



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 6

List View

General Information

Contact

Default Values

Discount

Document Information

Procurement Folder: 722327

SO Doc Code: CRFQ

Procurement Type: Central Master Agreement

SO Dept: 0932

Vendor ID: VC0000000167

SO Doc ID: DRS2000000002

Legal Name: INDEPENDENT LIVING AIDS LLC

Published Date: 5/20/20

Alias/DBA:

Close Date: 5/27/20

Total Bid: \$0.00

Close Time: 13:30

Response Date: 05/22/2020

Status: Closed

Response Time: 10:51

Solicitation Description: Addendum 1: Responses to Questions

Total of Header Attachments: 6

Total of All Attachments: 6



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

State of West Virginia
Solicitation Response

Proc Folder : 722327

Solicitation Description : Addendum 1: Responses to Questions

Proc Type : Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2020-05-27 13:30:00	SR 0932 ESR05222000000006903	1

VENDOR

VC0000000167

INDEPENDENT LIVING AIDS LLC

Solicitation Number: CRFQ 0932 DRS2000000002

Total Bid : \$0.00 Response Date: 2020-05-22 Response Time: 10:51:26

Comments:

FOR INFORMATION CONTACT THE BUYER

Dusty J Smith
(304) 558-2063
dusty.j.smith@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	MAGNIFIERS	0.00000	EA	\$0.000000	\$0.00

Comm Code	Manufacturer	Specification	Model #
41111713			

Extended Description :	MAGNIFIERS
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Comments: See attached price list

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.

Karin Danza - Account Manager
(Name, Title)

Karin Danza - Account Manager
(Printed Name and Title)

137 Rano St. Buffalo, NY 14207
(Address)

716-332-2972 / 631-414-7395
(Phone Number) / (Fax Number)

Karin@independentliving.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.

Independent Living Aids
(Company)

Karin Danza - Account Manager
(Authorized Signature) (Representative Name, Title)

Karin Danza - Account Manager
(Printed Name and Title of Authorized Representative)

5-22-20
(Date)

716-332-2972 / 631-414-7395
(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.:

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.

Independent Living Aids
Company

Karen Dantz
Authorized Signature

5-22-20
Date

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



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

State of West Virginia
Request for Quotation
27 - Miscellaneous

Proc Folder: 722327

Doc Description: Addendum 1: Responses to Questions

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2020-05-20	2020-05-27 13:30:00	CRFQ 0932 DRS2000000002	2

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:

Independent Living Aids
137 Rano Street
Buffalo, NY 14207

FOR INFORMATION CONTACT THE BUYER

Dusty J Smith

(304) 558-2063

dusty.j.smith@wv.gov

Signature X

Karen Dargatz

FEIN #

46-4142937

DATE

5-22-20

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

ADDITIONAL INFORMATION:

ADDENDUM 1 IS ISSUED FOR THE FOLLOWING REASONS:

1. TO GIVE RESPONSES TO QUESTIONS

BID OPENING DATE AND TIME IS STAYING THE SAME.

INVOICE TO		SHIP TO	
BLIND SERVICES DIVISION OF REHABILITATION SERVICES 10 MCJUNKIN RD		BLIND SERVICES DIVISION OF REHABILITATION SERVICES 10 MCJUNKIN RD	
NITRO	WV25143	NITRO	WV 25143
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	MAGNIFIERS	0.00000	EA		

Comm Code	Manufacturer	Specification	Model #
41111713			

Extended Description :
MAGNIFIERS

SCHEDULE OF EVENTS

Line	Event	Event Date
1	TECHNICAL QUESTIONS DUE AT 10AM	2020-05-20

SOLICITATION NUMBER: DRS2000000002

Addendum Number: 1

The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

Applicable Addendum Category:

- ☐ Modify bid opening date and time
- ☐ Modify specifications of product or service being sought
- ☒ Attachment of vendor questions and responses
- ☐ Attachment of pre-bid sign-in sheet
- ☐ Correction of error
- ☐ Other

Description of Modification to Solicitation:

ADDENDUM 1 IS ISSUED FOR THE FOLLOWING REASONS:

1. TO GIVE RESPONSES TO QUESTIONS

BID OPENING DATE AND TIME IS STAYING THE SAME.

