



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**1**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

FOODS

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764**                      **304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none
BID OPENING DATE: 02/20/2007		BID OPENING TIME 01:30PM		

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
*****OPEN END CONTRACT*****						
TO PROVIDE DAIRY PRODUCTS TO HOPEMONT HOSPITAL, AT RT. #7, HOPEMONT, WV 26764, PER ATTACHED SPECIFICATIONS.						
0001	14,000	PT		380-75	.182	2,548.00
	1/2 PINT MILK, GRADE A HOMOGENIZED, 3.25% BUTTERFAT					
	NET WEIGHT: .....					
0002	30,000	PT		380-75	.149	4,470.00
	1/2 PINT MILK, GRADE SKIM (0.5%)					
	NET WEIGHT: .....					
0003	5,000	PT		380-75	.174	870.00
	1/2 PINT BUTTERMILK					
	NET WEIGHT: .....					

**RECEIVED**  
 2007 FEB 15 A 9:30  
 PURCHASING DIVISION  
 STATE OF WV

SEE REVERSE SIDE FOR TERMS AND CONDITIONS.		
SIGNATURE <i>Kenneth Hess</i>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**2**

ADDRESS CORRESPONDENCE TO ATTENTION OF:  
**ROBERTA WAGNER**  
**304-558-0067**

VENDOR

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0004	4,800	PT		380-75	.2050	984.00
	1/2 PINT CHOCOLATE MILK					
	NET WEIGHT: .....					
0005	150	GL		380-75	2.34	351.00
	GALLONS, MILK, 2%					
	NET WEIGHT: .....					
0006	1,800	GL		380-75	2.07	3,726.00
	GALLONS, MILK, SKIM (0.5%)					
	NET WEIGHT: .....					
0007	900	EA		380-75	2.58	2,322.00
	GALLONS, WHOLE MILK					
	NET WEIGHT: .....					

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE *Kenneth Lass* TELEPHONE 304-363-6400 DATE 2-15-07

TITLE Branch Manager FEIN 34-114-1090 ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**3**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

VENDOR

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none
BID OPENING DATE: 02/20/2007		BID OPENING TIME 01:30PM		

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0008	3,000	EA		380-75	5.25	15,750.00
	COTTAGE CHEEZE, 5# CONTAINERS					
	NET WEIGHT: .....					
0009	1,400	PK		380-75	4.80	6,720.00
	BOX ICE CREAM, 4 OZ CUPS, ASSORTED, SPECIFY FLAVOR					
	NET WEIGHT: .....					
	WHEN ORDERING CHOCOLATE..... VANILLA..... STRAWBERRY.....					
	PK OF 24					
0010	1,000	EA		380-75	4.60	4,600.00
	SHERBET, 4 OZ. CUPS, ASSORTED FLAVORS					
	NET WEIGHT: .....					
	ORANGE:..... LIME:..... RASPBERRY:.....					
	PK. OF 24					

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Hess</i>	TELEPHONE 304-363-6400	DATE 2-15-7
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**4**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

VENDOR

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** **BID OPENING TIME 01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
0011	100	EA		380-75	3.55	355.00
	1/2 Q-QUART ICE CREAM PAILS ASSORTED FLAVORS  NET WEIGHT: .....  WHEN ORDERING CHOCOLATE..... VANILLA..... STRAWBERRY..... NEOPOLATAN..... OTHER.....					
0012	75	EA		380-75	3.55	266.25
	1/2 Q-QUART SHERBET PAILS, ASSORTED FLAVORS  NET WEIGHT: .....  WHEN ORDERING LIME..... ORANGE..... RASPBERRY..... OTHER.....					
0013	150	EA		380-75	1.25	187.50
	SOUR CREAM, 1# CONTAINERS  NET WEIGHT: .....  EXHIBIT 3  LIFE OF CONTRACT: THIS CONTRACT BECOMES EFFECTIVE ON					

