



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

State of West Virginia
 Request for Quotation
 09 - Construction

Proc Folder: 295702

Doc Description: Preventative and Corrective Elevator Maintenance JWH

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2017-02-09	2017-03-28 13:30:00	CRFQ 0506 JWH1700000004	1

BID REMOVING LOCATION:

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

VENDOR:

Vendor Name, Address and Telephone Number:

The Murphy Elevator Co.
 1004 4th Ave
 Huntington, WV 25701

03/28/17 11:27:04
 WV Purchasing Division

FOR INFORMATION CONTACT THE BUYER

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

Signature X

FEIN # 610288500

DATE 3/28/2017

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

ADDITIONAL INFORMATION

Request for Quotation

The West Virginia Purchasing Division is soliciting bids on behalf of The West Virginia Department of Health and Human Resources, Bureau for Health and Health Facilities, Jackie Withrow Hospital, 105 S. Eisenhower Drive, Beckley, WV, 25801; to establish an open-end contract for Elevator Maintenance for six (6) elevators located in our building.

BUYER/CLIENT		SHIP TO	
PROCUREMENT OFFICER - 304-256-6600		PROCUREMENT OFFICER - 304-256-6600	
HEALTH AND HUMAN RESOURCES		HEALTH AND HUMAN RESOURCES	
JACKIE WITHROW HOSPITAL 105 SOUTH EISENHOWER DR		JACKIE WITHROW HOSPITAL	
		105 SOUTH EISENHOWER DR	
BECKLEY	WV25801	BECKLEY	WV 25801
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Elevator maintenance services				

Comm Code	Manufacturer	Specification	Model #
72101506			

Extended Description :

Monthly Elevator Maintenance Repair for the period of 7/16/2017 through 7/15/2018 - Reference Exhibit A Pricing Page

JWH1700000004	Document Phase Final	Document Description Preventative and Corrective Elevator Maintenance JWH	Page 3 of 3
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ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions

ADDITIONAL TERMS AND CONDITIONS (Construction Contracts Only)

1. CONTRACTOR'S LICENSE: West Virginia Code § 21-11-2 requires that all persons desiring to perform contracting work in this state be licensed. The West Virginia Contractors Licensing Board is empowered to issue the contractor's license. Applications for a contractor's license may be made by contacting the West Virginia Division of Labor. West Virginia Code § 21-11-11 requires any prospective Vendor to include the contractor's license number on its bid. Failure to include a contractor's license number on the bid shall result in Vendor's bid being disqualified. Vendors should include a contractor's license number in the space provided below.

Contractor's Name: The Murphy Elevator Company

Contractor's License No.: WV- WV004010

The apparent successful Vendor must furnish a copy of its contractor's license prior to the issuance of an Award Document.

2. DRUG-FREE WORKPLACE AFFIDAVIT: W. Va. Code § 21-1D-5 provides that any solicitation for a public improvement contract requires each Vendor that submits a bid for the work to submit at the same time an affidavit that the Vendor has a written plan for a drug-free workplace policy. To comply with this law, Vendor must either complete the enclosed drug-free workplace affidavit and submit the same with its bid or complete a similar affidavit that fulfills all of the requirements of the applicable code. Failure to submit the signed and notarized drug-free workplace affidavit or a similar affidavit that fully complies with the requirements of the applicable code, with the bid shall result in disqualification of Vendor's bid. Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

2.1. DRUG-FREE WORKPLACE POLICY: Pursuant to W. Va. Code § 21-1D-4, Vendor and its subcontractors must implement and maintain a written drug-free workplace policy that complies with said article. The awarding public authority shall cancel this contract if: (1) Vendor fails to implement and maintain a written drug-free workplace policy described in the preceding paragraph, (2) Vendor fails to provide information regarding implementation of its drug-free workplace policy at the request of the public authority; or (3) Vendor provides to the public authority false information regarding the contractor's drug-free workplace policy.

Pursuant to W. Va. Code 21-1D-2(b) and (k), this provision does not apply to public improvement contracts the value of which is \$100,000 or less or temporary or emergency repairs.

