



# West Virginia Purchasing Division

2019 Washington Street, East  
Charleston, WV 25305  
Telephone: 304-558-2306  
General Fax: 304-558-6026  
Bid Fax: 304-558-3970

The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

## Header

[List View](#)

### General Information

[Contact](#)[Default Values](#)[Discount](#)[Document Information](#)

Procurement Folder: 232220

SO Doc Code: CRFQ

Procurement Type: Central Master Agreement

SO Dept: 0501

Vendor ID: 000000171218 

SO Doc ID: DHH1700000001

Legal Name: FRIENDS INTERPRETING SERVICES LLC


Published Date: 8/18/16

Alias/DBA: ALICE ANN FRIENDS

Close Date: 8/31/16

Total Bid: \$192,105.96

Close Time: 13:30

Response Date: 08/30/2016 

Status: Closed

Response Time: 10:39

Solicitation Description: ADDENDUM\_1: American Sign Language English Interpreter

Total of Header Attachments: 0

Total of All Attachments: 0



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

**State of West Virginia  
 Solicitation Response**

**Proc Folder :** 232220

**Solicitation Description :** ADDENDUM\_1: American Sign Language English Interpreter

**Proc Type :** Central Master Agreement

| Date issued | Solicitation Closes    | Solicitation Response        | Version |
|-------------|------------------------|------------------------------|---------|
|             | 2016-08-31<br>13:30:00 | SR 0501 ESR08301600000000856 | 1       |

| <b>VENDOR</b>  |
|--|
| 000000171218<br>FRIENDS INTERPRETING SERVICES LLC<br>ALICE ANN FRIENDS |

**Solicitation Number:** CRFQ 0501 DHH1700000001

**Total Bid :** \$192,105.96      **Response Date:** 2016-08-30      **Response Time:** 10:39:25

**Comments:**

**FOR INFORMATION CONTACT THE BUYER**  
 Mark A Atkins  
 (304) 558-2307  
 mark.a.atkins@wv.gov

|                          |               |             |
|--------------------------|---------------|-------------|
| <b>Signature on File</b> | <b>FEIN #</b> | <b>DATE</b> |
|--------------------------|---------------|-------------|

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

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|--|----------|------------|--------------|-----------------------------|
| 1    | AMER. SIGN LANGUAGE INTERP.<br>REGION 1 - NORMAL HOURS | 50.00000 | HOUR       | \$198.760000 | \$9,938.00                  |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

|                               |  |
|-------------------------------|--|
| <b>Extended Description :</b> | 4.1. American Sign Language Interpreting Service Region 1 - normal hours (8:00am - 5 pm) |
|-------------------------------|--|

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|---|----------|------------|--------------|-----------------------------|
| 2    | AMER. SIGN LANGUAGE INTERP.<br>REGION 1 - AFTER | 94.00000 | HOUR       | \$234.890000 | \$22,079.66                 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

|                               |   |
|-------------------------------|---|
| <b>Extended Description :</b> | American Sign Language Interpreter Service - Region 1 - after hours/weekends; no holiday time is anticipated. |
|-------------------------------|---|

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|--|----------|------------|--------------|-----------------------------|
| 3    | AMER. SIGN LANGUAGE INTERP.<br>REGION 2 - NORMAL HOURS | 50.00000 | HOUR       | \$198.760000 | \$9,938.00                  |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

|                               |  |
|-------------------------------|--|
| <b>Extended Description :</b> | 4.1 American Sign Language Interpreting Service - Region 2 Normal hours (8:00 am to 5:00 pm) |
|-------------------------------|--|

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|---|----------|------------|--------------|-----------------------------|
| 4    | AMER. SIGN LANGUAGE INTERP.<br>REGION 2 - AFTER | 94.00000 | HOUR       | \$234.890000 | \$22,079.66                 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :** American Sign Language Interpreting Service - Region 2 after hours/weekends. No holiday time is anticipated.

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|--|----------|------------|--------------|-----------------------------|
| 5    | AMERI.SIGN LANGUAGE INTERP.<br>REGION 3 - NORMAL HOURS | 50.00000 | HOUR       | \$198.760000 | \$9,938.00                  |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :** 4.1 American Sign Language Interpreting Services - Region 3 Normal hours (8:00 am to 5:00 pm)

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|---|----------|------------|--------------|-----------------------------|
| 6    | AMER. SIGN LANGUAGE INTERP.<br>REGION 3 - AFTER | 94.00000 | HOUR       | \$234.890000 | \$22,079.66                 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :** American Sign Language Interpreting Service - Region 3 - after hours/weekends. No holiday time is anticipated.

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|--|----------|------------|--------------|-----------------------------|
| 7    | AMER. SIGN LANGUAGE INTERP.<br>REGION 4 - NORMAL HOURS | 50.00000 | HOUR       | \$198.760000 | \$9,938.00                  |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

|                               |  |
|-------------------------------|--|
| <b>Extended Description :</b> | 4.1 American Sign Language Interpreting Service - Region 4 Normal hours (8:00 am to 5:00 pm) |
|-------------------------------|--|

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|---|----------|------------|--------------|-----------------------------|
| 8    | AMER. SIGN LANGUAGE INTERP.<br>REGION 4 - AFTER | 94.00000 | HOUR       | \$234.890000 | \$22,079.66                 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

|                               |  |
|-------------------------------|--|
| <b>Extended Description :</b> | American Sign Language Interpreting Service - Region 4 - After hours/weekends. No holiday time is anticipated. |
|-------------------------------|--|

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|--|----------|------------|--------------|-----------------------------|
| 9    | AMER. SIGN LANGUAGE INTERP.<br>REGION 5 - NORMAL HOURS | 50.00000 | HOUR       | \$198.760000 | \$9,938.00                  |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

|                               |   |
|-------------------------------|---|
| <b>Extended Description :</b> | 4.1 American Sign Language Interpreting Services - Region 5 Normal hours (8:00 am to 5:00 pm) |
|-------------------------------|---|

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|---|----------|------------|--------------|-----------------------------|
| 10   | AMER. SIGN LANGUAGE INTERP.<br>REGION 5 - AFTER | 94.00000 | HOUR       | \$234.890000 | \$22,079.66                 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :** American Sign Language Interpreting Service - Region 5 - After hours/weekends. No holiday time is anticipated.

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|--|----------|------------|--------------|-----------------------------|
| 11   | AMER. SIGN LANGUAGE INTERP.<br>REGION 6 - NORMAL HOURS | 50.00000 | HOUR       | \$198.760000 | \$9,938.00                  |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :** 4.1 American Sign Language Interpreting Service - Region 6 - Normal hours (8:00 am to 5:00 pm)

**Comments:** This rate includes interpreting rate, mileage, and travel.

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price   | Ln Total Or Contract Amount |
|------|---|----------|------------|--------------|-----------------------------|
| 12   | AMER. SIGN LANGUAGE INTERP.<br>REGION 6 - AFTER | 94.00000 | HOUR       | \$234.890000 | \$22,079.66                 |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :** American Sign Language Interpreting Service - Region 6 - After hours/weekends. No holiday time is anticipated.

**Comments:** This rate includes interpreting rate, mileage, and travel.

# Request for Quotation

## The West Virginia Commission for the Deaf and Hard of Hearing (WVCDHH)

CRFQ Solicitation #: CFRQ-0501 DHH1700000001

**Due Date:** August 31, 2016

|  |  |
|--|--|
|  |                         |
| <b>To</b>  | <b>From</b>  |
| Mr. Mark A. Atkins   | Alice Ann Friends  |
| Buyer  | CEO/Owner  |
| West Virginia Department of Administration, Purchasing Division                    | Friends Interpreting Services, LLC   |
| 2019 Washington Street, East Charleston, WV 25305-0130                             | P.O. Box 905, Ranson, WV 25438   |
| Office Phone: (304) 558-2307   | Phone: 304-809-0325  |
| Fax #: (304) 558-0006  | Fax #: (304) 728-3199  |
| <b>Email:</b> <a href="mailto:mark.a.atkins@wv.gov">mark.a.atkins@wv.gov</a>       | <b>Email:</b> <a href="mailto:FIS@friendsinterpretingservices.com">FIS@friendsinterpretingservices.com</a> |





# Friends Interpreting Services, LLC

PO Box 905, Ranson, WV 25438 | [www.friendsinterpretingservices.com](http://www.friendsinterpretingservices.com) | [fis@friendsinterpretingservices.com](mailto:fis@friendsinterpretingservices.com)  
1-888-FIS-9179 (phone) | 304-809-0325 (VP) | 304-728-3199 (Fax)

## Cover Letter

### State of West Virginia, Department of Administration Purchasing Division, WVCDHH

August 31<sup>st</sup>, 2016

Mr. Mark A. Atkins  
Buyer  
West Virginia Department of Administration, Purchasing Division  
2019 Washington Street, East  
Charleston, WV 25305-0130  
Office Phone: (304) 558-2538  
Fax #: (304) 558-0006  
Email: [mark.a.atkins@wv.gov](mailto:mark.a.atkins@wv.gov)

Mr. Mark A. Atkins,

**RE: CRFQ Solicitation # CFRQ-0501 DHH1700000001**

On behalf of Friends Interpreting Services (FIS), LLC, I am pleased to present to the State of West Virginia, Department of Administration soliciting bid on behalf of West Virginia Commission for the Deaf and Hard of Hearing (WVCDHH) with our response to the Open-End Contract periods for American Sign Language Interpreting Services on behalf of Request for Proposal, CRFQ Solicitation # CFRQ-0501 DHH1700000001.

