



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

State of West Virginia
 Request for Quotation
 34 - Service - Prof

Proc Folder: 103204

Doc Description: Open End Contract for Advertising Services

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2015-10-08	2015-10-20 13:30:00	CRFQ 0511 HHR1600000001	2

BID RECEIVING LOCATION

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

VENDOR


Vendor Name, Address and Telephone Number:

Fahlgren, Inc. (DBA Fahlgren Mortine)
 157 Summers Street, Suite 305
 Charleston, WV 25301
 681-945-6110

10/19/15 11:25:29
 WV Purchasing Division

FOR INFORMATION CONTACT THE BUYER

Robert Kilpatrick
 (304) 558-0067
 robert.p.kilpatrick@wv.gov

Signature X  FEIN # 550736802 DATE October 14, 2015

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

ADDITIONAL INFORMATION:

Addendum #1: To provide a copy of the Mandatory Pre-Bid Meeting Sign In Sheet, to answer Vendor-submitted Technical Questions, and to revise the Specifications (to remove Qualifications Item #3.6 - original 3.7 is renumbered to 3.6) and the Pricing Page (to correct a typographical error).

The WV Purchasing Division, on behalf of the Agency, the WV Department of Health and Human Resources, is soliciting bids for an open-end contract to provide professional advertising services for five (5) bureaus within the Agency, including the Bureau for Child Support Enforcement, the Bureau for Children and Families, the Bureau for Behavioral Health and Health Facilities, the Bureau for Medical Services, and the Bureau for Public Health, plus for the Office of the Inspector General, Administrative Services, Management Information Services, and the Office of the Secretary, per the attached instructions, terms and conditions, and specifications.

MANDATORY PRE-BID MEETING: See Instructions to Vendors Submitting Bids for details.

INVOICE TO		SHIP TO	
BUYER - 304-957-0209		BUYER - 304-957-0209	
HEALTH AND HUMAN RESOURCES		HEALTH AND HUMAN RESOURCES	
OFFICE OF COMMUNICATIONS		OFFICE OF COMMUNICATIONS	
ONE DAVIS SQUARE, STE 100 EAST		ONE DAVIS SQUARE, STE 100 EAST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Contract Administration/ Consultation (4.1.1)	20.00000	HOUR	\$45	\$900

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :

Contract Administration/ Consultation (4.1.1)

INVOICE TO		SHIP TO	
BUYER - 304-957-0209		BUYER - 304-957-0209	
HEALTH AND HUMAN RESOURCES		HEALTH AND HUMAN RESOURCES	
OFFICE OF COMMUNICATIONS		OFFICE OF COMMUNICATIONS	
ONE DAVIS SQUARE, STE 100 EAST		ONE DAVIS SQUARE, STE 100 EAST	
CHARLESTON	WV25301	CHARLESTON	WV 25301
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Account Services (4.1.2)	10.00000	HOUR	\$110	\$1,100

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :

Account Services (4.1.2)

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	Television Production (4.1.3)	50.00000	HOUR	\$80	\$4,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Television Production (4.1.3)

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	Radio Production (4.1.4)	50.00000	HOUR	\$80	\$4,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Radio Production (4.1.4)

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	Outdoor Advertising (4.1.5)	50.00000	HOUR	\$60	\$3,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Outdoor Advertising (4.1.5)

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	Media Buys (4.1.6)	50.00000	HOUR	\$80	\$4,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Media Buys (4.1.6)

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	Print Media (4.1.7)	50.00000	HOUR	\$80	\$4,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Print Media (4.1.7)

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
8	Internet/Worldwide Web (4.1.8)	10.00000	HOUR	\$100	\$1,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Internet/Worldwide Web (4.1.8)

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
9	Survey, Analysis, Evaluation (4.1.9)	50.00000	HOUR	\$65	\$3,250

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Survey, Analysis, Evaluation (4.1.9)

INVOICE TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
10	Design and Copy (4.1.10)	50.00000	HOUR	\$65	\$3,250

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Design and Copy (4.1.10)

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
11	Data Acceptance and Transfer (4.1.11)	10.00000	HOUR	\$80	\$4,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Data Acceptance and Transfer (4.1.11)

INVOICE TO	SHIP TO
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US	BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
12	Media Buying Add-On	1.00000	LS	0%	\$2,750,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :
Percentage Add-On for Media Buying: 0 % See Pricing Page (Enter Media Buying Add-On Subtotal, B, as Unit Price)

BUYER TO		SHIP TO	
BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV25301 US		BUYER - 304-957-0209 HEALTH AND HUMAN RESOURCES OFFICE OF COMMUNICATIONS ONE DAVIS SQUARE, STE 100 EAST CHARLESTON WV 25301 US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
13	Subcontract Purchases Add-On	1.00000	LS	0%	\$500,000

