/A  
Address Level EFT Information Available : Yes

▼ **Prevent New Spending**

This section indicates whether new spending/payments are blocked. Refer to Frequently Asked Questions for more information.

Prevent New Spending : No

▼ **Prevent New Orders**

This section indicates whether new purchase orders are blocked. Refer to Frequently Asked Questions for more information.

Prevent New Orders : No

▼ **Registration Fee Details**

[Click here to renew vendor registration fees](#)

Registration Application Date : 09/12/2019  
Registration Effective Date : 09/12/2019  
Registration Expiration Date : 09/12/2020

▼ **Vendor Compliance Holds**

If any compliance hold entries are marked as Yes, you are not in compliance.

Tax Clearance : No  
Unemployment Insurance : No  
Worker's Compensation : No  
Secretary of State Registration : No  
Federal Debarred : No

▼ **Payment Withholding**

Existing Payment Hold: No  
1099 Backup Withholding : No

▼ **Financial Balance Overview**

Open Agreements/Awards : \$1,200,889.09  
Scheduled Payments :  
Total Payments Issued : \$4,800,144.11  
Total Payments Issued (Calendar Year) : \$0,808.75  
Total Payments Issued (Prior Years) : \$4,775,335.36