

# FAX

FAX 1-304-724-8728

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**TO: Michelle Childers**  
**COMPANY: WV Purchasing**  
**FROM: Jeff Alan**  
**RE: CRFQ: EBA170000003**  
**TOTAL PAGES: 9 (incl. cover)**  
**DATE: 5 - 10 - 2017**

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Dear Michelle.

I responded to the bid online just now, but I am not taking any chances. So I am sending you all the paperwork I submitted so that I know a real, live human being actually has it in their hands. :)

All the prices should match the online bid. If they don't, please consider these papers 100-percent correct. If you need anything else, please call me.

Thank You!!!!

Jeff Alan  
VSA, Inc.

Jeff Alan  
Video Service of America, Inc.  
1-855-676-8721 - Toll Free

05/10/17 13:15:39  
WV Purchasing Division

If all pages are not received, please call 304-724-8721 for re-transmission



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

State of West Virginia  
Request for Quotation  
04 -- Audio/Video

Proc Folder: 325733

Doc Description: 2 BROADCAST, 3, 2/3" CHIP FIELD/STUDIO HIGH DEF CAMERAS

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2017-04-24	2017-05-10 13:30:00	CRFQ 0439 EBA1700000003	1

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

Vendor Name, Address and Telephone Number:

VSA, INC.  
6929 SEWARD AVE.  
LINCOLN, NE. 68507  
855-676-8721

05/10/17 13:15:44  
WV Purchasing Division

FOR INFORMATION CONTACT THE BUYER

Michelle L Childers  
(304) 558-2063  
michelle.l.childers@wv.gov

Signature X

FEIN #

47-0605133

DATE

5-10-17

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

Request for Quotation

The West Virginia Purchasing Division is soliciting bids on behalf of Educational Broadcasting Authority (EBA) to establish a contract for the one-time purchase of two (2) broadcast field/studio high definition cameras.

CHIEF FINANCIAL OFFICER EDUCATIONAL BROADCASTING 124 INDUSTRIAL PARK RD		PURCHASING ADMINISTRATOR EDUCATIONAL BROADCASTING 600 CAPITOL ST	
BEAVER	WV25813	CHARLESTON	WV 25301-1223
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	FIELD STUDIO CAMERA PACKAGE, SONY PXWX400KF OR EQUAL	2.00000	EA	16,195.00	32,390.00

Comm Code	Manufacturer	Specification	Model #
45121515			

Extended Description :  
3.1.1 FROM SPECS SONY PXWX400KF FIELD/STUDIO CAMERA PACKAGE PLUS ACCESSORIES

CHIEF FINANCIAL OFFICER EDUCATIONAL BROADCASTING 124 INDUSTRIAL PARK RD		PURCHASING ADMINISTRATOR EDUCATIONAL BROADCASTING 600 CAPITOL ST	
BEAVER	WV25813	CHARLESTON	WV 25301-1223
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	TRANSIT CASE	2.00000	EA	367.90	735.80

Comm Code	Manufacturer	Specification	Model #
53121705		LC-24TH	← Correct Spec. for Camera

Extended Description :  
3.1.2 FROM SPECS: CARRYING CASE FOR CAMERA AND LENS WITH LOCK LATCHING MECHANISMS. SONY LC-H300 OR EQUAL

VSA, Inc.  
Response

CHIEF FINANCIAL OFFICER EDUCATIONAL BROADCASTING 124 INDUSTRIAL PARK RD		PURCHASING ADMINISTRATOR EDUCATIONAL BROADCASTING 600 CAPITOL ST	
BEAVER	WV25813	CHARLESTON	WV 25301-1223
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	TRIPOD ADAPTOR	2.00000	EA	273.00	546.00

Comm Code	Manufacturer	Specification	Model #
45121602			VCT14

Extended Description :  
3.1.3 FROM SPECS: PHYSICAL ADAPTOR PLATE FOR TRIPOD MOUNTING; SONY VCT14 ADAPTOR PLATE OR EQUAL

CHIEF FINANCIAL OFFICER EDUCATIONAL BROADCASTING 124 INDUSTRIAL PARK RD		PURCHASING ADMINISTRATOR EDUCATIONAL BROADCASTING 600 CAPITOL ST	
BEAVER	WV25813	CHARLESTON	WV 25301-1223
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	FIBER OPTIC CAMERA ADAPTER	2.00000	EA	3970.00	7940.00

Comm Code	Manufacturer	Specification	Model #
43223323			CAFB70

Extended Description :  
3.1.4 FROM SPECS: FIBER OPTIC CAMERA ADAPTER; SONY CAFB70 FIBER OPTIC CAMERA ADAPTER OR EQUAL

CHIEF FINANCIAL OFFICER EDUCATIONAL BROADCASTING 124 INDUSTRIAL PARK RD		PURCHASING ADMINISTRATOR EDUCATIONAL BROADCASTING 600 CAPITOL ST	
BEAVER	WV25813	CHARLESTON	WV 25301-1223
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	OPTICAL FIBER CABLE 100 METERS	2.00000	EA	1054.00	2108.00

Comm Code	Manufacturer	Specification	Model #
26121607			CCFN100

Extended Description :

3.1.7 FROM SPECS: 100 METER FIBER OPTIC CABLE TO CONNECT BETWEEN CAMERA AND CUU; SONY CCFN100 FIBER OPTIC CABLE OR EQUAL

CHIEF FINANCIAL OFFICER EDUCATIONAL BROADCASTING 124 INDUSTRIAL PARK RD	PURCHASING ADMINISTRATOR EDUCATIONAL BROADCASTING 600 CAPITOL ST
BEAVER WV25813	CHARLESTON WV 25301-1223
US	US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	REMOTE CONTROL PANEL	2.00000	EA	5078.00	10,156.00