Comm Code	Manufacturer	Specification	Model #
82101800			

Extended Description :

Percentage Add-On for Subcontractor Purchases: 0 % See Pricing Page (Enter Subcontractor Purchases Add-On Subtotal, C as Unit Price)

SCHEDULE OF EVENTS

Line	Event	Event Date
1	Mandatory Pre Bid Meeting (10:00am EST)	2015-10-01
2	Technical Questions due by 5:00pm EST	2015-10-02

HHR160000001	Document Phase Final	Document Description Open End Contract for Advertising Services	Page 8 of 8
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ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.:

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:
(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Fahlgren, Inc. (DBA Fahlgren Mortine)

Company


Authorized Signature

October 14, 2015

Date

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

CENTRALIZED REQUEST FOR QUOTATION
CRFQ 0511 HHR160000001
ADVERTISING SERVICES

9.4. Anyone performing under this Contract will be subject to Agency's security protocol and procedures.

9.5. Vendor shall inform all staff of Agency's security protocol and procedures.

10. VENDOR DEFAULT:

10.1. The following shall be considered a vendor default under this Contract.

10.1.1. Failure to perform Contract Services in accordance with the requirements contained herein.

10.1.2. Failure to comply with other specifications and requirements contained herein.

10.1.3. Failure to comply with any laws, rules, and ordinances applicable to the Contract Services provided under this Contract.

10.1.4. Failure to remedy deficient performance upon request.

10.2. The following remedies shall be available to Agency upon default.

10.2.1. Immediate cancellation of the Contract.

10.2.2. Immediate cancellation of one or more release orders issued under this Contract.

10.2.3. Any other remedies available in law or equity.

11. MISCELLANEOUS:

11.1. **Contract Manager:** During its performance of this Contract, Vendor must designate and maintain a primary contract manager responsible for overseeing Vendor's responsibilities under this Contract. The Contract manager must be available during normal business hours to address any customer service or other issues related to this Contract. Vendor should list its Contract manager and his or her contact information below.

Contract Manager: Matthew Sutton
Telephone Number: 681-945-6110
Fax Number: 304-382-0002
Email Address: matthew.sutton@fahlgren.com

CERTIFICATION AND SIGNATURE PAGE

By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

Fahlgren, Inc. (DBA Fahlgren Mortine)

(Company)



Melissa Dykstra, Executive Vice President

(Authorized Signature) (Representative Name, Title)

614-383-1575; 614-383-1501 October 14, 2015

(Phone Number) (Fax Number) (Date)

CRFQ 0511 HHR160000001

Exhibit A: Pricing Page

A. ADVERTISING SERVICES/HOURLY RATES

	Estimated* Annual Hours	All-Inclusive Hourly Rate	Extended Total
Contract Administration/Consultation	20	\$45	\$900
Account Services	10	\$110	\$1,100
Television Production	50	\$80	\$4,000
Radio Production	50	\$80	\$4,000
Outdoor Advertising	50	\$60	\$3,000
Media Buys	50	\$80	\$4,000
Print Media	50	\$80	\$4,000
Internet/Worldwide Web	10	\$100	\$1,000
Survey, Analysis, Evaluation	50	\$65	\$3,250
Design and Copy	50	\$80	\$4,000
Data Acceptance and Transfer	10	\$70	\$700
		Hourly Bid SubTotal	\$29,950 (A)

B. MEDIA BUYING ADD-ON

All vendors responding to this CRFQ must provide a percentage of add-on, or "markup," for media buying activities. If the bidder intends to charge an add-on to their actual costs for media buying activities, they should follow the formula below for determining their bid amount. Bidders intending to not charge an add-on or markup should use an Add-On percentage of Zero (0) and Multiplier of 1.0. If the bidder fails to quote an add-on percentage, it shall be interpreted to mean that no add-on charge or markup will be applied to their media buying costs during the life of the Contract.

Add-on for Media Buying is (stated as a percentage) 0 %

Multiplier is (convert percentage to decimal and add to 1; For example, 10% Add-on would be .10; making Multiplier 1.10) 1

X Estimated* Amount of \$2,750,000.00 = \$2,750,000 **(B)**

**MEDIA BUYING ADD-ON
SUBTOTAL**

C. SUBCONTRACTOR PURCHASES ADD-ON

All vendors responding to this CRFQ must provide a percentage of add-on, or "markup," for purchases from subcontractors. If the bidder intends to charge an add-on to their actual costs for subcontractor purchases, they should follow the formula below for determining their bid amount. Bidders intending to not charge an add-on or markup should use an Add-On percentage of Zero (0) and Multiplier of 1.0. If the bidder fails to quote an add-on percentage, it shall be interpreted to mean that no add-on charge or markup will be applied to their media buying costs during the life of the Contract.

