



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

# Purchase Order

**PURCHASE ORDER NO.**  
 TEMP04J

**PAGE**  
 1

**BLANKET RELEASE**  
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CORRECT PURCHASE ORDER NUMBER  
 MUST APPEAR ON ALL PACKAGES,  
 INVOICES, AND SHIPPING PAPERS.  
 QUESTIONS CONCERNING THIS PUR-  
 CHASE ORDER SHOULD BE DIRECTED  
 TO THE BUYER AS NOTED BELOW

**CHANGE ORDER**  
 3

**SEE REVERSE SIDE FOR  
 TERMS AND CONDITIONS**

**INVOICE TO**  
 ALL STATE AGENCIES  
 AND POLITICAL SUBDIVISIONS  
 VARIOUS LOCALES AS INDICATED  
 BY ORDER

## AGENCY COPY

**VENUE**  
 \*709060509      304-925-1818  
 SNELLING PERSONNEL SERVICES  
 PO BOX 4522  
 CHARLESTON WV 25364

**SHIP TO**  
 ALL STATE AGENCIES  
 AND POLITICAL SUBDIVISIONS  
 VARIOUS LOCALES AS INDICATED  
 BY ORDER

| DATE PRINTED                                                                                                                                                                                                                                                                                                                                                                              |               | TERMS OF SALE |                  | FEIN/SSN      | FUND                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|---------------|------------------|---------------|----------------------------------------------------------------------------------------------------------------------------|
| 04/15/2005                                                                                                                                                                                                                                                                                                                                                                                |               | NET 30        |                  | 550744435     |                                                                                                                            |
| SHIP VIA                                                                                                                                                                                                                                                                                                                                                                                  |               | F.O.B         |                  | FREIGHT TERMS | ACCOUNT NUMBER                                                                                                             |
| BEST WAY                                                                                                                                                                                                                                                                                                                                                                                  |               | DESTINATION   |                  | PREPAID       | MUL-MUL                                                                                                                    |
| LINE                                                                                                                                                                                                                                                                                                                                                                                      | QUANTITY      | UOP           | VENDOR ITEM NO.  | UNIT PRICE    | AMOUNT                                                                                                                     |
|                                                                                                                                                                                                                                                                                                                                                                                           | DELIVERY DATE | CAT. NO.      | ITEM NUMBER      |               |                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                           |               |               | CHANGE ORDER #03 |               |                                                                                                                            |
| TO RENEW THE ORIGINAL CONTRACT ACCORDING TO ALL TERMS,<br>CONDITIONS, PRICES AND SPECIFICATIONS CONTAINED IN THE<br>ORIGINAL CONTRACT INCLUDING ALL AUTHORIZED CHANGE<br>ORDERS.<br><br>EFFECTIVE DATE OF RENEWAL: 05/01/2005<br>THROUGH 04/30/2006<br><br>RENEWALS REMAINING: 1<br><br>*****NO ADDITIONAL CHANGES*****<br><br>PREVIOUS PO TOTAL==>      OPEN END<br>PO NET CHANGE (+)==> |               |               |                  |               |                                                                                                                            |
|                                                                                                                                                                                                                                                                                                                                                                                           |               |               |                  |               | WV STATE PURCHASING DIVISION<br>ADMINISTRATION UNIT<br>CERTIFIED ENCUMBERED<br><br>APR 25 2005<br><br><i>Beverly Toler</i> |

IF APPROVAL AS TO FORM IS REQUIRED BY ATTORNEY GENERAL, CHECK HERE  *BY 4-15-05*

OPEN END  
**TOTAL**

*Approved for*  
*ONE FISCAL YEAR*  
*Dawn Wayfield*  
 APPROVED AS TO FORM BY  
 ASSISTANT ATTORNEY GENERAL

BY *Betty Francisco*  
 BETTY FRANCISCO 304-558-0468  
 PURCHASING DIVISION AUTHORIZED SIGNATURE

**GENERAL TERMS & CONDITIONS**  
**PURCHASE ORDER/CONTRACT**

1. **ACCEPTANCE:** Seller shall be bound by this order and its terms and conditions upon receipt of acceptance of this order.
2. **APPLICABLE LAW:** The laws of the State of West Virginia and the *Legislative Rules* of the Purchasing Division shall govern all rights and duties under the Contract, including without limitation the validity of this Purchase Order/Contract.
3. **NON-FUNDING:** All services performed or goods delivered under State Purchase Orders/Contracts are to be continued for the terms of the Purchase Order/Contract, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods, this Purchase Order/Contract becomes void and of no effect after June 30.
4. **COMPLIANCE:** Seller shall comply with all Federal, State and local laws, regulations and ordinances including, but not limited to, the prevailing wage rates of the WV Division of Labor.
5. **MODIFICATIONS:** This writing is the parties final expression of intent. No modification of this order shall be binding unless agreed to in writing by the Buyer.
6. **ASSIGNMENT:** Neither this Order nor any monies due, or to become due hereunder may be assigned by the Seller without the Buyer's consent.
7. **WARRANTY:** The Seller expressly warrants that the goods and/or services covered by this Order will: [a] conform to the specifications, drawings, samples or other description furnished or specified by the Buyer, [b] be merchantable and fit for the purpose intended; and/or [c] be free from defect in material and workmanship.
8. **CANCELLATION:** The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the Seller.
9. **SHIPPING, BILLING & PRICES:** Prices are those stated in this order. No price increase will be accepted without written authority from the Buyer. All goods or services shall be shipped on or before the date specified in this Order.
10. **LATE PAYMENTS:** Payments may only be made after the delivery of goods or services. Interest may be paid on late payments in accordance with the *West Virginia Code*.
11. **TAXES:** The State of West Virginia is exempt from Federal and State taxes and will not pay or reimburse such taxes.
12. **RENEWAL:** Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
13. **BANKRUPTCY:** In the event the vendor/contractor files for bankruptcy protection, this Contract is automatically null and void, and is terminated without further order.
14. **HIPAA BUSINESS ASSOCIATE ADDENDUM:** The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, and available online at the Purchasing Division's web site (<http://www.state.wv.us/admin/purchase/vrc/hipaa.htm>) is hereby made part of the agreement. Provided that, the Agency meets the definition of a Covered Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.



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| BEST WAY     |               | DESTINATION     |                                    | PREPAID                     |            | MUL-MUL        |       |
| LINE         | QUANTITY      | UOP             | VENDOR ITEM NO.                    |                             | UNIT PRICE | AMOUNT         |       |
|              | DELIVERY DATE | CAT. NO.        | ITEM NUMBER                        |                             |            | QTY            | DATE  |
|              |               |                 | RECEIPT TICKET FOR PURCHASE ORDER: |                             |            | TEMP04J        |       |
| LINE         | CATNO         | ITEM            | NUMBER                             | DESCRIPTION                 |            | QTY            | DATE  |
| 0001         | 946-10        | 01-001          | 001                                | TEMPORARY EMPLOYEE SERVICES |            | _____          | _____ |
|              |               | SIGNATURE _____ |                                    | DATE _____                  |            |                |       |

IF APPROVAL AS TO FORM IS REQUIRED BY ATTORNEY GENERAL, CHECK HERE

**TOTAL**

APPROVED AS TO FORM BY  
 ASSISTANT ATTORNEY GENERAL

BY \_\_\_\_\_  
 PURCHASING DIVISION AUTHORIZED SIGNATURE