



CATHEDRAL CORPORATION

Integrity. Commitment. Service. We live here.

May 11, 2009

Department of Administration
Purchasing Division
Building 15
2019 Washington Street, East
Charleston, WV 25305-0130
Attn: Krista Ferrell

RE: RFQ# CPR10000 1099R Preparation
Bid opening: May 12, 2009 @ 1:30pm

Cathedral Corporation is pleased to provide the enclosed Cost Proposal for completion of the services as described in the above referenced bid package.

Pricing is included on the attached proposal for Cathedral to process, print, insert and mail both 1099R's and instructions in a #10 double window envelope. Cathedral will also provide the 1099 Express software and data to make corrections and re-print individual 1099R's. We will also supply a PDF of the entire print run.

Sincerely,

Laurel Mielcarski
Director of Client Special Services

RECEIVED

2009 MAY 12 A 10: 24

PURCHASING DIVISION
STATE OF WV



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
CPR10000

PAGE
1

ADDRESS CORRESPONDENCE TO ATTENTION OF
KRISTA FERRELL 304-558-2596

RFQ COPY

TYPE NAME/ADDRESS HERE

Cathedral Corporation
 632 Ellsworth Road
 Rome, NY 13441

SHIP TO

CONSOLIDATED PUBLIC RETIREMENT BOARD
 BUILDING 5, ROOM 1000
 1900 KANAWHA BOULEVARD, EAST
 CHARLESTON, WV
 25305-0720 558-3570

DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHT TERMS
04/14/2009				

BID OPENING DATE: 05/05/2009 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	CAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
0001	1	YR		966-52		see attached
PUBLICATIONS (30 PAGES OR MORE), PRINTING OF (FOUR C REQUEST FOR QUOTATION (RFQ) THE WEST VIRGINIA STATE PURCHASING DIVISION FOR THE AGENCY, THE WEST VIRGINIA CONSOLIDATED RETIREMENT BOARD, IS SOLICITING BIDS TO PROVIDE THE AGENCY WITH PRINTING AND MAILING SERVICES FOR THEIR 1099 FORMS PER THE ATTACHED SPECIFICATIONS. TECHNICAL QUESTIONS CONCERNING THIS SOLICITATION MUST BE SUBMITTED IN WRITING TO KRISTA FERRELL IN THE WEST VIRGINIA STATE PURCHASING DIVISION VIA FAX AT 304-558-4115 OR VIA EMAIL AT KRISTA.FERRELL@WV.GOV. DEADLINE FOR ALL TECHNICAL QUESTIONS IS APRIL 28, 2009 AT THE CLOSE OF BUSINESS. ALL TECHNICAL QUESTIONS RECEIVED, IF ANY, WILL BE ANSWERED BY ADDENDUM AFTER THE DEADLINE HAS LAPSED. QUESTIONS CONCERNING THE ACTUAL PROCESS BY WHICH A VENDOR MAY SUBMIT A BID TO THE STATE OF WEST VIRGINIA ARE NOT CONSIDERED TO BE TECHNICAL QUESTIONS AND MAY BE SUBMITTED AT ANY TIME PRIOR TO THE BID OPENING AND IN ANY FORMAT. EXHIBIT 10 REQUISITION NO.:						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Allen Milcovich</i>	TELEPHONE 315-338-0021	DATE 5-11-09
TITLE Director of Client	FEIN 14-0576820	ADDRESS CHANGES TO BE NOTED ABOVE

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

GENERAL TERMS & CONDITIONS
REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

