



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](http://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](http://WVPurchasing.gov) with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header 1

List View

General Information

Contact

Default Values

Discount

Document Information

Procurement Folder: 704424

SO Doc Code: CRFQ

Procurement Type: Central Purchase Order

SO Dept: 0439

Vendor ID: 000000210569

SO Doc ID: EBA2000000023

Legal Name: ALPHA TECHNOLOGIES INC

Published Date: 3/20/20

Alias/DBA:

Close Date: 4/7/20

Total Bid: \$42,174.00

Close Time: 13:30

Response Date: 04/02/2020

Status: Closed

Response Time: 13:34

Solicitation Description: EBAr68681 SOPHOS XG SECURITY SOFTWARE AND SUPPORT

Total of Header Attachments: 1

Total of All Attachments: 1



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

**State of West Virginia  
Solicitation Response**

**Proc Folder :** 704424

**Solicitation Description :** EBAr68681 SOPHOS XG SECURITY SOFTWARE AND SUPPORT

**Proc Type :** Central Purchase Order

Date issued	Solicitation Closes	Solicitation Response	Version
	2020-04-07 13:30:00	SR 0439 ESR04022000000005640	1

VENDOR
000000210569 ALPHA TECHNOLOGIES INC

**Solicitation Number:** CRFQ 0439 EBA2000000023

**Total Bid :** \$42,174.00

**Response Date:** 2020-04-02

**Response Time:** 13:34:53

**Comments:**

**FOR INFORMATION CONTACT THE BUYER**

Dusty J Smith  
(304) 558-2063  
dusty.j.smith@wv.gov

**Signature on File**

**FEIN #**

**DATE**

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	Security and protection software maintenance				\$24,387.00

Comm Code	Manufacturer	Specification	Model #
81112208			

Extended Description : Security and protection software maintenance

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Ln Total Or Contract Amount
2	Security and protection software maintenance				\$17,787.00

Comm Code	Manufacturer	Specification	Model #
81112208			

Extended Description : Security and protection software maintenance



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

State of West Virginia  
 Request for Quotation  
 21 - Info Technology

Proc Folder: 704424

Doc Description: EBAr68681 SOPHOS XG SECURITY SOFTWARE AND SUPPORT

Proc Type: Central Purchase Order

Date Issued	Solicitation Closes	Solicitation No	Version
2020-03-20	2020-04-07 13:30:00	CRFQ 0439 EBA2000000023	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:  
 Alpha Technologies  
 4003 Outlook Dr.  
 Hurricane, WV 25526  
 304-721-8987 EXT: 1026

**FOR INFORMATION CONTACT THE BUYER**

Dusty J Smith  
 (304) 558-2063  
 dusty.j.smith@wv.gov

Signature X  FEIN # 550774279 DATE 04-02-20

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

**ADDITIONAL INFORMATION:**

**ONE TIME**

THE STATE OF WEST VIRGINIA PURCHASING DIVISION FOR THE AGENCY, WEST VIRGINIA EDUCATIONAL BROADCASTING AUTHORITY AGENCY, IS SOLICITING BIDS FOR THE ONE-TIME PURCHASE OF SOPHOS XG SECURITY APPLIANCE MAINTENANCE AND SUPPORT PER THE ATTACHED DOCUMENTS.

QUESTIONS REGARDING THE SOLICITATION MUST BE SUBMITTED IN WRITING TO DUSTY.J.SMITH@WV.GOV PRIOR TO THE QUESTION PERIOD DEADLINE CONTAINED IN THE INSTRUCTIONS TO VENDORS SUBMITTING BIDS.

\*\*\*\*PLEASE NOTE THAT PAGES (PAGES THAT NEED SIGNED AND RETURNED SUCH AS 23,24,28,29,30) OF THE SOLICITATION SHOULD BE SIGNED AND SUBMITTED WITH THE BID.\*\*\*\*

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Security and protection software maintenance <i>36-Month</i>	<i>3</i>		<i>\$8,129.00 ea /</i>	<i>\$24,387.00</i>

Comm Code	Manufacturer	Specification	Model #
81112208			

**Extended Description :**

Security and protection software maintenance

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

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	Security and protection software maintenance <i>24-Month</i>	<i>3</i>		<i>\$5,929.00 ea /</i>	<i>\$17,787.00</i>

