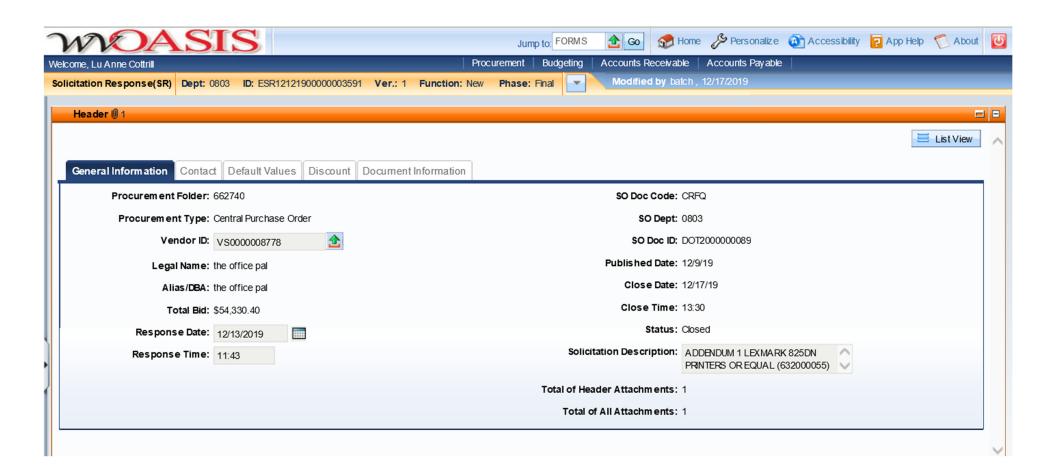


2019 Washington Street, East Charleston, WV 25305 Telephone: 304-558-2306 General Fax: 304-558-6026

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.





# State of West Virginia Solicitation Response

Proc Folder: 662740

Solicitation Description: ADDENDUM 1 LEXMARK 825DN PRINTERS OR EQUAL (632000055)

Proc Type: Central Purchase Order

Date issued   Solicitation Closes   Solicitation Response   Version	
2019-12-17 SR 0803 ESR12121900000003591 1 13:30:00	

VENDOR

VS0000008778

the office pal

the office pal

Solicitation Number: CRFQ 0803 DOT2000000089

**Total Bid:** \$54,330.40 **Response Date:** 2019-12-13 **Response Time:** 11:43:33

**Comments:** 

FOR INFORMATION CONTACT THE BUYER

Crystal G Hustead (304) 558-2402 crystal.g.hustead@wv.gov

Signature on File FEIN # DATE

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

Page: 1 FORM ID: WV-PRC-SR-001

	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
1	(20) Lexmark 825 DN Printers or Equal	20.00000	EA	\$1,604.600000	\$32,092.00
Comm Code	Manufacturer	Specification		Model #	
43212100					
Extended Description : (20) Lexmark 825 DN Prin		ers or Equal			
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	(20) IDPS Network Printing Card installed in printer	20.00000	EA	\$453.000000	\$9,060.00
Comm Code	Manufacturer	Specification		Model #	
44101700					
Extended Description : (20) IDPS Network Printin		g Card installed i	n printer		
Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
	Next Business Day Onsite Warranty	20.00000	EA	\$658.920000	\$13,178.40
3	Uplift				
3 Comm Code	Uplift Manufacturer	Specification		Model #	

**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.

Latzie	Tober	sales	s Man	ag	er					
(Name,	Title)									
	Name a			8	Suite	801	Freehold,	NJ	07728	
(Addres	6-0590 /	732-	363-6	93	3		16.			
(Phone latzie	Number otheoffic	)/(Fa	x Nu	ım	ber)					
(email a	ddress)									

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 Office Pal		
(Company)		
Lh	Sales Manager	
(Authorized Signature) (Represe	entative Name, Title)	
Latzie Tober - Sales Manager		
(Printed Name and Title of Auth	norized Representative)	
12/13/2019		
(Date)		
877-486-0590 / 732-363-6933		
(Phone Number) (Fax Number)		

# ADDENDUM ACKNOWLEDGEMENT FORM SOLICITATION NO.: CRFQ DOT2000000076

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 recei	ved)
Addendum No. 1     Addendum No. 2     Addendum No. 3     Addendum No. 4     Addendum No. 5	☐ Addendum No. 6 ☐ Addendum No. 7 ☐ Addendum No. 8 ☐ Addendum No. 9 ☐ Addendum No. 10
I further understand that any verbal represen discussion held between Vendor's representation the information issued in writing and added binding.	pt of addenda may be cause for rejection of this bid. tation made or assumed to be made during any oral atives and any state personnel is not binding. Only to the specifications by an official addendum is
The Office Pal	
Company	
Authorized Signature	
12/13/2019	
Date	
	2 10 10 2 22 22 22 22

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

## 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 tiability 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: (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:

Date: Dec 13,2019
of <u>lecember</u> , 2019.
NOTARY PUBLIC  Purchasing Affidavit (Revised 01/19/2018)