1. Awards will be made in the best interest of the State of West Virginia.
2. The State may accept or reject in part, or in whole, any bid.
3. All quotations are governed by the *West Virginia Code* and the *Legislative Rules* of the Purchasing Division.
4. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
5. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, 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.
6. Payment may only be made after the delivery and acceptance of goods or services.
7. Interest may be paid for late payment in accordance with the *West Virginia Code*.
8. Vendor preference will be granted upon written request in accordance with the *West Virginia Code*.
9. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
10. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
11. 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.
12. 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 may be deemed null and void, and 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 Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
15. **WEST VIRGINIA ALCOHOL & DRUG-FREE WORKPLACE ACT:** If this Contract constitutes a public improvement construction contract as set forth in Article 1D, Chapter 21 of the West Virginia Code ("The West Virginia Alcohol and Drug-Free Workplace Act"), then the following language shall hereby become part of this Contract: "The contractor and its subcontractors shall implement and maintain a written drug-free workplace policy in compliance with the West Virginia Alcohol and Drug-Free Workplace Act, as set forth in Article 1D, Chapter 21 of the West Virginia Code. The contractor and its subcontractors shall provide a sworn statement in writing, under the penalties of perjury, that they maintain a valid drug-free work place policy in compliance with the West Virginia and Drug-Free Workplace Act. It is understood and agreed that this Contract shall be cancelled by the awarding authority if the Contractor: 1) Fails to implement its drug-free workplace policy; 2) Fails to provide information regarding implementation of the contractor's drug-free workplace policy at the request of the public authority; or 3) Provides to the public authority false information regarding the contractor's drug-free workplace policy."

INSTRUCTIONS TO BIDDERS

1. Use the quotation forms provided by the Purchasing Division.
2. **SPECIFICATIONS:** Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
3. Complete all sections of the quotation form.
4. Unit prices shall prevail in case of discrepancy.
5. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
6. **BID SUBMISSION:** All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications: Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130



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<p>ADDENDUM ACKNOWLEDGEMENT</p> <p>I HEREBY ACKNOWLEDGE RECEIPT OF THE FOLLOWING CHECKED ADDENDUM(S) AND HAVE MADE THE NECESSARY REVISIONS TO MY PROPOSAL, PLANS AND/OR SPECIFICATION, ETC.</p> <p>ADDENDUM NO.'S:</p> <p>NO. 1 ..5/4/09..</p> <p>NO. 2</p> <p>NO. 3</p> <p>NO. 4</p> <p>NO. 5</p> <p>I UNDERSTAND THAT FAILURE TO CONFIRM THE RECEIPT OF THE ADDENDUM(S) MAY BE CAUSE FOR REJECTION OF BIDS.</p> <p>VENDOR MUST CLEARLY 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.</p> <p style="text-align: center;"><i>Samuel Milcashi</i> SIGNATURE Cathedral Corporation COMPANY </p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Samuel Milcashi</i>	TELEPHONE 315-338-0021	DATE 5-11-09
TITLE Dir. of Client Sp. Svcs	FEIN 14-0576820	ADDRESS CHANGES TO BE NOTED ABOVE

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DATE

REV. 11/96
 EXHIBIT 3

LIFE OF CONTRACT: THIS CONTRACT BECOMES EFFECTIVE ON AWARD 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.

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.

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.

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.

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

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<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> <p>BANKRUPTCY: IN THE EVENT THE VENDOR/CONTRACTOR FILES FOR BANKRUPTCY PROTECTION, THIS CONTRACT IS AUTOMATICALLY NULL AND VOID, AND IS TERMINATED WITHOUT FURTHER ORDER.</p> <p>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.</p> <p>REV. 04/11/2001</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 PURCHASING DIVISION BUILDING 15 2019 WASHINGTON STREET, EAST CHARLESTON, WV 25305-0130</p>						

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<p>THE BID SHOULD CONTAIN THIS INFORMATION ON THE FACE OF THE ENVELOPE OR THE BID MAY NOT BE CONSIDERED:</p> <p>SEALED BID</p> <p>BUYER: KRISTA FERRELL-FILE 21</p> <p>RFQ. NO.: CPR10000</p> <p>BID OPENING DATE: 05/08/2009</p> <p>BID OPENING TIME: 1:30 PM</p> <p>PLEASE PROVIDE A FAX NUMBER IN CASE IT IS NECESSARY TO CONTACT YOU REGARDING YOUR BID: -----315-338-5874-----</p> <p>CONTACT PERSON (PLEASE PRINT CLEARLY): -----Laurel Mielcarski-----</p> <p>***** THIS IS THE END OF RFQ CPR10000 ***** TOTAL: <u>See Attached</u></p>						