This contract becomes effective upon award and extends for a period of one year. This contract may be renewed upon the mutual written consent of FIS and State of West Virginia, Department of Administration, with the approval of Purchasing division. For purposes of this solicitation, a bid is considered when confirmation of delivery is provided by WVOASIS, in case you are submitting it electronically.

FIS is a privately-held company incorporated in the state of West Virginia. We are currently registered to do business in the following locations: West Virginia, Ohio, Pennsylvania, Virginia, Maryland and Washington DC. I will serve as the primary contact for all CRFQ-

related transmission, including request for clarification or other communication required between the State of West Virginia, Department of Administration, Purchasing Division and FIS.

FIS makes the following guarantees regarding this proposal, which will comply with all contract terms and conditions as stated in this CRFQ. FIS will perform all contract responsibilities in the same high quality and successful manner to which our clients have been accustomed.

Thank you for your time and consideration, and please do not hesitate to contact me at (304) 809-0325 or email me at [fis@friendsinterpretingservices.com](mailto:fis@friendsinterpretingservices.com) if you have any queries. I am looking forward to work with you in the near future and will await your favourable response to this Request for Quotation.

Sincerely,



Alice Ann Friends  
CEO/Owner  
Friends Interpreting Services, LLC  
P.O. Box 905  
Ranson, WV 25438  
Video Phone: 304-809-0325  
[FIS@friendsinterpretingservices.com](mailto:fis@friendsinterpretingservices.com)  
DUNS #: 96-892-5409  
CAGE Code: 6JPP0

## Table of Contents

|  |    |
|--|----|
| 1. About West Virginia Commission for the Deaf and Hard of Hearing and Friends Interpreting Services ..... | 5  |
| 2. Statement of Capability .....   | 6  |
| 3. Open Rating- Past Performance Evaluation.....   | 7  |
| 4. Introduction and Executive Summary.....   | 9  |
| 5. Purpose .....   | 9  |
| 6. Company Profile.....  | 10 |
| 7. Proposal Submission Address .....   | 10 |
| 7.1. Questions and Clarifications .....  | 11 |
| 8. Business Overview & Background.....   | 11 |
| 9. Past Performance Information .....  | 12 |
| 10. Performance Work Statement .....   | 13 |
| 11. Proposer Qualification .....   | 14 |
| 12. Technical Response to Statement of Work.....   | 14 |
| 13. Request an Interpreter .....   | 16 |
| 14. Service Billing .....  | 17 |
| 14.1. Payments and Late Fees.....  | 17 |
| 14.2. Quality control.....   | 17 |
| 14.3. Confidential Statement .....   | 17 |
| 14.4. WVRI Registration .....  | 18 |
| 15. Appendix .....   | 19 |
| A. Exhibit A .....   | 19 |
| B. Quotation for Service-1.....  | 21 |
| Quotation for Service-2 .....  | 27 |
| C. Solicitation-Vendor Question and Responses.....   | 34 |
| D. Prompt Payment Act Of 1990 (W. VA. CODE §5A-3-54) .....   | 37 |
| E. Purchasing Affidavit .....  | 38 |
| F. Vendor Preference Certificate .....   | 39 |

## **1. About West Virginia Commission for the Deaf and Hard of Hearing and Friends Interpreting Services**

The State of West Virginia, Department of Administration Equal Employment Opportunity (EEO) Purchasing Division is seeking to procure goods or services contract for their employees. Due to the increase in the demand for and the lack of resources necessary for effective, timely interpreting services for the deaf and hard of hearing employees to hearing employees, State of West Virginia, Department of Administration has determined that contractor-provided support services for this requirement is in the best interest of the Government.

This contract may be renewed upon the mutual written consent of FIS and State of West Virginia, Department of Administration, with the approval of Purchasing division.

And for this purpose Friends Interpreting Services (FIS) LLC has stepped up as it is a well-established sign language interpreting agency based in West Virginia with vast experience under their belt and most importantly they are under budget and completely forecast the whole scenario. They are also committed to provide personal and high quality level of interpreting services for Deaf and Hard of Hearing people for the State of West Virginia, Department of Administration. The owner of FIS, Mrs. Alice Ann "Alli" Friends is also a Deaf individual and because of this she had plentiful experience working with many interpreters/ Services across a wide spectrum of settings and environments in professional and personal capacities. She desires to see that qualified and competent interpreters/ Services are provided to WVCDHH on behalf of State of West Virginia, Department of Administration-Purchasing Division.

## 2. Statement of Capability



**Friends Interpreting Services  
LLC**

P.O. Box 905  
Ranson, West Virginia 25438

FIS@friendsinterpretingservices.com

VP: 304-809-0325  
Voice: 1-888-347-9179  
Fax: 304-728-3199

www.friendsinterpretingservices.com



**Our Certified  
Interpreters  
Provide the  
Highest Quality  
in Interpreting  
Services!**



## CAPABILITY STATEMENT

### Statement of Capabilities

Friends Interpreting Services, LLC provides superior and barrier-free communication solutions for our hearing, Hard of Hearing, and Deaf clients.

In the process, we listen to our clients and provide effective and efficient communication solutions to ensure that barrier-free communication takes place.

### Professional Qualifications

- Member of Registry of Interpreting for the Deaf (RID).
- Years of experience working with various federal & state agencies
- High ratings on Open Ratings.
- Registered with System for Award Management (SAM)

### Past Performance Contract

- Department of Justice
- Department of Education
- Center for Threat Preparedness
- West Virginia Supreme Courts
- Internal Revenue Service
- Federal Emergency Management Agency

### Certifications / NAICS

- 8(a) Certified Business
- GSA Schedule Holder, Contract # GS00F216DA
- Disadvantaged Business Enterprise (DBE)
- Small, Women Owned & Minority Owned Business (SWaM)
- Women Owned Small Business Certified (WOSB)
- Economically Disadvantaged Women Owned Small Business Certified (EDWSOB)
- All FIS interpreters have NIC & CI/CT Certifications

- EIN: 30-0694715
- DUNS: 96-892-5409
- CAGE: 6JPP0
- NAICS #541930: Transliteration/Interpretation Services

**\*ACCEPTS GOVERNMENT PURCHASE CARDS\***

Friends Interpreting Services, LLC  
Call us! 304-809-0325 1-888-347-9179 FIS@friendsinterpretingservices.com

### 3. Open Rating- Past Performance Evaluation

# Open Ratings

## Past Performance Evaluation

### 1. COMPANY OVERVIEW

**Primary Name :** Friends Interpreting Services, LLC  
**Alternate Name :** (none)  
**D-U-N-S® :** 96-892-5409  
**Address :** 182 Posting Way  
 Charles Town, WV 25414  
**Telephone Number :** +1 (304) 809-0325

#### Past Performance Evaluation

**Report Date :** 01-29-2015  
**Order Number :** 2188517

#### Company Information










**Year Started:** 2011  
**Year of Current Control:** 2011  
**Annual Sales:** \$ 63,000  
**Total Employees:** 1  
**SIC/Line of Business:** 7389/Business services, nec

### 2. SUPPLIER PERFORMANCE RATINGS

The supplier's overall performance rating is an assessment of predicted performance. Ratings are on a scale from 0 to 100, where 100 represents the highest level of customer satisfaction. The SIC-level benchmark indicates how the supplier's overall performance rating ranks in comparison against peers.

