



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.

Solicitation Response(SR) Dept: 1400 ID: ESR01152600000003982 Ver.: 1 Function: New Phase: Final

Modified by batch, 01/23/2026

Header 7

List View

[General Information](#) [Contact](#) [Default Values](#) [Discount](#) [Document Information](#) [Clarification Request](#)

Procurement Folder: 1851339

SO Doc Code: CRFQ

Procurement Type: Central Purchase Order

SO Dept: 1400

Vendor ID: VC0000141344



SO Doc ID: AGR2600000028

Legal Name: AG WHOLESALE LLC

Published Date: 1/9/26

Alias/DBA:

Close Date: 1/23/26

Total Bid: \$79,208.00

Close Time: 13:30

Response Date: 01/15/2026

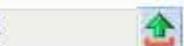


Status: Closed

Response Time: 15:25

Solicitation Description: Various Fertilizer for State Farms

Responded By User ID: VC0000141344



Total of Header Attachments: 7

First Name: Kevin

Total of All Attachments: 7

Last Name: Britton

Email: agwholesalellc@yahoo.com

Phone: 3049316946



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

**State of West Virginia
Solicitation Response**

Proc Folder: 1851339

Solicitation Description: Various Fertilizer for State Farms

Proc Type: Central Purchase Order

| Solicitation Closes | Solicitation Response | Version |
|---------------------|------------------------------|---------|
| 2026-01-23 13:30 | SR 1400 ESR01152600000003982 | 1 |

VENDOR

VC0000141344
AG WHOLESALE LLC

Solicitation Number: CRFQ 1400 AGR2600000028

Total Bid: 79208

Response Date: 2026-01-15

Response Time: 15:25:23

Comments:

FOR INFORMATION CONTACT THE BUYER

Larry D McDonnell
304-558-2063
larry.d.mcdonnell@wv.gov

Vendor
Signature X

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 | Fertilizer - Total Overall Cost | 1.00000 | LS | 79208.000000 | 79208.00 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 10171600 | | | |

Commodity Line Comments: Fertilizer for state farms in Huttonsville, Pruntytown, & McCausland delivered by 3/31/26

Extended Description:

See attached documentation for further details.



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

State of West Virginia
Centralized Request for Quote
Agricultural

Proc Folder: 1851339

Doc Description: Various Fertilizer for State Farms

Reason for Modification:
Addendum No. 01

Proc Type: Central Purchase Order

| Date Issued | Solicitation Closes | Solicitation No | Version |
|-------------|---------------------|-------------------------|---------|
| 2026-01-09 | 2026-01-23 13:30 | CRFQ 1400 AGR2600000028 | 2 |

BID RECEIVING LOCATION

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

VENDOR

Vendor Customer Code:

Vendor Name: *AK WHOLESALE LLC*

Address: *P O Box 1100*

Street:

City: *JANE LEE*

State: *WV*

Country: *USA*

Zip: *26378*

Principal Contact: *KEVIN N BRITTON*

Vendor Contact Phone: *(304) 269-6000*

Extension:

FOR INFORMATION CONTACT THE BUYER

Larry D McDonnell

304-558-2063

larry.d.mcdonnell@wv.gov

Vendor
Signature X

FEIN# *93-2755759*

DATE *1-16-2025*

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

Date Printed: Jan 9, 2026

Page: 1

FORM ID: WV-PRC-CRFQ-002 2020/05

CRFQ AGR26*28

Fertilizer

EXHIBIT A - PRICING PAGE

| Section No. | Description | Brand / Item name | Quantity | Price per Ton | Extended Amount |
|--|---|-------------------|----------|---------------|-----------------|
| Section 3.1.1.1 | Huttonsville 23-10-21 NPK granular fertilizer blended in 1-ton super sacks | | 34 | 646- | \$ 21,964- |
| Section 3.1.1.2 | Huttonsville 19-19-19 NPK granular fertilizer blended in 1-ton super sacks | | 10 | 689- | \$ 6890- |
| Huttonsville Total Cost | | | | | \$ 28,854- - |
| Section 3.1.2.1 | Pruntytown 23-10-21 NPK granular fertilizer blended in 1-ton super sacks | | 30 | 641- | \$ 19,230- |
| Section 3.1.2.2 | Pruntytown 46-0-0 NPK granular fertilizer with Nutrisphere or equal blended in 1-ton super sacks | | 14 | 680- | \$ 9520- |
| Pruntytown Total Cost | | | | | \$ 28,750- - |
| Section 3.1.3.1 | McCausland 22-9-24 NPK, with Nutrisphere or equal granular fertilizer blended in 1-ton super sacks | | 15 | 655- | \$ 9825- |
| Section 3.1.3.2 | McCausland 10-20-20 NPK with Nutrisphere or equal granular fertilizer blended in 1-ton super sacks | | 7 | 622- | \$ 4354- |
| Section 3.1.3.2 | McCausland 19-14-23 NPK with Nutrisphere or equal granular fertilizer blended in 1-ton super sacks | | 11 | 675- | \$ 7425- |
| McCausland Total Cost | | | | | \$ 21,604- - |
| TOTAL OVERALL COST | | | | | \$ 79,208 - - |
| <p align="center">Bidder / Vendor Information</p> | | | | | |
| Name: | AG WHOLESALE LLC | | | | |
| Address: | P O Box 1100 | | | | |
| | JANE LEW WV 26378 | | | | |
| Phone: | (304) 269-6000 | | | | |
| Email Address: | agwholesalellc@yahoo.com | | | | |
| Authorized Signature: | <i>Ken M Butt</i> | | | | |

SOLICITATION NUMBER: CRFQ AGR26*28

Addendum Number: 01

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:

Correction of Error:

Bid opening date on the CRFQ document has been extended to reflect the correct date 01/23/2026 as listed in the Instructions to Vendors Submitting Bids.

The bid opening time still remains at 1:30PM EST/EDT.

No other changes

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.

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFO AGR26*28

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 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.

AG WHOLESALE LLC
Company
Ken A Barth
Authorized Signature

1-16-2026

Date

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

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.

(Printed Name and Title) KEVIN N BRITTON MANAGER

(Address) PO Box 1100 JANE LEW WV 26378

(Phone Number) / (Fax Number) (304) 269-6000

(email address) agwholesalellc@yahoo.com

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that: I have reviewed this Solicitation/Contract 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/Contract 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 this bid or offer was made without prior understanding, agreement, or connection with any entity submitting a bid or offer for the same material, supplies, equipment or services; that this bid or offer is in all respects fair and without collusion or fraud; that this Contract is accepted or entered into without any prior understanding, agreement, or connection to any other entity that could be considered a violation of law; 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.

By signing below, I further certify that I understand this Contract is subject to the provisions of West Virginia Code § 5A-3-62, which automatically voids certain contract clauses that violate State law; and that pursuant to W. Va. Code 5A-3-63, the entity entering into this contract is prohibited from engaging in a boycott against Israel.

Ag Wholesale LLC

(Company) Ag Wholesale LLC

(Signature of Authorized Representative) Kevin N. Britton

(Printed Name and Title of Authorized Representative) (Date) KEVIN N BRITTON MANAGER 1-15-26

(Phone Number) (Fax Number) (304) 269-6000

(Email Address) agwholesalellc@yahoo.com



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/26/2025

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).