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Laurel Mielcarski</i>	TELEPHONE 315-338-0021	DATE 5-11-09
TITLE Dir. of Client Spec Svcs	FEIN 14-0576820	ADDRESS CHANGES TO BE NOTED ABOVE

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Specifications for RFQ on 1099R Preparation**April 2009**

The scope of this project is as follows:

It will be the responsibility of the West Virginia Consolidated Public Retirement Board to provide the personal and financial information to the vendor. The vendor will then provide the necessary forms (1099R's) compliant with the regulations of the Internal Revenue Service, print, collate, and mail the documents, using the most cost effective method. The vendor will then provide copies of the 1099R information as mailed to the WV CPRB on CD-ROM. See details below.

All copies of 1099R's must be original print, duplicated copies are unacceptable. All three of the 1099R must be on one single 8.5"x11" sheet with perforations between each copy. The first one is to be sent to the IRS, the second one is to be sent to the State, and the third is for the recipient to retain for their records. Instructions will be printed on the reverse side.

No pull-apart or pressure-sealed forms. All copies must be on paper inserted in an envelope (see attached).

Envelopes must have IMPORTANT TAX RETURN DOCUMENT ENCLOSED on them. They must also have TEMP RETURN SERVICE on them.

Forms must be Internal Revenue Service (IRS) compliant.

If there are incomplete addresses, the complete address must be added by the vendor, using USPS approved methods.

Addresses must be bar-coded according to the USPS guidelines.

Vendor must provide CD's of all 1099R's mailed.

Vendor must provide the software to read the CD's preferably 1099 Express.

Vendor must provide the software to print 1099R's from these CD's (i.e. CPRB must be able to pull up a record and print the 1099R).

The successful bidder must have a Compliance Office that maintains expertise with IRS requirements for 1099R's. Vendor must provide proof of this expertise.

The vendor must mail the ~55,000 forms per year using the most cost effective method.

Vendor must have the capability to add inserts in with the 1099R's. Inserts are to be 8.5"x11". They will be sent by CPRB to the vendor in PDF format. Vendor will then fax back a copy of the insert for CPRB approval. Upon CPRB approval, the vendor will copy and add the inserts. Unit price for inserts will be used for each separate insert added by CPRB as multiple inserts may be necessary. Inserts will be single sided and printed in black ink. Also every other year you

Q:\ITMgrs\1099\Specs...

would include a payroll calendar printed by the WV CPRB and mailed to you for insertion.

Vendor must agree to safeguard all information and sign a CPRB Confidentiality and Non-Disclosure Statement.

The successful bid must agree to the following timeline:

November 1 – Vendor will test CPRB data

November 30 – On or before this date the vendor will send results of testing to CPRB

December 1 – The vendor will ask for final count from CPRB so they can order paper and envelopes

December 31 – On or before this date the vendor will schedule a time to help install the 1099 Express (or similar) software required to reproduce individual 1099R's. The vendor will supply a file created from the CPRB test file that will allow 1099 Express (or similar) software to bring up any account and print that account. This file will be purely for test purposes. For the live run the vendor will also supply a file for use with this software. In addition to that file the vendor will supply a final production CD that will contain the whole reproduction of the print job. This CD will be in a PDF format that can be read by Adobe Acrobat.

January 1 – Vendor will request a postage check from CPRB. The postage check will be made payable to US POSTMASTER. Any excess will be credited on the final bill or any additional postage required will be requested on the final bill.