**Overall Performance Rating** 96  **Bottom**  **Top**  
 Overall, how satisfied do you feel about the performance of this company during this transaction?  
 SIC: 7389/Business services, nec

#### Detailed Performance Ratings

|  |    | 0  | 25 | 50 | 75 | 100 |
|--|----|--|----|----|----|-----|
| <b>RELIABILITY:</b>  |    |  |    |    |    |     |
| How reliably do you think this company follows through on its commitments?   | 98 |  |    |    |    |     |
| <b>COST:</b>   |    |  |    |    |    |     |
| How closely did your final total costs correspond to your expectations at the beginning of the transaction?                            | 94 |  |    |    |    |     |
| <b>ORDER ACCURACY:</b>   |    |  |    |    |    |     |
| How well do you think the product/service delivered matched your order specifications and quantity?                                    | 97 |  |    |    |    |     |
| <b>DELIVERY/TIMELINESS:</b>  |    |  |    |    |    |     |
| How satisfied do you feel about the timeliness of the product/service delivery?  | 97 |  |    |    |    |     |
| <b>QUALITY:</b>  |    |  |    |    |    |     |
| How satisfied do you feel about the quality of the product/service provided by this company?   | 97 |  |    |    |    |     |
| <b>BUSINESS RELATIONS:</b>   |    |  |    |    |    |     |
| How easy do you think this company is to do business with?   | 98 |  |    |    |    |     |
| <b>PERSONNEL:</b>  |    |  |    |    |    |     |
| How satisfied do you feel about the attitude, courtesy, and professionalism of this company's staff?                                   | 97 |  |    |    |    |     |
| <b>CUSTOMER SUPPORT:</b>   |    |  |    |    |    |     |
| How satisfied do you feel about the customer support you received from this company?   | 98 |  |    |    |    |     |
| <b>RESPONSIVENESS:</b>   |    |  |    |    |    |     |
| How responsive do you think this company was to information requests, issues, or problems that arose in the course of the transaction? | 98 |  |    |    |    |     |

# Open Ratings

## Past Performance Evaluation

Business Name : Friends Interpreting Services, LLC  
 D.U.N.S.® : 96-892-5409  
 Report Date : 01-29-2015

### 3. DISTRIBUTION OF FEEDBACK

This supplier's ratings were based in part on survey feedback from past customers. This chart provides a breakdown of the survey responses received from customers in the last 12 months. For each of the survey questions, the responses, which were provided on a 0 to 10 scale, are categorized as "positive" (9 to 10), "neutral" (5 to 8), or "negative" (0 to 4). All Customer feedback is provided confidentially; individual reference responses are not disclosed.

The percentages of responses falling into each category are shown below.



### 4. CUSTOMER REFERENCES SURVEYED

The most recent feedback obtained on this supplier came from companies in the following industries.

SIC/Line of Business:

Total number of surveys completed : 8.

Note: The supplier ratings set forth above incorporate the responses and performance opinions of the surveyed customer references and not those of Dun & Bradstreet. Some references may not have provided ratings for all performance aspects.

The report may not be reproduced in whole or part in any manner whatsoever.

#### **4. Introduction and Executive Summary**

Friends Interpreting Services, LLC is a Sign Language Interpreting Agency based in West Virginia. We are committed to provide superior and barrier-free communication solutions for our Hearing, Hard of Hearing, and Deaf clients. FIS has a full understanding of the commitment required to fulfil the services requested by the State of West Virginia, Department of Administration, soliciting bid on behalf of WVCDHH for the American Sign Language (ASL) interpreting services component of this CRFQ.

Over the years, we have provided ASL interpreting services to a number of sectors including West Virginia Supreme Courts, Internal Revenue Services, Center for Threat Preparedness, Department of Education and Federal Emergency Management Agency and we look forward to the opportunity to serve you in this regard.

We thrive ourselves of being inclusive and having a diversified team. We combine a wide-range of experiences with specialized knowledge such as exceptional observational skills, experience in other fields such as media and law as well as the ability to think quickly in situations where sign interpretation is done with spoken language. The core values of FIS team include integrity, quality provision and commitment.

In preparing this quotation, we fully reviewed the CRFQ requirements and resolved which requirements our team can handle efficiently. It is through this review that we have developed a clear understanding of the requirements and goals of the State of West Virginia, Department of Administration, Purchasing Division on behalf of WVCDHH.

#### **5. Purpose**

To bid on State of West Virginia, Department of Administration, Purchasing Division Open-End contract for American Sign Language to English and American Sign Language Interpreting Services.

The Interpreters must provide Interpretation and have knowledge of variety of Sign Language Communication modes to facilitate communication on-site. The Vendor must provide Sign Language Interpreter Service and must arrive at the State of West Virginia, Department of Administration, Purchasing Division on time for the start of the agreed upon work or event.



Following are some of the certification Friends Interpreting Services (FIS) have received in the past years;

- ❖ 8 (a) Certified Business.
- ❖ Disadvantaged Business Enterprise (DBE).
- ❖ GSA Schedule Holder, Contract #: **GS00F216DA**.
- ❖ Small, Women owned & Minority Owned Business (SWaM).
- ❖ Women Owned Small Business Certified (WOSB).
- ❖ Economically Disadvantaged Women Owned Small Business Certified (EDWSOB)
- ❖ All FIS Interpreter have NIC & CI/ CT Certification.

## 6. Company Profile

| Company Profile |                    |  |
|-----------------|--------------------|--|
| 1               | Owner Name         | Alice Ann Friends  |
| 2               | Company Name       | Friends Interpreting Services, LLC   |
| 3               | Address            | P.O. Box 905, Ranson, WV 25438   |
| 4               | Voice with Phone # | (304) 809-0325   |
| 5               | Fax #              | (304) 728-3199   |
| 6               | Email              | <a href="mailto:FIS@friendinterpretingservices.com">FIS@friendinterpretingservices.com</a>     |
| 7               | DUNS #             | 96-892-5409  |
| 8               | EFIN #             | 30-0694715   |
| 9               | CAGE Code          | 6JPP0  |
| 10              | NAICS              | 541930   |
| 11              | Certifications     | 8 (a) Certified, SWaM, DBE Certified, WOSB Certified and EDWOSB Certified, GSA Schedule Holder |
| 12              | Company Profile    | Small Women Business, Deaf   |
| 13              | Registered In      | Ohio, Pennsylvania, Virginia, West Virginia, Maryland and Washington DC.                       |

## 7. Proposal Submission Address

**Mr. Mark A. Atkins**  
 Buyer  
 West Virginia Purchasing Division  
 2019 Washington Street, East, Charleston, WV 25305-0130  
 Office Phone: (304) 558-2538  
 Email: [mark.a.atkins@wv.gov](mailto:mark.a.atkins@wv.gov)

## **7.1. Questions and Clarifications**

You may contact the following person if you have any questions or require clarification on any topics covered in this Request for Quotation:

**Alice Ann Friends**  
CEO/Owner  
Friends Interpreting Services, LLC  
P.O. Box 905  
Ranson, WV 25438  
Phone: 304-809-0325  
Email: [FIS@friendsinterpretingservices.com](mailto:FIS@friendsinterpretingservices.com)

## **8. Business Overview & Background**

In the past five years, FIS has been effective in providing exceptional customer service. FIS welcomes all feedback from their clients as well as from interpreters; the good aspect about FIS is that they have received a handsome amount of positive feedbacks from its customers. FIS always wants to provide excellent quality interpreting services.

FIS is dedicated and fully committed to participate in educational workshops and trainings as much as possible to learn any advance methodology in field of American Sign Language (ASL). By attending these educational events, FIS can keep up-to-date by obtaining any new information, changing trends; possible issues to look for concerning interpretation services, and keep up with new medical and legal terminology to further improve their commitment to the State of West Virginia, Department of Administration, Purchasing Division, soliciting bid on behalf of WVCDHH.

FIS will always work with their clients to understand which interpreting services best fits their needs in order to resolve any communication barriers if there is. FIS prides in educating those who are not totally accustomed with the Deaf community, American Sign Language (ASL), how to work with an interpreter, ADA laws and bridging the gap between the hearing and Deaf world.