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Idiss</i>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**5**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>..... AND EXTENDS FOR A PERIOD OF ONE (1) YEAR OR UNTIL SUCH "REASONABLE TIME" THEREAFTER AS IS NECESSARY TO OBTAIN A NEW CONTRACT OR RENEW THE ORIGINAL CONTRACT. THE "REASONABLE TIME" PERIOD SHALL NOT EXCEED TWELVE (12) MONTHS. DURING THIS "REASONABLE TIME" THE VENDOR MAY TERMINATE THIS CONTRACT FOR ANY REASON UPON GIVING THE DIRECTOR OF PURCHASING 30 DAYS WRITTEN NOTICE.</p> <p>UNLESS SPECIFIC PROVISIONS ARE STIPULATED ELSEWHERE IN THIS CONTRACT DOCUMENT, THE TERMS, CONDITIONS AND PRICING SET HEREIN ARE FIRM FOR THE LIFE OF THE CONTRACT.</p> <p>RENEWAL: THIS CONTRACT MAY BE RENEWED UPON THE MUTUAL WRITTEN CONSENT OF THE SPENDING UNIT AND VENDOR, SUBMITTED TO THE DIRECTOR OF PURCHASING THIRTY (30) DAYS PRIOR TO THE EXPIRATION DATE. SUCH RENEWAL SHALL BE IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND SHALL BE LIMITED TO TWO (2) ONE (1) YEAR PERIODS.</p> <p>CANCELLATION: THE DIRECTOR OF PURCHASING RESERVES THE RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE COMMODITIES AND/OR SERVICES SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM TO THE SPECIFICATIONS OF THE BID AND CONTRACT HEREIN.</p> <p>OPEN MARKET CLAUSE: THE DIRECTOR OF PURCHASING MAY AUTHORIZE A SPENDING UNIT TO PURCHASE ON THE OPEN MARKET, WITHOUT THE FILING OF A REQUISITION OR COST ESTIMATE, ITEMS SPECIFIED ON THIS CONTRACT FOR IMMEDIATE DELIVERY IN EMERGENCIES DUE TO UNFORESEEN CAUSES (INCLUDING BUT NOT LIMITED TO DELAYS IN TRANSPORTATION OR AN UNANTICIPATED INCREASE IN THE VOLUME OF WORK.)</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Ides</i>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**6**

ADDRESS CORRESPONDENCE TO ATTENTION OF:  
**ROBERTA WAGNER**  
**304-558-0067**

POSTAL MAIL

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** BID OPENING TIME: **01:30PM**

LINE	QUANTITY	UQP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p><b>QUANTITIES: QUANTITIES LISTED IN THE REQUISITION ARE APPROXIMATIONS ONLY, BASED ON ESTIMATES SUPPLIED BY THE STATE SPENDING UNIT. IT IS UNDERSTOOD AND AGREED THAT THE CONTRACT SHALL COVER THE QUANTITIES ACTUALLY ORDERED FOR DELIVERY DURING THE TERM OF THE CONTRACT, WHETHER MORE OR LESS THAN THE QUANTITIES SHOWN.</b></p> <p><b>ORDERING PROCEDURE: SPENDING UNIT(S) SHALL ISSUE A WRITTEN STATE CONTRACT ORDER (FORM NUMBER WV-39) TO THE VENDOR FOR COMMODITIES COVERED BY THIS CONTRACT. THE ORIGINAL COPY OF THE WV-39 SHALL BE MAILED TO THE VENDOR AS AUTHORIZATION FOR SHIPMENT, A SECOND COPY MAILED TO THE PURCHASING DIVISION, AND A THIRD COPY RETAINED BY THE SPENDING UNIT.</b></p> <p><b>BANKRUPTCY: IN THE EVENT THE VENDOR/CONTRACTOR FILES FOR BANKRUPTCY PROTECTION, THIS CONTRACT IS AUTOMATICALLY NULL AND VOID, AND IS TERMINATED WITHOUT FURTHER ORDER.</b></p> <p><b>THE TERMS AND CONDITIONS CONTAINED IN THIS CONTRACT SHALL SUPERSEDE ANY AND ALL SUBSEQUENT TERMS AND CONDITIONS WHICH MAY APPEAR ON ANY ATTACHED PRINTED DOCUMENTS SUCH AS PRICE LISTS, ORDER FORMS, SALES AGREEMENTS OR MAINTENANCE AGREEMENTS, INCLUDING ANY ELECTRONIC MEDIUM SUCH AS CD-ROM.</b></p> <p><b>REV. 04/11/2001</b></p> <p><b>PURCHASING CARD ACCEPTANCE: THE STATE OF WEST VIRGINIA CURRENTLY UTILIZES A VISA PURCHASING CARD PROGRAM WHICH IS ISSUED THROUGH A BANK. THE SUCCESSFUL VENDOR MUST ACCEPT THE STATE OF WEST VIRGINIA VISA PURCHASING CARD FOR PAYMENT OF ALL ORDERS PLACED BY ANY STATE AGENCY FOR ORDERS THAT ARE LESS THAN \$2,500 AS A CONDI</b></p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Idess</i>	TELEPHONE 304-363-6400	DATE 2-15-7
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**7**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