January 10 – Vendor will receive postage check on or before this date. Also inserts must be provided by CPRB on or before this date. Vendor will print a sample insert and fax to (304) 558-6337 for approval.

January 18 – Vendor will sweep FTP site for CPRB data

January 26 – Vendor will deliver all forms to the Post Office to be mailed. Do not break up into batches – **must be mailed all at once.**

January 27 – Vendor will supply a CD to the CPRB of the print job and will also supply a file to import into the 1099 Express (or similar) software to easily print individual 1099R's.

COST SHEET

Cost per yearly printing and mailing
of 1099 Forms

\$ _____

Option A: Print 1099R form 2 sides as specified in original RFQ
Print Instruction sheet with member address on back side to ensure data security when mailing (only address is seen through window of envelope)

~55,000 @ \$318.00/M = \$ 17,490.00

Option B: Print 1099R form 1 side
Print Instruction sheet 1 side – reformat to include mailing address to be shown through window envelope

~55,000 @ \$270.00/M = \$ 14,850.00

State of West Virginia
VENDOR PREFERENCE CERTIFICATE

Certification and application* is hereby made for Preference in accordance with *West Virginia Code*, §5A-3-37. (Does not apply to construction contracts). *West Virginia Code*, §5A-3-37, provides an opportunity for qualifying vendors to request (at the time of bid) preference for their residency status. Such preference is an evaluation method only and will be applied only to the cost bid in accordance with the *West Virginia Code*. This certificate for application is to be used to request such preference. The Purchasing Division will make the determination of the Resident Vendor Preference, if applicable.

1. Application is made for 2.5% resident vendor preference for the reason checked:

- ____ 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,
 ____ Bidder is a partnership, association or corporation resident vendor and 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 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,
 ____ Bidder is a 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; or,

2. Application is made for 2.5% resident vendor preference for the reason checked:

- ____ 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; or,

3. Application is made for 2.5% resident vendor preference for the reason checked:

- ____ 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 Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or,

4. Application is made for 5% resident vendor preference for the reason checked:

- ____ Bidder meets either the requirement of both subdivisions (1) and (2) or subdivision (1) and (3) as stated above; or,

5. Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:

- ____ Bidder is an individual resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard and has resided in West Virginia continuously for the four years immediately preceding the date on which the bid is submitted; or,

6. Application is made for 3.5% resident vendor preference who is a veteran for the reason checked:

- ____ Bidder is a resident vendor who is a veteran of the United States armed forces, the reserves or the National Guard, if, for purposes of producing or distributing the commodities or completing the project which is the subject of the vendor's bid and continuously over the entire term of the project, on average at least seventy-five percent of the vendor's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years.

Bidder understands if the Secretary of 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) reject the bid; 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.

By submission of this certificate, Bidder agrees to disclose any reasonably requested information to the Purchasing Division and authorizes the Department of 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.

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.

Bidder: Cathedral Corporation Signed: Arnell Milcarsh
 Date: 5-11-09 Title: Director of Client Special Services

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

VENDOR OWING A DEBT TO THE STATE:

West Virginia Code §5A-3-10a provides that: 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 owed is an amount greater than one thousand dollars in the aggregate.

PUBLIC IMPROVEMENT CONTRACTS & DRUG-FREE WORKPLACE ACT:

If this is a solicitation for a public improvement construction contract, the vendor, by its signature below, affirms that it has a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the **West Virginia Code**. The vendor **must** make said affirmation with its bid submission. Further, public improvement construction contract may not be awarded to a vendor who does not have a written plan for a drug-free workplace policy in compliance with Article 1D, Chapter 21 of the **West Virginia Code** and who has not submitted that plan to the appropriate contracting authority in timely fashion. For a vendor who is a subcontractor, compliance with Section 5, Article 1D, Chapter 21 of the **West Virginia Code** may take place before their work on the public improvement is begun.

ANTITRUST:

In submitting a bid to any agency for the state of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the state of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the state of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the state of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership or person or entity submitting a bid for the same materials, supplies, equipment or services and is in all respects fair and without collusion or fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

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. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in <http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf>.