3. DRUG FREE WORKPLACE REPORT: Pursuant to W. Va. Code § 21-1D-7b, no less than once per year, or upon completion of the project, every contractor shall provide a certified report to the public authority which let the contract. For contracts over \$25,000, the public authority shall be the West Virginia Purchasing Division. For contracts of \$25,000 or less, the public authority shall be the agency issuing the contract. The report shall include:

(1) Information to show that the education and training service to the requirements of West Virginia Code § 21-1D-5 was provided;

CONTRACTOR LICENSE

Authorized by the

West Virginia Contractor Licensing Board

Number:

WV004010

Classification:

SPECIALTY

THE MURPHY ELEVATOR COMPANY
DBA THE MURPHY ELEVATOR COMPANY
128 EAST MAIN STREET
LOUISVILLE, KY 40202

Date Issued

Expiration Date

AUGUST 30, 2016

AUGUST 30, 2017



Authorized Company Signature



Chair, West Virginia Contractor
Licensing Board



WEST VIRGINIA
CONTRACTOR
LICENSING
BOARD

This license, or a copy thereof, must be posted in a conspicuous place at every construction site where work is being performed. This license number must appear in all advertisements, on all bid submissions and on all fully executed and binding contracts. This license cannot be assigned or transferred by licensee. Issued under provisions of West Virginia Code, Chapter 21, Article 11.

REQUEST FOR QUOTATION
Elevator Maintenance

EXHIBIT C - PRICING PAGE

Preventive Maintenance:

Monthly Charge	x	12 months	=	Total Yearly Charge
\$ <u>2,500.00</u>	x	12	=	\$ <u>30,000.00</u>

Corrective Maintenance:

Hourly Labor Rate	x	Estimated Hours	=	Total Labor Cost
\$ <u>180.00</u>	x	100	=	\$ <u>18,000.00</u>
Estimated Parts Cost	x	Multiplier	=	Total Parts Cost
\$10,000.00	x	<u>1.20</u>	=	\$ <u>12,000.00</u>
Total Cost *				\$ <u>60,000.00</u>

* Total Cost is calculated by adding the Total Yearly Cost, Total Labor Cost, and the Total Parts Cost.



State of West Virginia
DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT
West Virginia Code §21-1D-5

STATE OF WEST VIRGINIA,

COUNTY OF _____, TO-WIT:

I, D Gregory Carlisle, after being first duly sworn, depose and state as follows:

1. I am an employee of The Murphy Elevator Company Inc; and,
(Company Name)
2. I do hereby attest that The Murphy Elevator Company Inc
(Company Name)

maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with *West Virginia Code §21-1D*.

The above statements are sworn to under the penalty of perjury.

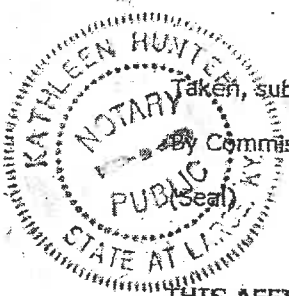
Printed Name: D Gregory Carlisle

Signature: [Handwritten Signature]

Title: President

Company Name: The Murphy Elevator Company Inc

Date: 3/28/17



Taken, subscribed and sworn to before me this 28 day of March, 2017.

My Commission expires March 26, 2019

Kathleen Hunter
(Notary Public)

THIS AFFIDAVIT MUST BE SUBMITTED WITH THE BID IN ORDER TO COMPLY WITH WV CODE PROVISIONS. FAILURE TO INCLUDE THE AFFIDAVIT WITH THE BID SHALL RESULT IN DISQUALIFICATION OF THE BID.

BID BOND

KNOW ALL MEN BY THESE PRESENTS, That we, the undersigned, The Murphy Elevator Co., Inc.
of Louisville, KY, as Principal, and Great American Insurance Company
of Cincinnati, OH, a corporation organized and existing under the laws of the State of
OH with its principal office in the City of Cincinnati, as Surety, are held and firmly bound unto the State
of West Virginia, as Obligee, in the penal sum of Five Percent of Amount Bid (\$ 5%) for the payment of which,
well and truly to be made, we jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

The Condition of the above obligation is such that whereas the Principal has submitted to the Purchasing Section of the
Department of Administration a certain bid or proposal, attached hereto and made a part hereof, to enter into a contract in writing for
Elevator Maintenance Services

NOW THEREFORE,

- (a) If said bid shall be rejected, or
- (b) If said bid shall be accepted and the Principal shall enter into a contract in accordance with the bid or proposal
attached hereto and shall furnish any other bonds and insurance required by the bid or proposal, and shall in all other respects perform
the agreement created by the acceptance of said bid, then this obligation shall be null and void, otherwise this obligation shall remain in
full force and effect. It is expressly understood and agreed that the liability of the Surety for any and all claims hereunder shall, in no
event, exceed the penal amount of this obligation as herein stated.