FIS always endeavours to assign the best interpreter to fit client request in a timely manner. Once this communication has been established a detailed confirmation is provided to both

the client and interpreter. By responding and confirming all requests, FIS makes every effort to guarantee client's satisfaction on a high side.

## 9. Past Performance Information

FIS has been into this business from last 5 years and we have always been customer oriented and have offered services to many clients in multiple locations. Our few of the Clients and Job we performed for them are as follows;

| <b>Past Performance Information</b>           |  |                                 |  |
|---|--|---------------------------------|--|
| <b>Friends Interpreting Services' clients</b> |  |                                 |  |
| <b>Customer</b>                               | <b>WV Commission for the Deaf and Hard of Hearing</b>  | <b>Customer</b>                 | <b>National Conservation Training Center</b>   |
| <b>Length of Job</b>                          | 2 days jobs  | <b>Length of Job</b>            | 1 week assignment  |
| <b>Dollar Value</b>                           | \$5,565.28   | <b>Dollar Value</b>             | \$4,030.00   |
| <b>Contract #</b>                             | # A140245  | <b>Contract #</b>               | # F16PX01048   |
| <b>Description</b>                            | To Provide 4 ASL Interpreters to interpret for WV Commission for the Deaf and Hard of Hearing Townhall meeting and Board meeting | <b>Description</b>              | To Provide 2 ASL Interpreters to interpret for one Federal Employee for one week class                             |
| <b>Contractor's performance</b>               | Successfully and met the requirement   | <b>Contractor's performance</b> | Successfully and met the requirement   |
| <b>Customer</b>                               | <b>WV Supreme Court</b>  | <b>Customer</b>                 | <b>US Army Corps of Engineers</b>  |
| <b>Length of Job</b>                          | Throughout about 2 years   | <b>Length of Job</b>            | 3 days   |
| <b>Dollar Value</b>                           | \$10,504.29  | <b>Dollar Value</b>             | \$4,561.61   |
| <b>Contract #</b>                             | Various Contract   | <b>Contract #</b>               | W912DR-16-0003   |
| <b>Description</b>                            | To Provide ASL Interpreting Services for Court   | <b>Description</b>              | To Provide 2 ASL Interpreters to interpret for one Federal Employee for one week class                             |
| <b>Contractor's performance</b>               | Successfully and met the requirement   | <b>Contractor's performance</b> | Successfully and met the requirement   |
| <b>Customer</b>                               | <b>FEMA</b>  | <b>Customer</b>                 | <b>Max McGraw Wildlife</b>   |
| <b>Length of Job</b>                          | 1 day  | <b>Length of Job</b>            | 5 Days   |
| <b>Dollar Value</b>                           | \$1,453.93   | <b>Dollar Value</b>             | \$7,817.11   |
| <b>Contract #</b>                             | HSFE03-15-P-3107   | <b>Contract #</b>               | N/A  |
| <b>Description</b>                            | To Provide 2 ASL Interpreters to interpret for one Federal Employee for one day  | <b>Description</b>              | To Provide 2 ASL Interpreters to interpret for one employee for one week class on Federal Campus (Day and evening) |
| <b>Contractor's performance</b>               | Successfully and met the requirement   | <b>Contractor's performance</b> | Successfully and met the requirement   |

## 10. Performance Work Statement

FIS will deliver professional and well-practiced sign language, oral, tactile interpreting, transliterating services and other relevant technology to provide reasonable adjustments to the Deaf, Hard of Hearing and Blind on anticipated dates as mentioned by the State of West Virginia, Department of Administration, Purchasing Division. FIS will provide an interpreter(s) who is a professional in appearance and capable of working on-site at the State of West Virginia, Department of Administration, Purchasing Division. Thus, all interpreters provided under this contract will be able to interpret any complex subject matter including medical terminology, especially those related to technical architecture, complex technical systems, and acronyms that correspond to topic areas being interpreted.

The provided interpreter will be certified by the Registry of Interpreters for the Deaf (RID), or be able to interpret to the satisfaction of the deaf client(s).

Customer service is a priority at FIS, and requests for services are handled in a quick, effective, and clear manner to ensure the very best quality for all parties involved. FIS wants to provide only the very best quality interpreters which ensure all parties will receive equal access to communication. FIS participates in customer service training and thus incorporates customer-centered models in its service provision. FIS has lots of experience in scheduling and coordinating interpreters. FIS utilizes professional tools and experiences to assure the following:

1. Successfully processing, receiving and responding to all requests;
2. Confirming interpreters for all assignments;
3. Delivery of timely and accurate invoices, submitted via email to the client;
4. Providing world-class customer services for any questions or concerns.

FIS will ensure that each interpreter is certified and qualified to meet your expectations. FIS strives for you to have the most positive results using our interpreting services. FIS interpreters are Nationally Certified through the Registry of Interpreters of the Deaf.

## **11. Proposer Qualification**

1. FIS provides qualified American Sign Language Interpreting Services.
2. FIS is Subject Matter Expert (SME) in the following:
  - ❖ Deaf Culture,
  - ❖ Deafness (the owner understands how important high qualified interpreters are to facilitate clear communication), and American Sign Language.
3. FIS is a member of and in a good standing with Registry of Interpreters for the Deaf (RID).
4. FIS interpreters are able to skillfully detect nuances and varied tones of manual/verbal communication in order to accurately facilitate messages.
5. FIS has 5 years of experience in providing interpreting services for various government, private, educational, and non-profit organizations.

## **12. Technical Response to Statement of Work**

Friends Interpreting Services (FIS) understands the scope of work given from the State of West Virginia, Department of Administration, Purchasing Division that they require a vendor to provide professional and certified sign language interpreting services.

The following section affirms FIS understanding of the agreement to the requirements which are set forth in the Performance Work Statement in order to provide sign language interpreting services to State of West Virginia, Department of Administration, Purchasing Division. FIS will provide professional interpreter for the following modalities including:

1. American Sign Language
2. Signed Exact English
3. Contact Signed Language
4. Oral Transliteration
5. Tactile/Deaf-Blind Interpreting

**Professionalism and Confidentiality:** All FIS interpreters must adhere to the NAD-RID Code of Professional Conduct. To view this code, please click this link: <http://rid.org/ethics/code-of-professional-conduct/>.

Certified Interpreters from FIS are acceptable by the Registry of Interpreting for the Deaf. Following table shows more clarity in what FIS will perform in regards to the specification of Work provided by State of West Virginia, Department of Administration, Purchasing Division for the deaf and hard of hearing (D/HH) employees in a variety of work-related settings.

| <b>S.No</b> | <b>Specification of Work-<br/>State of West Virginia,<br/>Department of<br/>Administration,<br/>Purchasing Division</b> | <b>Work Performed by Friend Interpreting Services, LLC</b>  |
|-------------|---|---|
| 1           | <b>Statement of Confidentiality</b>   | FIS understands all the general terms and conditions related to the confidentiality of the State of West Virginia, Department of Administration, Purchasing Division. We as a vendor totally agree that we will not disclose or knowingly use any confidential or proprietary information of this Federal Agency.   |
| 2           | <b>Terms of Agreement</b>   | FIS will make sure that bids on this project is not higher than prices currently extended to any other governmental agency for the same product or service. Also, FIS understands all the terms of agreement related to this CRFQ. We are always customers oriented in every form of our work.  |
| 3           | <b>Question and Enquiries</b>   | FIS being professionals in this field, we have always followed a certain path as written in Questions and Enquiries part. We completely adhere all the requirements related to the Enquiries, if in case there is a need to ask question(s).  |
| 4           | <b>Requirements/ Tasks</b>  | FIS fully understands the requirements from State of West Virginia, Department of Administration, Purchasing Division. We, as a team will provide Interpreting services for Scheduled trainings and other appointment as required.  |
| 5           | <b>Privacy, Security and Confidentiality</b>  | FIS has a very good look at the proposal from State of West Virginia, Department of Administration, Purchasing Division and knows that their performance will be under scrutiny (Inspection) for Quality Assurance, Privacy and confidentiality. The Buyer/Requesting Department who will be responsible for ensuring FIS compliance with the requirements of this contract to include managing the daily activities of the contract, providing guidance to the contract, and coordination. The FIS knows that they shall be accountable to the end users on all matters relating to the scope of work. |