BIDDING

\*709023036 02 304-363-6400  
 UNITED DAIRY INC  
 RT 3 BOX 133  
 FAIRMONT WV 26554

SHIP TO

HEALTH AND HUMAN RESOURCES  
 HOPEMONT HOSPITAL  
 CENTRAL RECEIVING  
 ROUTE 7  
 TERRA ALTA, WV  
 26764 304-789-2411

DATE PRINTED <b>01/14/2007</b>	TERMS OF SALE <b>30 days</b>	SHIP VIA <b>our truck</b>	FOB <b>destination</b>	FREIGHT TERMS <b>none</b>
BID OPENING DATE: <b>02/20/2007</b>		BID OPENING TIME <b>01:30PM</b>		

LINE	QUANTITY	UOP	CAT NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>TION OF AWARD.</p> <p>EXHIBIT 4</p> <p>LOCAL GOVERNMENT BODIES: UNLESS THE VENDOR INDICATES IN THE BID HIS REFUSAL TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO COUNTY, SCHOOL, MUNICIPAL AND OTHER LOCAL GOVERNMENT BODIES, THE BID SHALL EXTEND TO POLITICAL SUBDIVISIONS OF THE STATE OF WEST VIRGINIA. IF THE VENDOR DOES NOT WISH TO EXTEND THE PRICES, TERMS, AND CONDITIONS OF THE BID TO ALL POLITICAL SUBDIVISIONS OF THE STATE, THE VENDOR MUST CLEARLY INDICATE SUCH REFUSAL IN HIS BID. SUCH REFUSAL SHALL NOT PREJUDICE THE AWARD OF THIS CONTRACT IN ANY MANNER.</p> <p>REV. 3/88</p> <p>VENDOR PREFERENCE CERTIFICATE</p> <p>CERTIFICATION AND APPLICATION* IS HEREBY MADE FOR PREFERENCE IN ACCORDANCE WITH WEST VIRGINIA CODE, 5A-3-37 (DOES NOT APPLY TO CONSTRUCTION CONTRACTS).</p> <p>A. APPLICATION IS MADE FOR 2.5% PREFERENCE FOR THE REASON CHECKED:</p> <p>( ) BIDDER IS AN INDIVIDUAL RESIDENT VENDOR AND HAS RESIDED CONTINUOUSLY IN WEST VIRGINIA FOR FOUR (4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS CERTIFICATION; OR</p> <p>( ) BIDDER IS A PARTNERSHIP, ASSOCIATION OR CORPORATION RESIDENT VENDOR AND HAS MAINTAINED ITS HEAD-QUARTERS OR PRINCIPAL PLACE OF BUSINESS CONTINUOUSLY I</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Hess</i>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**8**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

VENDOR

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>WEST VIRGINIA FOR FOUR (4) YEARS IMMEDIATELY PRECEDING THE DATE OF THIS CERTIFICATION; OR 80% OF THE OWNERSHIP INTEREST OF BIDDER IS HELD BY ANOTHER INDIVIDUAL, PARTNERSHIP, ASSOCIATION OR CORPORATION RESIDENT VENDOR WHO 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</p> <p>(X) BIDDER IS A CORPORATION 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.</p> <p>B. APPLICATION IS MADE FOR 2.5% PREFERENCE FOR THE REASON CHECKED:</p> <p>( ) 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;</p> <p>OR</p> <p>(X) BIDDER IS A NONRESIDENT VENDOR EMPLOYING A MINIMUM OF ONE HUNDRED STATE RESIDENTS OR IS A NONRESIDENT VENDOR WITH AN AFFILIATE OR SUBSIDIARY WHICH MAINTAINS ITS HEADQUARTERS OR PRINCIPAL PLACE OF BUSINESS WITHIN WEST VIRGINIA EMPLOYING A MINIMUM OF ONE HUNDRED STATE RESIDENTS WHO CERTIFIES THAT, DURING THE LIFE OF THE CONTRACT, ON AVERAGE AT LEAST 75% OF THE EMPLOYEES OR BIDDERS' AFFILIATE'S OR SUBSIDIARY'S EMPLOYEES ARE RESIDENTS OF WEST VIRGINIA</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Shaw</i>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'