The Surety, for the value received, hereby stipulates and agrees that the obligations of said Surety and its bond shall be in no
way impaired or affected by any extension of the time within which the Obligee may accept such bid, and said Surety does hereby
waive notice of any such extension.

WITNESS, the following signatures and seals of Principal and Surety, executed and sealed by a proper officer of Principal and
Surety, or by Principal individually if Principal is an individual, this 28th day of March, 2017.



The Murphy Elevator Co., Inc.
(Name of Principal)

By: [Signature]
(Must be President, Vice President, or
Duly Authorized Agent)

VP Administration
(Title)



Great American Insurance Company
(Name of Surety)

By: [Signature]
Deborah L. Burton Attorney-in-Fact

IMPORTANT – Surety executing bonds must be licensed in West Virginia to transact surety insurance, must affix its seal, and must attach a power of attorney with its seal affixed.

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.

Walt Baker, Branch Manager
 (Name, Title)
 Walt Baker, Branch Manager
 (Printed Name and Title)
 1004 4th Ave, Huntington, WV 25701
 (Address)
 304-529-3220 / 304-697-0675
 (Phone Number) / (Fax Number)
 walt@murphyelevator.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.

The Murphy Elevator Company
 (Company)

Travis Carlisle
 (Authorized Signature) (Representative Name, Title)

Travis Carlisle VP Administration
 (Printed Name and Title of Authorized Representative)

3/28/2017
 (Date)

502-587-1225 / 502-400-4181
 (Phone Number) (Fax Number)



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

State of West Virginia
 Request for Quotation
 09 - Construction

Proc Folder: 295702

Doc Description: Addendum No. 1 - Preventative and Corrective Elevator Maint


Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2017-03-01	2017-03-28 13:30:00	CRFQ 0506 JWH1700000004	2

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

VENDOR:
 Vendor Name, Address and Telephone Number:
 The Murphy Elevator Company
 1004 4th Ave
 Huntington, WV 25701

FOR INFORMATION CONTACT THE BUYER
 Michelle L Childers
 (304) 558-2063
 michelle.l.childers@wv.gov

Signature X  FEIN # 610288500 DATE 3/28/2017

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

ADDITIONAL INFORMATION

Addendum

Addendum No. 1 issued to publish and distribute the attached information to the vendor community.

Request for Quotation

The West Virginia Purchasing Division is soliciting bids on behalf of The West Virginia Department of Health and Human Resources, Bureau for Health and Health Facilities, Jackie Withrow Hospital, 105 S. Eisenhower Drive, Beckley, WV. 25801; to establish an open-end contract for Elevator Maintenance for six (6) elevators located in our building.

INVOICE TO:	SHIP TO:
PROCUREMENT OFFICER - 304-256-6600 HEALTH AND HUMAN RESOURCES JACKIE WITHROW HOSPITAL 105 SOUTH EISENHOWER DR BECKLEY WV25801 US	PROCUREMENT OFFICER - 304-256-6600 HEALTH AND HUMAN RESOURCES JACKIE WITHROW HOSPITAL 105 SOUTH EISENHOWER DR BECKLEY WV 25801 US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Elevator maintenance services				

Comm Code	Manufacturer	Specification	Model #
72101506			

Extended Description :

Monthly Elevator Maintenance Repair for the period of 7/16/2017 through 7/15/2018 - Reference Exhibit A Pricing Page

SOLICITATION NUMBER: CRFQ JWH1700000004

Addendum Number: 01

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:

This addendum is issued to modify the solicitation per the attached documentation and the following:

1. To publish pre-bid sign-in sheet.

No other changes.

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.