|    |  |  |
|----|--|--|
| 6  | <b>Contract Type &amp; Payment Terms</b>   | FIS has understood the type of contract that it will be an Open-End contract and they also completely adheres to the payment terms related to the contract.  |
| 7  | <b>Submission Deadline</b>   | FIS is always customers focused. They have read the CRFQ from WVCDHH and as always will follow the instructions given by the Purchasing Office.  |
| 8  | <b>Initiatives for Local Agency/ Service Company</b>   | FIS is licensed and is present in Ohio, Pennsylvania, Virginia, West Virginia, Maryland and Washington DC.   |
| 9  | <b>Terms &amp; Condition</b>   | FIS being professional in this field, always read the terms and conditions before submitting any CRFQ. We have understood the terms and conditions clause.   |
| 10 | <b>Guarantees and Warrantees</b>   | FIS has fully understood the Guarantees and Warrantees section and would adhere to it completely.  |
| 11 | <b>Seeking Providers for Professional Sign Language Interpreting Services &amp; Qualification of a Professionals</b> | FIS is a Subject Matter Expert (SME) in the following:<br>a. Deaf-Culture<br>b. Deafness (the owner understands how important high qualified interpreters are to facilitate clear communication), and<br>c. American Sign Language/ Interpreting Agency background<br>Being professional, FIS is a registered and certified from National Association of the Deaf (NAD), Registry of Interpreter for the Deaf, so they will always depute a highly qualified personnel for this job at State of West Virginia, Department of Administration. |
| 12 | <b>Security Requirement</b>  | As State of West Virginia, Department of Administration, all the information here is covered by privacy Act. FIS employee visiting any Government facility in conjunction with this award of WVCDHH shall be subject to the Standards of Conduct applicable to Government employees.   |

### **13. Request an Interpreter**

In order to request for an interpreter, please fill out online through the link given below. You will get a copy of each request for American Sign Language.

<https://friendsinterpretingservices.com/request-interpreter/>.

This is the way, FIS can guarantee excellent service. FIS will provide training to all the employees to make sure that all request sent by clients are process properly. Each customer will be notified upon completion of the process by FIS.

## **14. Service Billing**

FIS will authenticate the actual hours of interpreter service and invoice it to the State of West Virginia, Department of Administration, Purchasing Division on behalf of WVCDHH when each assignment is completed. Importantly, FIS shall submit an invoice detailing the product or services provided and the actual costs incurred. Payment shall be in accordance with line item price on the purchase order and made within Net 30 days upon receipt of invoice.

### **14.1. Payments and Late Fees**

FIS requires payment within 30 days after each invoice is sent out. A 1.5% finance charge per month will be applied to past-due invoices. Pricing can be seen in Exhibit A.

### **14.2. Quality control**

FIS is committed to quality assurance that reflects the performance requirement stated in this CRFQ. Our standards include:

- ❖ Timeliness, preciseness and completeness in our service provision that includes interpreting, reporting and performance.
- ❖ FIS will ensure that it continues to meet all standard set forth by the State of West Virginia, Department of Administration, Purchasing Division on behalf of WVCDHH.
- ❖ Even though we provide quality services, we are committed to identifying flaws and improvement opportunities within our operations in order to meet our client's requirements.
- ❖ Provide our clients with a corrective action plan within eight business days of discovery of a problem.
- ❖ Agree upon the timeline for corrective measure.
- ❖ Meet all the corrective action measures within the agreed timeline.

### **14.3. Confidential Statement**

If you have any query please email on the email address given below;

[FIS@friendsinterpretingservices.com](mailto:FIS@friendsinterpretingservices.com).



#### **14.4. WVRI Registration**

FIS chosen assigned interpreters are in process or already registered with West Virginia Commission for the Deaf and Hard of Hearing (WVCDHH) and ready to interpret for the period of 12+ months.

# 15. Appendix

## A. Exhibit A

EXHIBIT\_A  
Pricing Page

CRFQ 0501 DHH170000001  
American Sign Language - English Interpreter

| Item # | Estimated Annual Quantity | Description  | Unit Cost          | Extended Cost | Total Cost per Region |
|--------|---------------------------|--|--------------------|---------------|-----------------------|
| 1.     | 4.1 50 hours              | Region 1 - American Sign Language Interpreter Service Hourly Rate<br>Estimated normal hours (8:00am - 5pm) | \$ 198.76 (x 50 w) | \$ 9,938.00   |                       |
| 2.     | 94 hours                  | Region 1 - Estimated after hours/weekends; no holiday time is anticipated                                  | \$ 234.89 (x 94 w) | \$ 21,140.10  | Region 1 \$ 31,078.10 |
| 3.     | 4.1 50 hours              | Region 2 - American Sign Language Interpreter Service Hourly Rate<br>Estimated normal hours (8:00am - 5pm) | \$ 198.76 (x 50 w) | \$ 9,938.00   |                       |
| 4.     | 94 hours                  | Region 2 - Estimated after hours/weekends; no holiday time is anticipated                                  | \$ 234.89 (x 94 w) | \$ 21,140.10  | Region 2 \$ 31,078.10 |
| 5.     | 4.1 50 hours              | Region 3 - American Sign Language Interpreter Service Hourly Rate<br>Estimated normal hours (8:00am - 5pm) | \$ 198.76 (x 50 w) | \$ 9,938.00   |                       |
| 6.     | 94 hours                  | Region 3 - Estimated after hours/weekends; no holiday time is anticipated                                  | \$ 234.89 (x 94 w) | \$ 21,140.10  | Region 3 \$ 31,078.10 |
| 7.     | 4.1 50 hours              | Region 4 - American Sign Language Interpreter Service Hourly Rate<br>Estimated normal hours (8:00am - 5pm) | \$ 198.76 (x 50 w) | \$ 9,938.00   |                       |
| 8.     | 94 hours                  | Region 4 - Estimated after hours/weekends; no holiday time is anticipated                                  | \$ 234.89 (x 94 w) | \$ 21,140.10  | Region 4 \$ 31,078.10 |
| 9.     | 4.1 50 hours              | Region 5 - American Sign Language Interpreter Service Hourly Rate<br>Estimated normal hours (8:00am - 5pm) | \$ 198.76 (x 50 w) | \$ 9,938.00   |                       |
| 10.    | 94 hours                  | Region 5 - Estimated after hours/weekends; no holiday time is anticipated                                  | \$ 234.89 (x 94 w) | \$ 21,140.10  | Region 5 \$ 31,078.10 |
| 11.    | 4.1 50 hours              | Region 6 - American Sign Language Interpreter Service Hourly Rate<br>Estimated normal hours (8:00am - 5pm) | \$ 198.76 (x 50 w) | \$ 9,938.00   |                       |
| 12.    | 94 hours                  | Region 6 - Estimated after hours/weekends; no holiday time is anticipated                                  | \$ 234.89 (x 94 w) | \$ 21,140.10  | Region 6 \$ 31,078.10 |

\*The estimated number of hours listed on the cost sheet are for bidding purposes only. The vendor will be required to provide actual quantities needed, be it more or less.

Evaluation and Award Criteria: This is a progressive award contract and the award will be made to the Vendors with the lowest Grand Total per region to the highest Grand Total (respectively) meeting the required mandatory specifications. Example: Lowest will be Vendor "A", second lowest will be Vendor "B" and so on.

Use of this contract will work the same. Agency must contact the lowest bid first and if they cannot provide the agency needs for the particular venue scheduled, Agency will then contact the next lowest bidder and so on, until the needs of the agency have been met. Multiple interpreters may be utilized progressively per venue as required by the WVCDH-1.

|  |   |
|--|---|
| Vendor Name: <u>Friends Interpreting Service, LLC</u><br>Please Print      | Vendor Order Address: <u>P.O. Box 905</u><br><u>Rainier, WV 26438</u> |
| Vendor "Remit to" Address: <u>P.O. Box 905</u><br><u>Rainier, WV 26438</u> |   |
| Vendor Phone #: <u>304.809.0335</u>  | Vendor Fax #: <u>304.726.5159</u>                                     |
| Vendor E-mail Address: <u>sa@friendsinterpreting.com</u>                   |   |
| Vendor Signature: <u><i>Abhineet</i></u>                                   | Date: <u>8/23/16</u>  |

**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.

*Alice Ann Friends, CEO/owner*

(Name, Title)

Alice Ann Friends, CEO/Owner

(Printed Name and Title)

P.O. Box 905, Ranson, WV 25438

(Address)

P: 304-809-0325 F: 304-728-3199

(Phone Number) / (Fax Number)

fis@friendsinterpretingservices.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.