Additional Documentation: Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

Terms and Conditions:

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

ATTACHMENT A

Questions for CRFQ: DRS2000000002

Question

1. Does the Agency intend to award all the requested line items to a single awardee?

Answer

1. No, the Agency reserves the right to award to multiple vendors based on the lowest bid meeting specifications for each item bid. The specification 4.1 is revised to the following:

4.1.1 Contract Award: The Contract is intended to provide Agencies with a purchase price on all Contract items. The Contract items shall be awarded to the vendor(s) for each lowest bid item meeting specifications.

Question

2. Will a partial bid be considered or does a responder have to be able to supply all CLINS?

Answer

2. The Agency will accept partial bids for those items the vendor is able to provide.

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: DRS2000000002

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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 |
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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.

Independent Living Aids
Company

Karin Danga
Authorized Signature

5-22-20
Date

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

Revised 6/8/2012



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

State of West Virginia
Request for Quotation
27 — Miscellaneous

Proc Folder: 722327

Doc Description: TO PROVIDE VARIOUS MAGNIFIERS, PER THE ATTACHED

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2020-05-13	2020-05-27 13:30:00	CRFQ 0932 DRS2000000002	1

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:

Independent Living Aids
137 Rano Street
Bu falo, NY 14207
716-332-2972

FOR INFORMATION CONTACT THE BUYER

Dusty J Smith
(304) 558-2063
dusty.j.smith@wv.gov

Signature X

Karee Dargatzis

FEIN #

46-4142937

DATE

5-22-20

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

ADDITIONAL INFORMATION:**OPEN END**

THE STATE OF WEST VIRGINIA PURCHASING DIVISION FOR THE DIVISION OF REHABILITATION AGENCY, IS SOLICITING BIDS FOR THE OPEN-END CONTRACT OF MAGNIFIERS PER THE ATTACHED DOCUMENTS.

QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO DUSTY.J.SMITH@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE INSTRUCTIONS TO VENDORS SUBMITTING BIDS

INVOICE TO		SHIP TO	
BLIND SERVICES DIVISION OF REHABILITATION SERVICES 10 MCJUNKIN RD		BLIND SERVICES DIVISION OF REHABILITATION SERVICES 10 MCJUNKIN RD	
NITRO	WV25143	NITRO	WV 25143
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	MAGNIFIERS	0.00000	EA		

Comm Code	Manufacturer	Specification	Model #
41111713			

Extended Description :

MAGNIFIERS

SCHEDULE OF EVENTS

<u>Line</u>	<u>Event</u>	<u>Event Date</u>
1	TECHNICAL QUESTIONS DUE AT 10AM	2020-05-20

REQUEST FOR QUOTATION
VARIOUS MAGNIFIERS FOR THE VISUALLY IMPAIRED

- 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: Karin Danna
Telephone Number: 716-332-2972
Fax Number: 631-414-7395
Email Address: Karin@independentliving.com



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

State of West Virginia
Request for Quotation
27 - Miscellaneous

Proc Folder: 722327

Doc Description: TO PROVIDE VARIOUS MAGNIFIERS, PER THE ATTACHED

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2020-05-13	2020-05-27 13:30:00	CRFQ 0932 DRS2000000002	1

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:

Independent Living Aids
137 Rano Street
Buffalo, NY 14207
716-332-2972

FOR INFORMATION CONTACT THE BUYER

Dusty J Smith
(304) 558-2063
dusty.j.smith@wv.gov

Signature X

Karen Dang

FEIN #

46-4142937

DATE

5-22-20

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

ADDITIONAL INFORMATION:**OPEN END**

THE STATE OF WEST VIRGINIA PURCHASING DIVISION FOR THE DIVISION OF REHABILITATION AGENCY, IS SOLICITING BIDS FOR THE OPEN-END CONTRACT OF MAGNIFIERS PER THE ATTACHED DOCUMENTS.