| | | | |
|------------------------------------|--|------------------------------------|-------------------|
| PRODUCER | | CONTACT NAME: John Ramirez | |
| Point Financial PO Box 13 | | PHONE (A/C, No, Ext): | FAX (A/C, No): |
| Point Pleasant WV 25550 | | E-MAIL ADDRESS: john@pfspwv.com | |
| | | INSURER(S) AFFORDING COVERAGE | |
| | | INSURER A: Celina Insurance Group | |
| | | NAIC # 15431 | |
| INSURED | | INSURER B: | |
| AG Wholesale, LLC 539 U.S. 33 E | | INSURER C: | |
| Weston WV 26452 | | INSURER D: | |
| | | INSURER E: | |
| | | INSURER F: | |

| COVERAGES | | CERTIFICATE NUMBER: | | REVISION NUMBER: | | | | |
|--|---|---------------------|--------------|------------------|----------------------------|-----------------------------------|--|--------------|
| <p>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.</p> | | | | | | | | |
| INSR LTR | TYPE OF INSURANCE | ADD'L INSD | SUB'R WVD | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS | |
| A | COMMERCIAL GENERAL LIABILITY | | | 7353362-0 | 02/26/2025 | 02/26/2026 | EACH OCCURRENCE | \$ 1,000,000 |
| | CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> | | | | | | DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 500,000 |
| A | GEN'L AGGREGATE LIMIT APPLIES PER: | | | | | | MED EXP (Any one person) | \$ 10,000 |
| | POLICY <input type="checkbox"/> PRO- JECT <input type="checkbox"/> LOC OTHER: <input checked="" type="checkbox"/> | | | | | | PERSONAL & ADV INJURY | \$ 1,000,000 |
| A | AUTOMOBILE LIABILITY | | | 7353362-0 | 02/26/2025 | 02/26/2026 | GENERAL AGGREGATE | \$ 2,000,000 |
| | ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY | | | | | | PRODUCTS - COMP/OP AGG | \$ 2,000,000 |
| A | UMBRELLA LIAB | | | | | | \$ | \$ |
| | EXCESS LIAB | | | | | | COMBINED SINGLE LIMIT (Ea accident) | \$ 1,000,000 |
| A | DED RETENTION \$ | | | | | | BODILY INJURY (Per person) | \$ |
| | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y/N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below | | | | | | BODILY INJURY (Per accident) | \$ |
| | | | | | | PROPERTY DAMAGE (Per accident) | \$ | |
| | | | | | | \$ | \$ | |
| | | | | | | EACH OCCURRENCE | \$ | |
| | | | | | | AGGREGATE | \$ | |
| | | | | | | \$ | \$ | |
| | | | | | | PER STATUTE | OTH- ER | |
| | | | | | | E.L. EACH ACCIDENT | \$ | |
| | | | | | | E.L. DISEASE - EA EMPLOYEE | \$ | |
| | | | | | | E.L. DISEASE - POLICY LIMIT | \$ | |
| | | | | | | | | |
| DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) | | | | | | | | |

CERTIFICATE HOLDER

CANCELLATION

| | |
|---|---|
| <p>State of West Virginia Department of Administration 2019 Washington Street, East Charleston, WV 25305-0130</p> | <p>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.</p> |
| AUTHORIZED REPRESENTATIVE | |
| <i>John Ramirez</i> | |

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ADDITIONAL INFORMATION

Correction of Error:

Bid opening date on the CRFQ document has been extended to reflect the correct date 01/23/2026 as listed in the Instructions to Vendors Submitting Bids.

The bid opening time still remains at 1:30PM EST/EDT.

No other changes

| INVOICE TO | SHIP TO |
|--|--|
| AGRICULTURE DEPARTMENT OF ADMINISTRATIVE SERVICES 1900 KANAWHA BLVD E CHARLESTON US | STATE OF WEST VIRGINIA VARIOUS LOCATIONS AS INDICATED BY ORDER |
| | No City |
| | WV |
| | US |

| Line | Comm Ln Desc | Qty | Unit Issue | Unit Price | Total Price |
|------|---------------------------------|---------|------------|------------|-------------|
| 1 | Fertilizer - Total Overall Cost | 1.00000 | LS | | 79,208- |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 10171600 | | | |

Extended Description:

See attached documentation for further details.

SCHEDULE OF EVENTS

| Line | Event | Event Date |
|------|--|------------|
| 1 | Vendor questions due by 2:00PM EST/EDT | 2026-01-15 |