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

Vendor's Name: Cathedral Corporation
Authorized Signature: Samuel Mulcarshi Date: 5-11-09



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DATE PRINTED	TERMS OF SALE	SHIP VIA	FOB	FREIGHT TERMS
05/04/2009				

BID OPENING DATE: 05/12/2009 BID OPENING TIME 01:30PM

LINE	QUANTITY	UOP	QAT NO	ITEM NUMBER	UNIT PRICE	AMOUNT
				ADDENDUM NO. 1		
				THIS ADDENDUM IS ISSUED TO:		
				1.) ANSWER ALL TECHNICAL QUESTIONS SUBMITTED PRIOR TO THE DEADLINE FOR TECHNICAL QUESTIONS AND		
				2.) CHANGE THE BID OPENING DATE:		
				BID OPENING DATE IS CHANGED TO: 05/12/2009		
				BID OPENING TIME REMAINS: 1:30 PM		
				***** END ADDENDUM NO. 1 *****		
0001	1	YR		966-52		
				PUBLICATIONS (30 PAGES OR MORE), PRINTING OF (FOUR C		

SEE REVERSE SIDE FOR TERMS AND CONDITIONS

SIGNATURE <i>Samuel Mulcahy</i>	TELEPHONE 315-338-0021	DATE 5-11-09
TITLE Dir Client Spec Svcs	FEIN 14-0576820	ADDRESS CHANGES TO BE NOTED ABOVE

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

Q: Regarding the above RFQ, what are the envelope specifications (size, stock, window, printing, color)?

A: 2-window with "IMPORTANT TAX DOCUMENT ENCLOSED"
White 9 7/16" x 3 7/8" envelope size with confidential tint

Q: What are the paper specifications (brand, weight, color)?

A: Color white,
Brand ?,
Weight 24 pound

Q: Does the 1099R insert into the envelope flat or is it folded?

A: The 1099 is folded.

Q: Is the bid opening date 05/05/2009 or 05/08/2009?

Q: If there are incomplete addresses, the complete address must be added by the vendor, using USPS approved method. What do you mean by "incomplete" addresses? Provide example.

A: You can ignore this.

Q: In lieu of 1099 Express, would searchable PDF files on CD be acceptable?

A: No

Q: In lieu of 1099 Express, will the client be willing to utilize Adobe Reader for PDF printing purposes?

A: No

Q: Is there a paper preference for 8.5" x 11" insert printing?

A: 20 pounds or better. Keep in mind that one of the inserts (every other year) is a full-color Calendar provided by the WV State Auditor's Office and we have no control over that paper weight. We mail this calendar to your location

Q: Is the input file 1099-R recipient information in a particular order? Last Name, Zip Code, SSN?

A: No, you would sort them by zip I assume. Our preferred layout is attached.

Q: Explain what is meant by the CPRB PDF insert and approval process?

A: We send it to you in PDF form, you print a sample, fax the sample to (304) 558-5455, we approve to ensure legibility and completeness.

Q: As multiple inserts may be necessary, do 1099-R recipients receive all inserts? If a single

insert, do all 1099-R recipients receive the insert?

A: The instruction sheet (PDF) goes to all 1099-R recipients. If there is an additional insert that does not go to all recipients we will divide the file.

Q: Can we receive a sample "input" file with format explanation?

A: See attached file layout.

Q: If the successful vendor is required to provide a CD with a PDF image of each and every mailed 1099R tax form, why do you need software to read and /or print out additional copies? Are you doing something else with the software?

A: The software is also used to edit 1099R's for corrections and to print corrected copies.

Q: You make mention of 1099 Express software in the bid, was WV CPRB licensed to use 1099 Express or some other software in the past? If so, what software and what year(s)?