ATTACHMENT A

SIGN IN SHEET

Page 2 of 2

Request for Proposal No.

CRFQ JWH17*4

PLEASE PRINT

Date: 2/28/2017

* PLEASE BE SURE TO PRINT LEGIBLY - IF POSSIBLE, LEAVE A BUSINESS CARD

FIRM & REPRESENTATIVE NAME	MAILING ADDRESS	TELEPHONE & FAX NUMBERS
Company: <u>EMAR Corporation</u>	<u>PO Box 1821</u>	PHONE <u>304-834-4292</u>
Rep: <u>Ken Gilchrist</u>	<u>Parkersburg WV 26102</u>	TOLL FREE <u>877-863-5101</u>
Email Address: <u>emarcorporation@frontier.com</u>		FAX <u>304-861-0416</u>
Company: <u>Oracle Elevator</u>	<u>4136 West Washington St.</u>	PHONE <u>304-744-1466</u>
Rep: <u>Gary Roberts</u>	<u>Charleston, WV 25313</u>	TOLL FREE
Email Address: <u>gary.roberts@oracleelevator.com</u>		FAX
Company: <u>MURPHY ELEVATOR</u>	<u>1004 4th Ave.</u>	PHONE <u>304-529-3220</u>
Rep: <u>WALT BAKER</u>	<u>HUNTINGTON, WV 25701</u>	TOLL FREE <u>800-321-1527</u>
Email Address: <u>walt@murphyelevator.com</u>		FAX <u>304-697-0675</u>
Company: <u>THYSSENKRUPP ELEVATOR</u>	<u>901 Morris St.</u>	PHONE <u>304-342-0187</u>
Rep: <u>Eric Hackney</u>	<u>Charleston, WV 25301</u>	TOLL FREE
Email Address: <u>eric.hackney@thyssenkrupp.com</u>		FAX <u>866-812-5542</u>
Company: <u>O-C Elevator Co</u>	<u>521 Slack St</u>	PHONE <u>304-3457232</u>
Rep: <u>Ron Ruckert</u>	<u>Charleston</u>	TOLL FREE
Email Address: <u>ron.ruckert</u>		FAX

SIGN IN SHEET

Page 1 of 2

Request for Proposal No.
CRFQ JWH17*4

PLEASE PRINT

Date: 2/28/2017

* PLEASE BE SURE TO PRINT LEGIBLY - IF POSSIBLE, LEAVE A BUSINESS CARD

FIRM & REPRESENTATIVE NAME	MAILING ADDRESS	TELEPHONE & FAX NUMBERS
Company: <u>DC Elevator</u>	<u>521 Slack St.</u>	PHONE <u>304-345-7222</u>
Rep: <u>Ronnie Bentley</u>	<u>Charleston WV.</u>	TOLL
Email Address: <u>ronnie.bentley@dcelevatorco.com</u>		FREE
Company: _____	_____	PHONE
Rep: _____	_____	TOLL
Email Address: _____	_____	FREE
Company: _____	_____	PHONE
Rep: _____	_____	TOLL
Email Address: _____	_____	FREE
Company: _____	_____	PHONE
Rep: _____	_____	TOLL
Email Address: _____	_____	FREE
Company: _____	_____	PHONE
Rep: _____	_____	TOLL
Email Address: _____	_____	FREE
Company: _____	_____	FAX

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ JWH 170000004

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.

The Murphy Elevator Company

Company


 Authorized Signature

3/28/2017

Date

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

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: CRFQ JWH 1700000004

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.

The Murphy Elevator Company Inc
Company


Authorized Signature

3/28/17
Date

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

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: The Murphy Elevator Company

Authorized Signature: _____

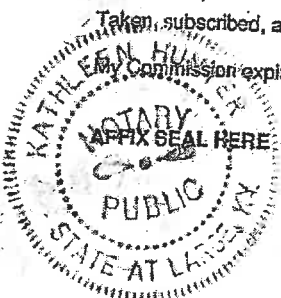
Date: 3/28/2017

State of Kentucky

County of Jefferson, to-wit:

Taken, subscribed, and sworn to before me this 28 day of March, 2017.

My Commission expires March 26, 2019.