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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**9**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

VENDOR

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UQP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
<p>WHO HAVE RESIDED IN THE STATE CONTINUOUSLY FOR THE TWO YEARS IMMEDIATELY PRECEDING SUBMISSION OF THIS BID.</p> <p>BIDDER UNDERSTANDS IF THE SECRETARY OF TAX &amp; 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 ISSUED; 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.</p> <p>BY SUBMISSION OF THIS CERTIFICATE, BIDDER AGREES TO DISCLOSE ANY REASONABLY REQUESTED INFORMATION TO THE PURCHASING DIVISION AND AUTHORIZES THE DEPARTMENT OF TAX AND 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.</p> <p>UNDER PENALTY OF LAW FOR FALSE SWEARING (WEST VIRGINIA CODE 61-5-3), 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.</p> <p style="text-align: right;">BIDDER: <u>United Dairy Inc.</u></p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Idess</i>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**10**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

VENDOR

\*709023036 02 304-363-6400  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
  
**FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES**  
**HOPMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
				DATE: <u>2-15-07</u>		
				SIGNED: <u>Kenneth Ides</u>		
				TITLE: <u>Branch Manager</u>		
<p>* CHECK ANY COMBINATION OF PREFERENCE CONSIDERATION(S) IN EITHER "A" OR "B", OR BOTH "A" AND "B" WHICH YOU ARE ENTITLED TO RECEIVE. YOU MAY REQUEST UP TO THE MAXIMUM 5% PREFERENCE FOR BOTH "A" AND "B".</p> <p>(REV. 12/00)</p> <p>WRITTEN QUESTIONS SHALL BE ACCEPTED THROUGH CLOSE OF BUSINESS ON MONDAY, 01/29/07. QUESTIONS MAY BE SENT VIA USPS, FAX, COURIER OR EMAIL. IN ORDER TO ASSURE NO VENDOR RECEIVES AN UNFAIR ADVANTAGE, NO SUBSTANTIVE QUESTIONS WILL BE ANSWERED VERBALLY. IF POSSIBLE, EMAIL QUESTIONS ARE PREFERRED.</p> <p>ADDRESS INQUIRIES TO:</p> <p>ROBERTA WAGNER          DEPARTMENT OF ADMINISTRATION          PURCHASING DIVISION          2019 WASHINGTON STREET, EAST          CHARLESTON, WV 25305          FAX: 304-558-4115          EMAIL: RWAGNER@WVADMIN.GOV</p> <p style="text-align: center;">NOTICE</p> <p>A SIGNED BID MUST BE SUBMITTED TO:</p> <p style="text-align: center;">DEPARTMENT OF ADMINISTRATION</p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <u>Kenneth Ides</u>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FAX 304-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**11**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER**  
**304-558-0067**

**\*709023036 02 304-363-6400**  
**UNITED DAIRY INC**  
**RT 3 BOX 133**  
**FAIRMONT WV 26554**

**HEALTH AND HUMAN RESOURCES**  
**HOPEMONT HOSPITAL**  
**CENTRAL RECEIVING**  
**ROUTE 7**  
**TERRA ALTA, WV**  
**26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none

BID OPENING DATE: **02/20/2007** BID OPENING TIME **01:30PM**

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
PURCHASING DIVISION BUILDING 15 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25305-0130						
THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED:  SEALED BID						
BUYER:			ROBERTA WAGNER		22	
RFQ. NO.:			HOP70127			
BID OPENING DATE:			02/20/2007			
BID OPENING TIME:			1:30 PM			
PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID:  304-368-0507						
CONTACT PERSON (PLEASE PRINT CLEARLY): <i>Chuck Zinn</i>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Kenneth Idess</i>	TELEPHONE 304-363-6400	DATE 2-15-07
TITLE Branch Manager	FEIN 34-114-1090	ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'



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

# Request for Quotation

RFQ NUMBER  
**HOP70127**

PAGE  
**12**

ADDRESS CORRESPONDENCE TO ATTENTION OF  
**ROBERTA WAGNER  
 304-558-0067**

VENDOR

\*709023036 02 304-363-6400  
**UNITED DAIRY INC  
 RT 3 BOX 133  
 FAIRMONT WV 26554**

SHIP TO

**HEALTH AND HUMAN RESOURCES  
 HOPEMONT HOSPITAL  
 CENTRAL RECEIVING  
 ROUTE 7  
 TERRA ALTA, WV  
 26764 304-789-2411**