Friends Interpreting Services, LLC

(Company)

*Alice Ann Friends*

CEO/Owner

(Authorized Signature) (Representative Name, Title)

Alice Ann Friends, CEO/Owner

(Printed Name and Title of Authorized Representative)


8/23/16

(Date)

P: 304-809-0325 F: 304-728-3199

(Phone Number) (Fax Number)

**B. Quotation for Service-1**

|   |  |  |
|---|--|--|
|  | Purchasing Division<br>2019 Washington Street East<br>Post Office Box 50130<br>Charleston, WV 25305-0130 | State of West Virginia<br>Request for Quotation<br>34 - Service - Prof |
|   |  |  |

| Proc Folder: 232220  |                        |                         |         |
|--|------------------------|-------------------------|---------|
| Doc Description: American Sign Language English Interpreter Services |                        |                         |         |
| Proc Type: Central Master Agreement                                  |                        |                         |         |
| Date Issued  | Solicitation Closes    | Solicitation No         | Version |
| 2016-07-29   | 2016-08-31<br>13:30:00 | CRFQ 0501 DHH1700000001 | 1       |

| BID RECEIVING LOCATION  |  |  |  |
|---|--|--|--|
| BID CLERK<br>DEPARTMENT OF ADMINISTRATION<br>PURCHASING DIVISION<br>2019 WASHINGTON ST E<br>CHARLESTON WV 25305<br>US |  |  |  |

| VENDOR   |
|--|
| Vendor Name, Address and Telephone Number:<br><i>Friends In Interactip Services, LLC</i><br><i>P.O. Box 905</i><br><i>Ranson, WV 25438</i> |

| FOR INFORMATION CONTACT THE BUYER                       |
|---|
| Mark A Atkins<br>(304) 558-2307<br>mark.a.atkins@wv.gov |

|                                     |                          |                     |
|-------------------------------------|--------------------------|---------------------|
| Signature X <i>Alice Ann Atkins</i> | FEIN # <i>30-0694715</i> | DATE <i>8/19/16</i> |
|-------------------------------------|--------------------------|---------------------|

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

**ADDITIONAL INFORMATION:**

ADDENDUM\_1 is issued to publish the vendor questions with responses.

No Other Changes

The West Virginia Purchasing Division is soliciting bids on behalf of The West Virginia Commission for the Deaf and Hard of Hearing (WVCDHH) to establish an open end contract for multiple American Sign Language-English interpreters, per attached documents.

NOTE: This request is covered in part or in whole by Federal Funds. All bidders will be required to acknowledge and adhere to Attachment\_1 Provisions Required for Federally funded Procurements.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 1    | AMER. SIGN LANGUAGE INTERP.<br>REGION 1 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| B2112067  |              |               |         |

**Extended Description :**

4.1. American Sign Language Interpreting Service Region 1 - normal hours (8:00am - 5 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 2    | AMER. SIGN LANGUAGE INTERP.<br>REGION 1 - AFTER | 94.00000 | HOUR       | \$ 3449    |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| B2112067  |              |               |         |

**Extended Description :**

American Sign Language Interpreter Service - Region 1 - after hours/weekends; no holiday time is anticipated.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 3    | AMER. SIGN LANGUAGE INTERP.<br>REGION 2 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

4.1 American Sign Language Interpreting Service - Region 2. Normal hours (8:00 am to 5:00 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 4    | AMER. SIGN LANGUAGE INTERP.<br>REGION 2 - AFTER | 94.00000 | HOUR       | \$ 234.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

American Sign Language Interpreting Service - Region 2 after hours/weekends. No holiday time is anticipated.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 5    | AMER. SIGN LANGUAGE INTERP.<br>REGION 3 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

4.1 American Sign Language Interpreting Services - Region 3 Normal hours (8:00 am to 5:00 pm)

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 6    | AMER. SIGN LANGUAGE INTERP.<br>REGION 3 - AFTER | 94.00000 | HOUR       | \$ 231.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

American Sign Language Interpreting Service - Region 3 - after hours/weekends. No holiday time is anticipated.

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 7    | AMER. SIGN LANGUAGE INTERP.<br>REGION 4 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

4.1 American Sign Language Interpreting Service - Region 4 Normal hours (8:00 am to 5:00 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 8    | AMER. SIGN LANGUAGE INTERP.<br>REGION 4 - AFTER | 94.00000 | HOUR       | \$ 234.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

American Sign Language Interpreting Service - Region 4 - After hours/weekends. No holiday time is anticipated.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 9    | AMER. SIGN LANGUAGE INTERP.<br>REGION 5 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

4.1 American Sign Language Interpreting Services - Region 5 Normal hours (8:00 am to 5:00 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 10   | AMER. SIGN LANGUAGE INTERP.<br>REGION 5 - AFTER | 94.00000 | HOUR       | \$ 234.89  |             |



| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :**

American Sign Language Interpreting Service - Region 5 - After hours/weekends. No holiday time is anticipated.

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc  | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 11   | AMER. SIGN LANGUAGE INTERP. REGION 5 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :**

4.1 American Sign Language Interpreting Service - Region 6 - Normal hours (8:00 am to 5:00 pm)

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc                                 | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 12   | AMER. SIGN LANGUAGE INTERP. REGION 6 - AFTER | 94.00000 | HOUR       | \$ 244.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :**

American Sign Language Interpreting Service - Region 6 - After hours/weekends. No holiday time is anticipated.

**SCHEDULE OF EVENTS**

| Line | Event                                  | Event Date |
|------|--|------------|
| 1    | Technical Questions due by 4:00 pm EST | 2016-08-15 |

Quotation for Service-2



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: 232220

Doc Description: American Sign Language English Interpreter Services

Proc Type: Central Master Agreement

| Date Issued | Solicitation Closes    | Solicitation No         | Version |
|-------------|------------------------|-------------------------|---------|
| 2016-07-29  | 2016-08-31<br>13:30:00 | CRFQ 0501 DHH1700000001 | 1       |

**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:

*Friends In Partnership Services, LLC  
P.O. Box 905  
Ranson, WV 25438*

**FOR INFORMATION CONTACT THE BUYER**

Mark A Atkins  
(304) 558-2307  
mark.a.atkins@wv.gov

Signature X

*Alice Ann Friends*

FEIN #

*30-0694715*

DATE

*8/19/16*

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

**ADDITIONAL INFORMATION:**

The West Virginia Purchasing Division is soliciting bids on behalf of The West Virginia Commission for the Deaf and Hard of Hearing (WVCDHH) to establish an open end contract for multiple American Sign Language-English interpreters, per attached documents.

NOTE: This request is covered in part or in whole by Federal Funds. All bidders will be required to acknowledge and adhere to Attachment\_1 Provisions Required for Federally funded Procurements.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 1    | AMER. SIGN LANGUAGE INTERP.<br>REGION 1 - NORMAL HOURS | 50.00000 | HOUR       | \$198.76   |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

## Extended Description :

4.1. American Sign Language Interpreting Service Region 1 - normal hours (8:00am - 5 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 2    | AMER. SIGN LANGUAGE INTERP.<br>REGION 1 - AFTER | 94.00000 | HOUR       | \$234.89   |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

## Extended Description :

American Sign Language Interpreter Service - Region 1 - after hours/weekends; no holiday time is anticipated.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 3    | AMER. SIGN LANGUAGE INTERP.<br>REGION 2 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

4.1 American Sign Language Interpreting Service - Region 2 Normal hours (8:00 am to 5:00 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 4    | AMER. SIGN LANGUAGE INTERP.<br>REGION 2 - AFTER | 94.00000 | HOUR       | \$ 234.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

American Sign Language Interpreting Service - Region 2 after hours/weekends. No holiday time is anticipated.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST, STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 5    | AMER. SIGN LANGUAGE INTERP.<br>REGION 3 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

4.1 American Sign Language Interpreting Services - Region 3 Normal hours (8:00 am to 5:00 pm)

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 6    | AMER. SIGN LANGUAGE INTERP.<br>REGION 3 - AFTER | 94.00000 | HOUR       | \$ 234.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

American Sign Language Interpreting Service - Region 3 - after hours/weekends. No holiday time is anticipated.