Add-on for Media Buying is (stated as a percentage) 0 %

Multiplier is (convert percentage to decimal and add to 1; For example, 10% Add-on would be .10; making Multiplier 1.10) 1

X Estimated* Amount of \$500,000.00 = \$500,000 **(C)**

**SUBCONTRACTOR
PURCHASES ADD-ON
SUBTOTAL**

**GRAND TOTAL
BID = (A) + (B) +
(C) =** \$3,279,950

THE AMERICAN INSTITUTE OF ARCHITECTS

AIA Document A310 Bid Bond

KNOW ALL MEN BY THESE PRESENTS, THAT WE Fahlgren, Inc, dba Fahlgren Mortine

4030 Easton Station, Suite 300, Columbus, OH 43219

as Principal, hereinafter called the Principal, and The Hanover Insurance Company

440 Lincoln Street, Worcester, MA 01653

a corporation duly organized under the laws of the State of NH

as Surety, hereinafter called the Surety, are held and firmly bound unto West Virginia Department of Health and Human

Resources

2019 Washington Street E, Charleston, WV

as Obligee, hereinafter called the Obligee, in the sum of 5% of bid amount

Dollars (\$ _____),

for the payment of which sum well and truly to be made, the said Principal and the said Surety, bind ourselves, our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

WHEREAS, the Principal has submitted a bid for Advertising Services

NOW, THEREFORE, if the Obligee shall accept the bid of the Principal and the Principal shall enter into a Contract with the Obligee in accordance with the terms of such bid, and give such bond or bonds as may be specified in the bidding or Contract Documents with good and sufficient surety for the faithful performance of such Contract and for the prompt payment of labor and materials furnished in the prosecution thereof, or in the event of the failure of the Principal to enter such Contract and give such bond or bonds, if the Principal shall pay to the Obligee the difference not to exceed the penalty hereof between the amount specified in said bid and such larger amount for which the Obligee may in good faith contract with another party to perform the Work covered by said bid, then this obligation shall be null and void, otherwise to remain in full force and effect.

Signed and sealed this 20th day of October, 2015

Alyssa Smith
(Witness)

Fahlgren, Inc, dba Fahlgren Mortine

(Principal) (Seal)
By: [Signature] TREASURER
(Title)

Jerry Velpe
(Witness)



The Hanover Insurance Company

(Surety) (Seal)
By: [Signature]
Attorney-in-Fact Virginia A. Peters (Title)

**THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA**

**POWERS OF ATTORNEY
CERTIFIED COPY**

KNOW ALL MEN BY THESE PRESENTS: That THE HANOVER INSURANCE COMPANY and MASSACHUSETTS BAY INSURANCE COMPANY, both being corporations organized and existing under the laws of the State of New Hampshire, and CITIZENS INSURANCE COMPANY OF AMERICA, a corporation organized and existing under the laws of the State of Michigan, do hereby constitute and appoint

Virginia A. Peters

of Columbus, OH and each is a true and lawful Attorney(s)-in-fact to sign, execute, seal, acknowledge and deliver for, and on its behalf, and as its act and deed any place within the United States, or, if the following line be filled in, only within the area therein designated

any and all bonds, recognizances, undertakings, contracts of indemnity or other writings obligatory in the nature thereof, as follows:

Surety Bond Number: Bid Bond

Principal: Fahlgren, Inc, dba Fahlgren Mortine

Obligee: West Virginia Department of Health and Human Resources

and said companies hereby ratify and confirm all and whatsoever said Attorney(s)-in-fact may lawfully do in the premises by virtue of these presents. These appointments are made under and by authority of the following Resolution passed by the Board of Directors of said Companies which resolutions are still in effect:

"RESOLVED, That the President or any Vice President, in conjunction with any Vice President, be and they are hereby authorized and empowered to appoint Attorneys-in-fact of the Company, in its name and as its acts, to execute and acknowledge for and on its behalf as Surety any and all bonds, recognizances, contracts of indemnity, waivers of citation and all other writings obligatory in the nature thereof, with power to attach thereto the seal of the Company. Any such writings so executed by such Attorneys-in-fact shall be as binding upon the Company as if they had been duly executed and acknowledged by the regularly elected officers of the Company in their own proper persons." (Adopted October 7, 1981 - The Hanover Insurance Company; Adopted April 14, 1982 - Massachusetts Bay Insurance Company; Adopted September 7, 2001 - Citizens Insurance Company of America)

IN WITNESS WHEREOF, THE HANOVER INSURANCE COMPANY, MASSACHUSETTS BAY INSURANCE COMPANY and CITIZENS INSURANCE COMPANY OF AMERICA have caused these presents to be sealed with their respective corporate seals, duly attested by two Vice Presidents, this 6th day of October 2011.



**THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA**

Robert Thomas
Robert Thomas, Vice President

Mary Fitzgerald
Mary Fitzgerald, Vice President

THE COMMONWEALTH OF MASSACHUSETTS)
COUNTY OF WORCESTER) ss.

On this 6th day of October 2011 before me came the above named Vice Presidents of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, to me personally known to be the individuals and officers described herein, and acknowledged that the seals affixed to the preceding instrument are the corporate seals of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, respectively, and that the said corporate seals and their signatures as officers were duly affixed and subscribed to said instrument by the authority and direction of said Corporations.



Barbara A. Garlick
Barbara A. Garlick, Notary Public
My Commission Expires September 21, 2018

I, the undersigned Vice President of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America, hereby certify that the above and foregoing is a full, true and correct copy of the Original Power of Attorney issued by said Companies, and do hereby further certify that the said Powers of Attorney are still in force and effect.

This Certificate may be signed by facsimile under and by authority of the following resolution of the Board of Directors of The Hanover Insurance Company, Massachusetts Bay Insurance Company and Citizens Insurance Company of America.

"RESOLVED, That any and all Powers of Attorney and Certified Copies of such Powers of Attorney and certification in respect thereto, granted and executed by the President or any Vice President in conjunction with any Vice President of the Company, shall be binding on the Company to the same extent as if all signatures therein were manually affixed, even though one or more of any such signatures thereon may be facsimile." (Adopted October 7, 1981 - The Hanover Insurance Company; Adopted April 14, 1982 - Massachusetts Bay Insurance Company; Adopted September 7, 2001 - Citizens Insurance Company of America)

GIVEN under my hand and the seals of said Companies, at Worcester, Massachusetts, this 20th day of October 2015

**THE HANOVER INSURANCE COMPANY
MASSACHUSETTS BAY INSURANCE COMPANY
CITIZENS INSURANCE COMPANY OF AMERICA**

Glenn Margosian
Glenn Margosian, Vice President



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
4/21/2015

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 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 Reagle & Padden, Inc. 200 Star Avenue, Suite 210 Parkersburg, WV 26101	CONTACT NAME: Kathy McVey
	PHONE (A/C, No, Ext): (304) 422-8476 FAX (A/C, No): (304) 428-7374
	E-MAIL ADDRESS: Kathy@reagle-padden.com
	INSURER(S) AFFORDING COVERAGE
	INSURER A: Cincinnati Insurance Co. NAIC # 10677
INSURED Fahlgren, Inc., Turner Public Relations, Inc Attn: John Garko 4030 Easton Station, Suite 300 Columbus, OH 43219-7012	INSURER B:
	INSURER C:
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: **CL1521603591** REVISION NUMBER: **1**

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			ENP0315981	4/1/2015	4/1/2016	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
A	AUTOMOBILE LIABILITY			ENP0315981	4/1/2015	4/1/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							Uninsured/Underinsured CSL \$ 250,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB			ENP0315981	4/1/2015	4/1/2016	EACH OCCURRENCE \$ 15,000,000
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> OCCUR					AGGREGATE \$
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$	<input type="checkbox"/> CLAIMS-MADE	0				\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC 1905158-19	12/28/2014	12/28/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A				E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Employee Theft			ENP0315981	4/1/2015	4/1/2016	Limit: 1,000,000
A	Business Personal Prop.			ENP0315981	4/1/2015	4/1/2016	Limit: 200,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

CERTIFICATE HOLDER

Robert.L.Price@wv.gov

WV Dept of Health & Human Resources
Office of Purchasing
Attn: Robert Price, CPPO, CPPB
One Davis Square - Room 100M
Charleston, WV 25301

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Kathy McVey/KATHY *Kathy B. McVey*

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 Vendor Preference, if applicable.

1. **Application is made for 2.5% 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% 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% 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% 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% 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% 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.
7. **Application is made for preference as a non-resident small, women- and minority-owned business, in accordance with *West Virginia Code* §5A-3-59 and *West Virginia Code of State Rules*.**
 Bidder has been or expects to be approved prior to contract award by the Purchasing Division as a certified small, women- and minority-owned business.

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: Fahlgren, Inc. (DBA Fahlgren Mortine)

Signed: 

Date: October 14, 2015

Title: Executive Vice President

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceed five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Fahlgren, Inc. (DBA Fahlgren Mortine)

Authorized Signature:  Date: October 14, 2015

State of Ohio

County of Delaware, to-wit:

Taken, subscribed, and sworn to before me this 14th day of October, 2015.

My Commission expires December 18, 2015.

AFFIX SEAL HERE

NOTARY PUBLIC 

Purchasing Affidavit (Revised 08/01/2015)

VICKIE FOSTER
NOTARY PUBLIC
COMMISSION EXPIRES 12-18-15