A: 1099 Express 2006, 2007, 2008

Q: Concerning the insert(s), are they generic or customized to each individual recipient? If they are customized, how much customized information is each insert? Did you have inserts in any of the last three years?

A: Yes, PDF instructions are every year.

Q: You mention a calendar insert needed every other year. What the specs for the calendar? A. Size? B. What material is it printed on? C. Is 2009 a "calendar year"?

A: The WV State Auditor's Office prints the full-color calendar and we mail it to you. They are every other year (2006, 2008, 2010...). There is no calendar in 2009.

Q: What size envelope was used in the past? Was the envelope a no window, 1 window, or two window envelope? Did you have a confidential inside tint?

A: 2-window with "IMPORTANT TAX DOCUMENT ENCLOSED". Yes, to confidential tint.

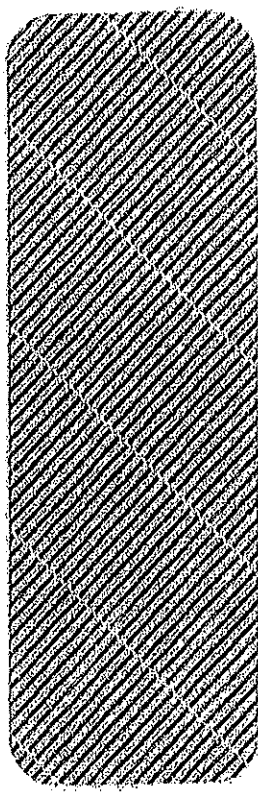
Q: Do you have a complete sample?

A: We currently do not have any samples but we have attached a copy of the envelope previously used, along with copies of all documents that are inserted.

PRESORTED
FIRST CLASS MAIL
U.S. POSTAGE PAID
PITTSBURGH, PA
PERMIT NO. 4540

**Important Tax Return
Document Enclosed**

614



2550401556 9 7/16"



PAYER'S name, street address, city, state, and ZIP code
W VA. PUBLIC EMPLOYEES RET SYS
4101 MACCORKLE AVENUE SE
CHARLESTON, WV 25304

1 Gross distribution \$ 1985.88
2a Taxable amount \$ 1985.88
2b Taxable amount not determined
3 Capital gain (incl. in 2a)

OMB No. 1545-0119
2008
Total distribution
4 Federal tax withheld

Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs Insurance Contracts, etc.
Form 1099-R Copy B

PAYER'S Federal Identification No.
55-6011167

RECIPIENT'S Identification No.
000-00-0000

RECIPIENT'S Name and Address

5 Employee contributions or insurance premiums
7 Distribution code 7
8a Your percentage of total distribution
10 State tax withheld

6 Net unrealized appreciation in employer's securities
8 Other
9b Total employee contributions
11 State/Payer's state no.

Report this income on your Federal tax return. If this form shows Federal income tax withheld in box 4 attach this copy to your return
12 State distribution
13 Local distribution

JOHN DOE
123 HOME STREET
ANYWHERE, WV 25304-1636

Account number (see instructions)
236328338920080001P1

16 Year of Roth cont.

9a Your percentage of total distribution
10 State tax withheld
13 Local tax withheld

11 State/Payer's state no.
14 Name of locality
15 Local distribution

Form 1099-R This information is being furnished to the Internal Revenue Service.

PAYER'S name, street address, city, state, and ZIP code
W VA. PUBLIC EMPLOYEES RET SYS
4101 MACCORKLE AVENUE SE
CHARLESTON, WV 25304

1 Gross distribution \$ 1985.88
2a Taxable amount \$ 1985.88
2b Taxable amount not determined
3 Capital gain (incl. in 2a)

OMB No. 1545-0119
2008
Total distribution
4 Federal tax withheld

Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs Insurance Contracts, etc.
Form 1099-R Copy C

PAYER'S Federal Identification No.
55-6011167

RECIPIENT'S Identification No.
000-00-0000

RECIPIENT'S Name and Address

5 Employee contributions or insurance premiums
7 Distribution code 7
8a Your percentage of total distribution
10 State tax withheld

6 Net unrealized appreciation in employer's securities
8 Other
9b Total employee contributions
11 State/Payer's state no.