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 7    | AMER. SIGN LANGUAGE INTERP.<br>REGION 4 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :

4.1 American Sign Language Interpreting Service - Region 4 Normal hours (8:00 am to 5:00 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST. STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST. STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 8    | AMER. SIGN LANGUAGE INTERP.<br>REGION 4 - AFTER | 94.00000 | HOUR       | \$ 234.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :  
American Sign Language Interpreting Service - Region 4 - After hours/weekends. No holiday time is anticipated.

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST. STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST. STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 9    | AMER. SIGN LANGUAGE INTERP.<br>REGION 5 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

Extended Description :  
4.1 American Sign Language Interpreting Services - Region 5 Normal hours (8:00 am to 5:00 pm)

| INVOICE TO  |  | SHIP TO  |  |
|---|--|--|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST. STE 800<br>CHARLESTON WV25305<br>US |  | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>WV COMMISSION FOR THE DEAF AND HARD OF HEARING<br>405 CAPITOL ST. STE 800<br>CHARLESTON WV 25301<br>US |  |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 10   | AMER. SIGN LANGUAGE INTERP.<br>REGION 5 - AFTER | 94.00000 | HOUR       | \$ 234.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :**

American Sign Language Interpreting Service - Region 5 - After hours/weekends. No holiday time is anticipated.

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc   | Qty      | Unit Issue | Unit Price | Total Price |
|------|--|----------|------------|------------|-------------|
| 11   | AMER. SIGN LANGUAGE INTERP.<br>REGION 5 - NORMAL HOURS | 50.00000 | HOUR       | \$ 198.76  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :**

4.1 American Sign Language Interpreting Service - Region 6 - Normal hours (8:00 am to 5:00 pm)

| INVOICE TO                                     |         | SHIP TO  |          |
|--|---------|--|----------|
| BUYER - 304-957-0209                           |         | BUYER - 304-957-0209                           |          |
| HEALTH AND HUMAN RESOURCES                     |         | HEALTH AND HUMAN RESOURCES                     |          |
| WV COMMISSION FOR THE DEAF AND HARD OF HEARING |         | WV COMMISSION FOR THE DEAF AND HARD OF HEARING |          |
| 405 CAPITOL ST, STE 800                        |         | 405 CAPITOL ST, STE 800                        |          |
| CHARLESTON                                     | WV25305 | CHARLESTON                                     | WV 25301 |
| US   |         | US   |          |

| Line | Comm Ln Desc                                    | Qty      | Unit Issue | Unit Price | Total Price |
|------|---|----------|------------|------------|-------------|
| 12   | AMER. SIGN LANGUAGE INTERP.<br>REGION 6 - AFTER | 94.00000 | HOUR       | \$ 291.89  |             |

| Comm Code | Manufacturer | Specification | Model # |
|-----------|--------------|---------------|---------|
| 82112067  |              |               |         |

**Extended Description :**

American Sign Language Interpreting Service - Region 6 - After hours/weekends. No holiday time is anticipated.

**SCHEDULE OF EVENTS**

| Line | Event                                  | Event Date |
|------|--|------------|
| 1    | Technical Questions due by 4:00 pm EST | 2016-08-15 |

|               |                                |   |                       |
|---------------|--------------------------------|---|-----------------------|
| DHH1700000001 | <b>Document Phase</b><br>Final | <b>Document Description</b><br>American Sign Language English Interpreter<br>Services | <b>Page 7</b><br>of 7 |
|---------------|--------------------------------|---|-----------------------|



### C. Solicitation-Vendor Question and Responses

**SOLICITATION NUMBER:** CRFQ DHH1700000001

**Addendum Number:** 1

---

The purpose of this addendum is to modify the solicitation identified as ("Solicitation") to reflect the change(s) identified and described below.

**Applicable Addendum Category:**

- | Modify bid opening date and time
- | Modify specifications of product or service being sought
- | Attachment of vendor questions and responses
- | Attachment of pre-bid sign-in sheet
- | Correction of error
- | Other

**Description of Modification to Solicitation:**

1. Vendor Questions and Responses attached.

No other changes made.

**Additional Documentation:** Documentation related to this Addendum (if any) has been included herewith as Attachment A and is specifically incorporated herein by reference.

**Terms and Conditions:**

1. All provisions of the Solicitation and other addenda not modified herein shall remain in full force and effect.
2. Vendor should acknowledge receipt of all addenda issued for this Solicitation by completing an Addendum Acknowledgment, a copy of which is included herewith. Failure to acknowledge addenda may result in bid disqualification. The addendum acknowledgement should be submitted with the bid to expedite document processing.

**ADDENDUM ACKNOWLEDGEMENT FORM**  
**SOLICITATION NO.: DHH1700000001**

**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.

Friends Interpreting Services, LLC  
Company

*Alice Ann Friends*

Authorized Signature

8/19/16

Date

**NOTE:** This addendum acknowledgment should be submitted with the bid to expedite document processing.  
Revised 6/8/2012

1. Whether companies from Outside USA can apply for this? (like, from India or Canada)

Answer: All individuals and companies who qualify are welcome to apply. However, all interpreters hired for assignments must meet the qualification standards set forth by the state of West Virginia. Although the Commission for the Deaf and Hard of Hearing will take outside contracts into consideration, priority will be given to the independent contractors within the state.

2. Whether we need to come over there for meetings?

Answer: Yes, this bid is for live interpreters for all assignments.

3. Can we perform the tasks (related to RFP) outside USA? (like, from India or Canada)

Answer: No. This is a bid for live interpreters for all assignments.

4. Can we submit the proposals via email?????

Answer: All potential vendors must follow standard bidding procedure. Bids are not accepted via email. Bids may be submitted through the mail or online via WVOasis.

5. When I logged in WVOasis, I see that \*CRFQ : DHH1700000001\* is not uploading properly. Could you recheck? It was fine earlier but not now. something is wrong with it.

Answer: For any questions regarding WVOasis, please use the Contact Us link on [wvoasis.gov](http://wvoasis.gov), or <http://wvoasis.gov/ContactUs.aspx>. You may also call the HelpDesk at (304)558-6708 or 1(855)666-9823.

6. And I am contacting you to find out when does this \*CRFQ : DHH1700000001\* contract start? How is it different than DHH15\*22, DHH15\*24, DHH15\*25, DHH15\*26? Are they both the same thing?

Answer: The contracts are projected to become effective in January 2017. The CRFQ number is that of the solicitation for the upcoming year. The other numbers that you provided are your contract numbers for last year for each region.

## D. Prompt Payment Act Of 1990 (W. VA. CODE §5A-3-54)

### PROMPT PAYMENT ACT OF 1990 (W. VA. CODE §5A-3-54)

**INSTITUTION'S RESPONSIBILITY:** According to the Prompt Payment Act of 1990 (West Virginia Code §5A-3-54), any properly registered and qualified vendor who supplies services or commodities to an institution is entitled to Prompt payment upon presentation to the institution of a legitimate uncontested invoice. The institution's accounts payable function shall establish institutional procedures to ensure that vendors are paid promptly.

An institution receiving a legitimate uncontested invoice shall process the invoice within ten working days from its receipt. This means that invoices shall be processed at the institution and forwarded to the State Auditor within ten days of receipt of the vendor's legitimate and uncontested invoice. An invoice shall be deemed to have been received on the date it is marked received by the institution, or three days after the date of the postmark made by the United States Postal Service as evidenced on the envelope in which the invoice was mailed, whichever is earlier. If the invoice is received prior to delivery and acceptance of the goods and services, the invoice shall be deemed to be received on the date the goods are delivered and accepted or the services fully performed and accepted.

**VENDOR'S RESPONSIBILITY:** In order to receive timely payment, vendors have an obligation and responsibility to present invoices that are timely and accurate. An original of a vendor's invoice is needed for payment. The invoice must also contain identical information as shown on the purchase order or contract, such as:

- a. Vendor's name and address;
- b. Federal Employer's Identification Number(FEIN);
- c. Purchase order number;
- d. Invoice should be mailed to the proper address at the institution;
- e. Item description and number;
- f. Quantity, unit of measure and/or unit price, and extension of each item;
- g. Invoice total;
- h. Dates of order and shipment;
- i. Back orders, if any;
- j. Cancellations, if any;
- k. Credit memo, if the credit is not part of the invoice; and
- l. Invoices for services rendered must include the dates of service and be prepared according to the payment terms in the contract or purchase order.