Comm Code	Manufacturer	Specification	Model #
45121623			RCP1500

Extended Description :

3.1.6 FROM SPECS: REMOTE CONTROL PANEL; SONY RCP1500 REMOTE CONTROL PANEL OR EQUAL

CHIEF FINANCIAL OFFICER EDUCATIONAL BROADCASTING 124 INDUSTRIAL PARK RD	PURCHASING ADMINISTRATOR EDUCATIONAL BROADCASTING 600 CAPITOL ST
BEAVER WV25813	CHARLESTON WV 25301-1223
US	US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	CAMERA CONTROL UNIT	2.00000	EA	6080.00	12,160.00

Comm Code	Manufacturer	Specification	Model #
45121623			HXCUFB70

Extended Description :


3.1.5 FROM SPECS: SONY HXCUFB70 OR EQUAL

VSA, Inc  
Response

**DESIGNATED CONTACT:** Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

JEFF ALAN, Nat'l Acct. Mgr.  
 (Name, Title)  
JEFF ALAN, Nat'l Acct. Mgr.  
 (Printed Name and Title)  
6929 SEWARD AVE. Lincoln, NE 68507  
 (Address)  
855-676-8721 / FX: 304-724-8728  
 (Phone Number) / (Fax Number)  
JEFFA@VSA1.COM  
 (email address)

**CERTIFICATION AND SIGNATURE:** By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that 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.

VSA, Inc.  
 (Company)  
  
 (Authorized Signature) Nat'l Acct. Mgr.  
 (Representative Name, Title)  
Jeff Alan, Nat'l Acct. Mgr.  
 (Printed Name and Title of Authorized Representative)  
5-10-17  
 (Date)  
855-676-8721 / 304-724-8728  
 (Phone Number) (Fax Number)

Form **W-9**  
(Rev. December 2014)  
Department of the Treasury  
Internal Revenue Service

### Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification; check only one of the following seven boxes:  
 Individual/sole proprietor or single-member LLC  
 Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶  
 C Corporation  
 S Corporation  
 Partnership  
 Trust/estate  
 Other (see instructions) ▶  
 Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  
 Exempt payee code (if any) 5  
 Exemption from FATCA reporting code (if any) \_\_\_\_\_  
 (Apply to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Requester's name and address (optional)

#### Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number

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or

Employer identification number

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

#### Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign Here

Signature of U.S. person

Date ▶

#### General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.  
Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at [www.irs.gov/fw9](http://www.irs.gov/fw9).

#### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
  - Form 1099-C (canceled debt)
  - Form 1099-A (acquisition or abandonment of secured property)
- Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

..... point of contact for matters relating to this Contract.

JEFF ALAN, Nat'l Acct. Mgr.  
 (Name, Title)  
JEFF ALAN, Nat'l Acct. Mgr.  
 (Printed Name and Title)  
6929 SEWARD AVE. Lincoln, NE 68507  
 (Address)  
855-676-8721 / FX: 304-724-8728  
 (Phone Number) / (Fax Number)  
JEFFA @ VSA1.COM  
 (email address)

**CERTIFICATION AND SIGNATURE:** By signing below, or submitting documentation through vVOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that 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.

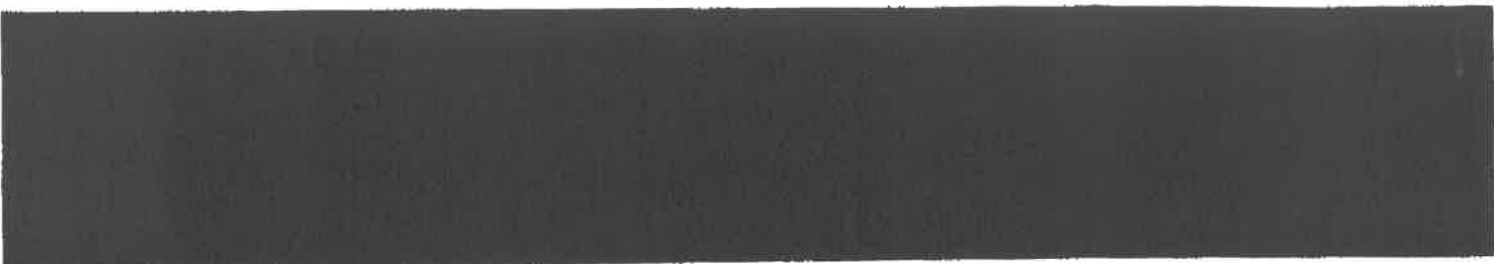
VSA, Inc.  
 (Company)

 Nat Acct Mgr.  
 (Authorized Signature) (Representative Name, Title)

Jeff Alan, Nat'l Acct. Mgr.  
 (Printed Name and Title of Authorized Representative)

5.10.17  
 (Date)

855-676-8721 / 304-724-8728  
 (Phone Number) (Fax Number)





**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 exceeds 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: VSA, Inc.

Authorized Signature: [Signature] Date: 3-31-17

State of West Virginia

County of Jefferson, to-wit:

Taken, subscribed, and sworn to before me this 31<sup>st</sup> day of March, 2017.

My Commission expires Nov 10<sup>th</sup> 2021 20  .

**AFFIX SEAL HERE**

**NOTARY PUBLIC**

[Signature: Kelli Pappas]

*Purchasing Affidavit (Revised 08/01/2015)*