DATE PRINTED	TERMS OF SALE	SHIP VIA	F.O.B.	FREIGHT TERMS
01/14/2007	30 days	our truck	destination	none
BID OPENING DATE: 02/20/2007		BID OPENING TIME 01:30PM		

LINE	QUANTITY	UOP	CAT. NO.	ITEM NUMBER	UNIT PRICE	AMOUNT
***** THIS IS THE END OF RFQ HOP70127 ***** TOTAL:						\$43,149.75

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE *Kenneth Idess* TELEPHONE 304-363-6400 DATE 2-15-07  
 TITLE Branch Manager FEIN 34-114-1090 ADDRESS CHANGES TO BE NOTED ABOVE

WHEN RESPONDING TO RFQ, INSERT NAME AND ADDRESS IN SPACE ABOVE LABELED 'VENDOR'

**RFO #HOP70127**

QUANTITIES ARE ESTIMATES ONLY AND ARE NOT TO BE CONSTRUED AS ANY GUARANTEE OF QUANTITY.

ORDERS/DELIVERIES SHALL BE DONE TWICE PER WEEK ON A SCHEDULE THAT MEETS THE NEEDS OF THE HOSPITAL. DELIVERY SCHEDULE WILL BE MUTUALLY AGREED UPON BETWEEN VENDOR AND HOSPITAL

A REGULAR SCHEDULED DELIVERY TIME SHALL BE MAINTAINED BY THE VENDOR ON SPECIFIED DAYS OF EACH WEEK. SUCH DAYS ARE TO BE AGREED UPON BETWEEN INSTITUTION AND VENDOR.

ALL DAIRY PRODUCTS SHALL BE PRODUCED, PACKAGED AND DISTRIBUTED IN ACCORDANCE WITH FEDERAL, STATE AND LOCAL REGULATIONS FOR THE HEALTH AND SAFETY OF THE PRODUCTS PROVIDED FOR CONSUMPTION. ALL PRODUCTS MUST BE FRESH.

ANY PRODUCT DELIVERED THAT THE HOSPITAL DETERMINES DOES NOT MEET THE SPECIFICATIONS, MUST BE REPLACED AS REQUESTED.

ACKNOWLEDGMENTS OF DELIVERIES WILL ONLY BE MADE AT THE LOCATION DESIGNATED BY THE HOSPITAL, AND BY THE AUTHORIZED RECEIVER. VENDOR SHALL ASSUME RESPONSIBILITY TO DELIVER DAIRY PRODUCTS AT A FIXED AND DESIGNATED DRY AND SANITARY PLACE AT THE HOSPITAL, AS DESIGNATED BY THE HOSPITAL'S AUTHORIZED RECEIVER.

INVOICING SHALL BE DONE ON THE BASIS OF THE UNIT PRICE PER PACKAGE. ALL PRICING SHALL BE F.O.B. INSTITUTION.

BIDDER WILL SHOW "LABELED NET WEIGHT" FOR EACH ITEM.

THE PRICES ON THIS CONTRACT WILL REMAIN FIRM FOR 365 DAYS AFTER THE EFFECTIVE DATE OF THE CONTRACT. PRICE INCREASES MAY BE CONSIDERED UPON A RENEWAL REQUEST.

THE CONTRACT WILL BE EVALUATED AND AWARDED BASED ON "GRAND TOTAL".

# A F F I D A V I T

**West Virginia Code §5A-3-10a states:**

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 the debt owned is an amount greater than one thousand dollars in the aggregate

**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.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "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.

**EXCEPTION:**

The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this 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.

**LICENSING:**

Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, West Virginia Insurance Commission, or any other state agencies or political subdivision. Furthermore, the vendor must provide all necessary releases to obtain information to enable the Director or spending unit to verify that the vendor is licensed and in good standing with the above entities.

**CONFIDENTIALITY:**

The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures and rules. Vendors should visit [www.state.wv.us/admin/purchase/privacy](http://www.state.wv.us/admin/purchase/privacy) for the Notice of Agency Confidentiality Policies.

Under penalty of law for false swearing (West Virginia Code, §61-5-3), it is hereby certified that the vendor acknowledges the information in this said affidavit and are in compliance with the requirements as stated.

Vendor's Name: United Dairy Inc.

Authorized Signature: Kenneth Idess Date: 2-15-07