**INTEREST ON LATE PAYMENT:** The Prompt Payment Act of 1990 (West Virginia Code §5A-3-54) entitles a vendor to interest on legitimate and uncontested invoices that have not been paid from the 61st day after the invoice was received until the date when the check was mailed to the vendor. The Act considers an invoice uncontested when it accurately covers the goods and services received. If the invoice is received prior to delivery and acceptance of the goods and services, the invoice shall be deemed to be received on the date the goods are delivered and accepted or the services fully performed and accepted. In order to receive payment for interest if entitled, a vendor must make a request in writing to the State Auditor and provide proof that the vendor received a check for payment of the invoice after the 60 day time limit. If the vendor is entitled to interest, the State Auditor's Office will calculate the interest and pay any amounts due.

E. Purchasing Affidavit

STATE OF WEST VIRGINIA  
Purchasing Division

**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 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: Friends Interpreting Services LLC

Authorized Signature: Alice Ann Friends Date: 8/19/16

State of West Virginia

County of Jefferson, to-wit:

Taken, subscribed, and sworn to before me this 19<sup>th</sup> day of August, 2016.

My Commission expires 12 22, 2020.

AFFIX SEAL HERE

NOTARY PUBLIC

Martha A. Comer  
Purchasing Affidavit (Revised 08/01/2015)



## F. Vendor Preference Certificate

WV-10  
Approved / Revised  
12/16/15

### 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;  
 Bidder is a resident vendor partnership, association, or corporation with at least eighty percent of ownership interest of bidder held by another entity that meets the applicable four year residency requirement; **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 that employs a minimum of one hundred state residents, or a nonresident vendor which has an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia and employs a minimum of one hundred state residents, and for purposes of producing or distributing the commodities or completing the project which is the subject of the bidder's bid and continuously over the entire term of the project, on average at least seventy-five percent of the bidder's employees or the bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two immediately preceding years and the vendor's 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) rescind the contract or purchase order; 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.

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: Friends Interpreting Services, LLC Signed: Alisa Ann Friends  
 Date: 8/19/16 Title: CEO/owner

\*Check any combination of preference consideration(s) indicated above, which you are entitled to receive.

## Past Performance Evaluation

### 1. COMPANY OVERVIEW

|  |  |  |  |
|--|--|--|--|
| <b>Primary Name :</b> Friends Interpreting Services, LLC<br><b>Alternate Name :</b> (none)<br><b>D-U-N-S® :</b> 96-892-5409<br><b>Address :</b> 182 Posting Way<br>Charles Town, WV 25414<br><b>Telephone Number :</b> +1 (304) 809-0325 |  | <b>Past Performance Evaluation</b><br><b>Report Date :</b> 01-29-2015<br><b>Order Number :</b> 2188517   |  |
|  |  | <b>Company Information</b><br><b>Year Started:</b> 2011<br><b>Year of Current Control:</b> 2011<br><b>Annual Sales:</b> \$ 63,000<br><b>Total Employees:</b> 1<br><b>SIC/Line of Business:</b> 7389/Business services, nec |  |

### 2. SUPPLIER PERFORMANCE RATINGS

The supplier's overall performance rating is an assessment of predicted performance. Ratings are on a scale from 0 to 100, where 100 represents the highest level of customer satisfaction. The SIC-level benchmark indicates how the supplier's overall performance rating ranks in comparison against peers.

|   |           |  |               |                             |            |
|---|-----------|--|---------------|-----------------------------|------------|
| <b>Overall Performance Rating</b>   | <b>96</b> |  | <b>Bottom</b> | <b>SIC/Quintile</b><br>     | <b>Top</b> |
| Overall, how satisfied do you feel about the performance of this company during this transaction? |           |  | <b>SIC:</b>   | 7389/Business services, nec |            |

### Detailed Performance Ratings

|  |    | 0 | 25 | 50 | 75 | 100 |
|--|----|---|----|----|----|-----|
| <b>RELIABILITY:</b>  |    |   |    |    |    |     |
| How reliably do you think this company follows through on its commitments?   | 98 |   |    |    |    |     |
| <b>COST:</b>   |    |   |    |    |    |     |
| How closely did your final total costs correspond to your expectations at the beginning of the transaction?                            | 94 |   |    |    |    |     |
| <b>ORDER ACCURACY:</b>   |    |   |    |    |    |     |
| How well do you think the product/service delivered matched your order specifications and quantity?                                    | 97 |   |    |    |    |     |
| <b>DELIVERY/TIMELINESS:</b>  |    |   |    |    |    |     |
| How satisfied do you feel about the timeliness of the product/service delivery?  | 97 |   |    |    |    |     |
| <b>QUALITY:</b>  |    |   |    |    |    |     |
| How satisfied do you feel about the quality of the product/service provided by this company?   | 97 |   |    |    |    |     |
| <b>BUSINESS RELATIONS:</b>   |    |   |    |    |    |     |
| How easy do you think this company is to do business with?   | 98 |   |    |    |    |     |
| <b>PERSONNEL:</b>  |    |   |    |    |    |     |
| How satisfied do you feel about the attitude, courtesy, and professionalism of this company's staff?                                   | 97 |   |    |    |    |     |
| <b>CUSTOMER SUPPORT:</b>   |    |   |    |    |    |     |
| How satisfied do you feel about the customer support you received from this company?   | 98 |   |    |    |    |     |
| <b>RESPONSIVENESS:</b>   |    |   |    |    |    |     |
| How responsive do you think this company was to information requests, issues, or problems that arose in the course of the transaction? | 98 |   |    |    |    |     |

## Past Performance Evaluation

Business Name : Friends Interpreting Services, LLC  
 D-U-N-S® : 96-892-5409  
 Report Date : 01-29-2015

### 3. DISTRIBUTION OF FEEDBACK

This supplier's ratings were based in part on survey feedback from past customers. This chart provides a breakdown of the survey responses received from customers in the last 12 months. For each of the survey questions, the responses, which were provided on a 0 to 10 scale, are categorized as "positive" (9 to 10), "neutral" (5 to 8), or "negative" (0 to 4). All Customer feedback is provided confidentially; individual reference responses are not disclosed. The percentages of responses falling into each category are shown below.



### 4. CUSTOMER REFERENCES SURVEYED

The most recent feedback obtained on this supplier came from companies in the following industries.

**SIC/Line of Business:**

Total number of surveys completed : 8.

**Note: The supplier ratings set forth above incorporate the responses and performance opinions of the surveyed customer references and not those of Dun & Bradstreet. Some references may not have provided ratings for all performance aspects.**

The report may not be reproduced in whole or part in any manner whatsoever.





**Friends Interpreting Services  
LLC**

P.O. Box 905  
Ranson, West Virginia 25438

FIS@friendsinterpretingservices.com

VP: 304-809-0325  
Voice: 1-888-347-9179  
Fax: 304-728-3199

www.friendsinterpretingservices.com



**Our Certified  
Interpreters  
Provide the  
Highest Quality  
in Interpreting  
Services!**



# CAPABILITY STATEMENT

## Statement of Capabilities

Friends Interpreting Services, LLC provides superior and barrier-free communication solutions for our hearing, Hard of Hearing, and Deaf clients.

In the process, we listen to our clients and provide effective and efficient communication solutions to ensure that barrier-free communication takes place.

## Professional Qualifications

- Member of Registry of Interpreting for the Deaf (RID).
- Years of experience working with various federal & state agencies
- High ratings on Open Ratings.
- Registered with System for Award Management (SAM)

## Past Performance Contract

- Department of Justice
- Department of Education
- Center for Threat Preparedness
- West Virginia Supreme Courts
- Internal Revenue Service
- Federal Emergency Management Agency

## Certifications / NAICS

- 8(a) Certified Business
- GSA Schedule Holder, Contract # GS00F216DA
- Disadvantaged Business Enterprise (DBE)
- Small, Women Owned & Minority Owned Business (SWaM)
- Women Owned Small Business Certified (WOSB)
- Economically Disadvantaged Women Owned Small Business Certified (EDWSOB)
- All FIS interpreters have NIC & CI/CT Certifications

- EIN: 30-0694715
- DUNS: 96-892-5409
- CAGE: 6JPP0
- NAICS #541930: Transliteration/Interpretation Services

**\*ACCEPTS GOVERNMENT PURCHASE CARDS\***

**Friends Interpreting Services, LLC**

Call us! 304-809-0325 1-888-347-9179 FIS@friendsinterpretingservices.com