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INVOICE TO	SHIP TO
BLIND SERVICES DIVISION OF REHABILITATION SERVICES 10 MCJUNKIN RD NITRO WV25143 US	BLIND SERVICES DIVISION OF REHABILITATION SERVICES 10 MCJUNKIN RD NITRO WV 25143 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	MAGNIFIERS	0.00000	EA		

Comm Code	Manufacturer	Specification	Model #
41111713			

Extended Description :

SCHEDULE OF EVENTS

Line	Event	Event Date
1	TECHNICAL QUESTIONS DUE AT 10AM	2020-05-20

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: Independent Living Aids

Authorized Signature: [Signature] Date: 5-21-20

State of NY

County of Suffolk, to-wit:

Taken, subscribed, and sworn to before me this 21 day of May, 2020.

My Commission expires _____, 20____.

AFFIX SEAL HERE

ERIC W. LANGE
NOTARY PUBLIC, State of New York
Reg. No. 01LA6285904
Qualified in Suffolk County
My Commission Expires July 15, 2017

NOTARY PUBLIC

[Signature]

Purchasing Affidavit (Revised 01/19/2018)

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2-2

Exhibit A - Pricing Page
Various Magnifiers

Item #	Item Description	Or Equal being Submitted	Or Equal Part Number	Unit of Measure	Unit Price	Estimated Qty	Extended Price
3.1.1	3X LED Stand – Mattingly MS3LED (Or Equal)	905104	905104	EA	\$28.77	75	\$2,157.75
3.1.2	3X LED Handheld – Mattingly MH3LED	905209	905209	EA	\$25.46	75	\$1,909.50
3.1.3	4X LED Stand – Mattingly MS4LED	905100	905100	EA	\$19.02	75	\$1,426.50
3.1.4	4X LED Handheld – Mattingly MH4LED	905205	905205	EA	\$16.61	75	\$1,245.75
3.1.5	5X LED Stand – Mattingly MS5LED	905105	905105	EA	\$19.02	75	\$1,426.50
3.1.6	5X LED Handheld – Mattingly MH5LED	905206	905206	EA	\$16.61	75	\$1,245.75
3.1.7	6X LED Stand – Mattingly MS6LED	905108	905108	EA	\$19.02	50	\$951.00
3.1.8	6X LED Handheld – Mattingly MH6LED	905208	905208	EA	\$16.61	50	\$830.50
3.1.9	7X LED Stand – Mattingly MS7LED	905101	905101	EA	\$19.02	50	\$951.00
3.1.10	7X LED Handheld – Mattingly MS7LED	905200	905200	EA	\$16.61	100	\$1,661.00
3.1.11	8X LED Stand – Mattingly MS8LED	905102	905102	EA	\$19.02	1	\$19.02
3.1.12	8X LED Handheld – Mattingly MH8LED	905201	905201	EA	\$16.61	1	\$16.61
3.1.13	10X LED Stand – Mattingly MS10LED	905103	905103	EA	\$19.02	1	\$19.02
3.1.14	10X LED Handheld – Mattingly MH10LED	905202	905202	EA	\$16.61	1	\$16.61
3.1.15	12X LED Stand – Mattingly MS12LED	301047	301047	EA	\$25.46	1	\$25.46
3.1.16	12X LED Handheld – Mattingly MH12LED	905203	905203	EA	\$16.61	1	\$16.61
3.1.17	14X LED Stand – Mattingly MS14LED	301055	301055	EA	\$25.46	1	\$25.46
3.1.18	14X LED Handheld – Mattingly MH14LED	905204	905204	EA	\$16.61	1	\$16.61
3.1.19	Binocular TV Glasses – Mattingly TTVDUO	301238	301238	EA	\$150.00	50	\$7,500.00
						Total Bid Amount	\$21,460.65