NOTARY PUBLIC

Kathleen Hunter

GREAT AMERICAN INSURANCE COMPANY®

Administrative Office: 301 E 4TH STREET * CINCINNATI, OHIO 45202 * 513-369-5000 * FAX 513-723-2740

The number of persons authorized by this power of attorney is not more than 1

Bond No. Bid Bond

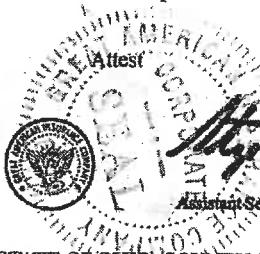
POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS: That the GREAT AMERICAN INSURANCE COMPANY, a corporation organized and existing under and by virtue of the laws of the State of Ohio, does hereby nominate, constitute and appoint the person or persons named below its true and lawful attorney-in-fact, for it and in its name, place and stead to execute on behalf of the said Company, as surety, the specific bond, undertaking or contract of suretyship referenced herein; provided that the liability of the said Company on any such bond, undertaking or contract of suretyship executed under this authority shall not exceed the limit stated below. The bond number on this Power of Attorney must match the bond number on the bond to which it is attached or it is invalid.

Name	Address	Limit of Power
Deborah L. Burton	950 Breckenridge Lane, Suite 50 Louisville, KY 40207	\$100,000,000.00

Principal: The Murphy Elevator Co., Inc.
Obligee: West Virginia Department of Health and Human Resources

IN WITNESS WHEREOF the GREAT AMERICAN INSURANCE COMPANY has caused these presents to be signed and attested by its appropriate officers and its corporate seal hereunto affixed this 28th day of March, 2017.



Attest
My L C. B.
Assistant Secretary

GREAT AMERICAN INSURANCE COMPANY

David C. Kitchin
Divisional Senior Vice President

DAVID C. KITCHIN (877-377-2405)

STATE OF OHIO, COUNTY OF HAMILTON - ss:

On this 28th day of March, 2017, before me personally appeared DAVID C. KITCHIN, to me known, being duly sworn, deposes and says that he resides in Cincinnati, Ohio, that he is a Divisional Senior Vice President of the Bond Division of Great American Insurance Company, the Company described in and which executed the above instrument; that he knows the seal of the said Company; that the seal affixed to the said instrument is such corporate seal; that it was so affixed by authority of his office under the By-Laws of said Company, and that he signed his name thereto by like authority.



Susan A. Kohorst
Notary Public, State of Ohio
My Commission Expires 05-18-2020

Susan A. Kohorst

This Power of Attorney is granted by authority of the following resolutions adopted by the Board of Directors of Great American Insurance Company by unanimous written consent dated June 9, 2008.

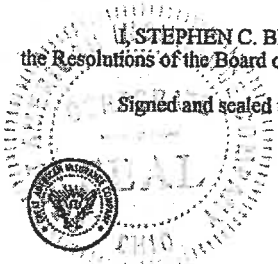
RESOLVED: That the Divisional President, the several Divisional Senior Vice Presidents, Divisional Vice Presidents and Divisional Assistant Vice Presidents, or any one of them, be and hereby is authorized, from time to time, to appoint one or more Attorneys-in-Fact to execute on behalf of the Company, as surety, any and all bonds, undertakings and contracts of suretyship, or other written obligations in the nature thereof; to prescribe their respective duties and the respective limits of their authority; and to revoke any such appointment at any time.

RESOLVED FURTHER: That the Company seal and the signature of any of the aforesaid officers and any Secretary or Assistant Secretary of the Company may be affixed by facsimile to any power of attorney or certificate of either given for the execution of any bond, undertaking, contract of suretyship, or other written obligation in the nature thereof, such signature and seal when so used being hereby adopted by the Company as the original signature of such officer and the original seal of the Company, to be valid and binding upon the Company with the same force and effect as though manually affixed.

CERTIFICATION

I, STEPHEN C. BERAHA, Assistant Secretary of Great American Insurance Company, do hereby certify that the foregoing Power of Attorney and the Resolutions of the Board of Directors of June 9, 2008 have not been revoked and are now in full force and effect.

Signed and sealed this 28th day of March, 2017.



My L C. B.
Assistant Secretary