For Recipient's Records

JOHN DOE
123 HOME STREET
ANYWHERE, WV 25304-1636

Account number (see instructions)
236328338920080001P1

16 Year of Roth cont.

9a Your percentage of total distribution
10 State tax withheld
13 Local tax withheld

11 State/Payer's state no.
14 Name of locality
15 Local distribution

Form 1099-R This information is being furnished to the Internal Revenue Service.

PAYER'S name, street address, city, state, and ZIP code
W VA. PUBLIC EMPLOYEES RET SYS
4101 MACCORKLE AVENUE SE
CHARLESTON, WV 25304

1 Gross distribution \$ 1985.88
2a Taxable amount \$ 1985.88
2b Taxable amount not determined
3 Capital gain (incl. in 2a)

OMB No. 1545-0119
2008
Total distribution
4 Federal tax withheld

Distributions From Pensions, Annuities, Retirement or Profit-Sharing Plans, IRAs Insurance Contracts, etc.
Form 1099-R Copy 2

PAYER'S Federal Identification No.
55-6011167

RECIPIENT'S Identification No.
000-00-0000

RECIPIENT'S Name and Address

5 Employee contributions or insurance premiums
7 Distribution code 7
8a Your percentage of total distribution
10 State tax withheld

6 Net unrealized appreciation in employer's securities
8 Other
9b Total employee contributions
11 State/Payer's state no.

File this copy with your state, city, or local income tax return, when required

JOHN DOE
123 HOME STREET
ANYWHERE, WV 25304-1636

Account number (see instructions)
236328338920080001P1

16 Year of Roth cont.

9a Your percentage of total distribution
10 State tax withheld
13 Local tax withheld

11 State/Payer's state no.
14 Name of locality
15 Local distribution

Form 1099-R This information is being furnished to the Internal Revenue Service.

MEMORANDUM

TO: State of West Virginia 1099-R Recipient

DATE: January 2009

RE: Explanation of 2008 Form 1099-R

To assist you in understanding your 2008 Form 1099-R, the following information is provided:

Box 1 - Gross distribution - This is the total gross annuity, loan offset or lump-sum distribution you received in 2008. If you retired in 2008 from the Teachers' Retirement or the Deputy Sheriff Retirement System and took a loan offset, you will receive two (2) 1099-R forms.

Box 2a - Taxable amount - This is the total amount of your annuity or lump-sum distribution in 2008 that may be subject to income tax. If you are required to complete a 2008 income tax return, please report the amount in this box.

Box 4 - Federal income tax withheld - This is the total amount of federal income tax deducted from your annuity or lump-sum distribution in 2008. Include this amount on your federal income tax return as tax withheld, and if Box 4 shows an amount other than zero, attach Copy B to your return.

Box 5 - Employee contributions or insurance premiums - The figure reported in this box, if any, is the total amount of your annuity or lump-sum distribution in 2008 that is not taxable. This figure is for IRS purposes only and is not a deduction from your annuity. **This is not a deduction for insurance premiums.**

Box 7 - Distribution code - If you are age 59 ½ or less, and your distribution code is a "2" in Box 7, you may need to file Form 5329. *Questions regarding your tax preparation should be directed to the IRS or your tax preparer.*

Box 9b - Total employee contributions - This box applies to retirees only. There is only an amount reported in this box the first year of your retirement. This amount represents the total nontaxable contributions, if any, prior to July 1, 1986 and is for IRS purposes only. This is not a deduction from your retirement annuity.

Box 10 - State tax withheld - This is the total amount of West Virginia state income tax deducted from your annuity or lump-sum distribution in 2008. Deductions for state income tax are for the State of West Virginia only.

For an explanation of information reported in all other boxes, see the instructions on the back of your 1099-R form.

*****NOTICE TO RETIREES ONLY*****

TO AVOID DELAY IN RECEIVING YOUR ANNUAL 1099R, PLEASE NOTIFY OUR OFFICE OF ANY ADDRESS CHANGES.

Federal Tax Law requires that we notify all retirees/beneficiaries annually of their option to have federal tax withheld from their pension check.

- A. You have the right to elect not to have withholding apply.
- B. You have the right to revoke a prior election not to have withholding apply.
- C. You have the right to adjust the allowance claimed on your current withholding certificate.

***** IMPORTANT: YOU DO NOT NEED TO REQUEST A WITHHOLDING CERTIFICATE UNLESS YOU WISH TO CHANGE YOUR WITHHOLDING STATUS.** Forms may be obtained by writing to our office or by visiting our web-site at www.wvretirement.com and clicking on the "Retirees" link.

Anne Werum Lambright, Executive Director
 Consolidated Public Retirement Board
 4101 MacCorkle Avenue SE
 Charleston, WV 25304
 www.wvretirement.com



Glen B. Gainer III, State Auditor
 West Virginia State Auditor's Office
 Electronic Payments Division
 Building 1, Suite W-125
 www.wvsao.gov

2010 DIRECT DEPOSIT CALENDAR FOR RETIREES

JANUARY							FEBRUARY							MARCH						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
					1	2	1	2	3	4	5	6	1	2	3	4	5	6		
3	4	5	6	7	8	9	7	8	9	10	11	12	13	7	8	9	10	11	12	13
10	11	12	13	14	15	16	14	15	16	17	18	19	20	14	15	16	17	18	19	20
17	18	19	20	21	22	23	21	22	23	24	25	26	27	21	22	23	24	25	26	27
24	25	26	27	28	29	30	28							28	29	30	31			
31																				
APRIL							MAY							JUNE						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
				1	2	3						1			1	2	3	4	5	
4	5	6	7	8	9	10	2	3	4	5	6	7	8	6	7	8	9	10	11	12
11	12	13	14	15	16	17	9	10	11	12	13	14	15	13	14	15	16	17	18	19
18	19	20	21	22	23	24	16	17	18	19	20	21	22	20	21	22	23	24	25	26
25	26	27	28	29	30	23	24	25	26	27	28	29	27	28	29	30				
							30	31												
JULY							AUGUST							SEPTEMBER						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
				1	2	3	1	2	3	4	5	6	7			1	2	3	4	
4	5	6	7	8	9	10	8	9	10	11	12	13	14	5	6	7	8	9	10	11
11	12	13	14	15	16	17	15	16	17	18	19	20	21	12	13	14	15	16	17	18
18	19	20	21	22	23	24	22	23	24	25	26	27	28	19	20	21	22	23	24	25
25	26	27	28	29	30	31	29	30	31					26	27	28	29	30		
OCTOBER							NOVEMBER							DECEMBER						
S	M	T	W	T	F	S	S	M	T	W	T	F	S	S	M	T	W	T	F	S
				1	2		1	2	3	4	5	6			1	2	3	4		
3	4	5	6	7	8	9	7	8	9	10	11	12	13	5	6	7	8	9	10	11
10	11	12	13	14	15	16	14	15	16	17	18	19	20	12	13	14	15	16	17	18
17	18	19	20	21	22	23	21	22	23	24	25	26	27	19	20	21	22	23	24	25
24	25	26	27	28	29	30	28	29	30					26	27	28	29	30	31	
31																				



Date Deposit funds will be available in your account
 (Also indicates the date paper checks will be mailed)

If the Amount of your Direct Deposit is Wrong:
 Contact: Retirement Benefits
 Consolidated Public Retirement Board
 1.800.654.4406

For Problems With Your Bank Account:
 Contact: Electronic Payments Division
 West Virginia State Auditor's Office
 1.800.500.4079