Comm Code	Manufacturer	Specification	Model #
81112208			

**Extended Description :**

Security and protection software maintenance

**SCHEDULE OF EVENTS**

Line	Event	Event Date
1	TECHNICAL QUESTIONS DUE AT 10AM	2020-04-01

<b>EBA200000023</b>	<b>Document Phase</b> <b>Final</b>	<b>Document Description</b> EBA68681 SOPHOS XG SECURITY SOFTWARE AND SUPPORT	<b>Page 3</b> <b>of 3</b>
---------------------	---------------------------------------	--	------------------------------

**ADDITIONAL TERMS AND CONDITIONS**

See attached document(s) for additional Terms and Conditions

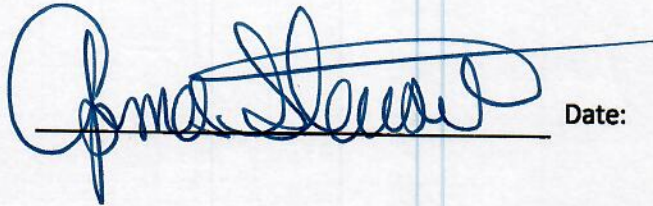
**REQUEST FOR QUOTATION**  
**Sophos XG 330 FullGuard Plus with Enhanced Support Software Maintenance and Support**

---

**Pricing Page**

Sophos XG330 FullGuard Plus with Enhanced Support	Years	Start Date	End Date	Total Number of Licenses	Price Per License	Total Cost
3 Year Maintenance & Support, Sophos SKU# XF333CSES-XG	1-3	4/27/2020	4/26/2023	3	\$8,129.00	\$24,387.00
2 Year Maintenance & Support, Sophos SKU# XF332CSES-XG	4-5	4/27/2023	4/16/2025	3	\$5,929.00	\$17,787.00
Total Contract Cost						\$42,174.00

Authorized Signature:



Date:

04-02-20



**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.

James Stewart - Account Executive  
(Name, Title)  
James Stewart - Account Executive  
(Printed Name and Title)  
4003 Outlook Dr., Hurricane, WV 25526  
(Address)  
304-721-8987 304-201-2610  
(Phone Number) / (Fax Number)  
jstewart@alpha-tech.us  
(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.

Alpha Technologies  
(Company)

James Stewart - Account Executive  
(Authorized Signature) (Representative Name, Title)

James Stewart - Account Executive  
(Printed Name and Title of Authorized Representative)

04-02-20  
(Date)

304-721-8987 304-201-2610  
(Phone Number) (Fax Number)

**ADDENDUM ACKNOWLEDGEMENT FORM  
SOLICITATION NO.:**

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

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

**Addendum Numbers Received:**

*(Check the box next to each addendum received)*

- Addendum No. 1
- Addendum No. 2
- Addendum No. 3
- Addendum No. 4
- Addendum No. 5

- Addendum No. 6
- Addendum No. 7
- Addendum No. 8
- Addendum No. 9
- 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.

Alpha Technologies  
Company

[Signature]  
Authorized Signature

04-02-20  
Date

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

**REQUEST FOR QUOTATION**  
**Sophos XG 330 FullGuard Plus with Enhanced Support Software Maintenance and Support**

---

- 8.1.4. Failure to remedy deficient performance upon request.
- 8.2. The following remedies shall be available to Agency upon default.
  - 8.2.1. Immediate cancellation of the Contract.
  - 8.2.2. Immediate cancellation of one or more release orders issued under this Contract.
  - 8.2.3. Any other remedies available in law or equity.

**9. MISCELLANEOUS:**

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

**Contract Manager:** James Stewart

**Telephone Number:** 304-721-8987

**Fax Number:** 304-201-2610

**Email Address:** jstewart@alpha-tech.us



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
04/02/2020

**THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).**

<b>PRODUCER</b> Payne and Garlow Insurance Inc. 3744 Teays Valley Road Suite 101 Hurricane WV 25526		<b>CONTACT NAME:</b> Margaret Gunnoe <b>PHONE (A/C, No, Ext):</b> (304) 757-6880 <b>E-MAIL ADDRESS:</b> Margaret@garlowinsurance.com <b>FAX (A/C, No):</b> (304) 757-6894																						
<b>INSURED</b> Alpha Technologies, Inc. P O Box 1114 Scott Depot WV 25560		<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A:</td> <td>Travelers Companies, Inc</td> <td>36161</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>		INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A:	Travelers Companies, Inc	36161	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
INSURER(S) AFFORDING COVERAGE		NAIC #																						
INSURER A:	Travelers Companies, Inc	36161																						
INSURER B:																								
INSURER C:																								
INSURER D:																								
INSURER E:																								
INSURER F:																								

**COVERAGES**      **CERTIFICATE NUMBER:** CL197104685      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			I-680-7F378967-19-42	04/15/2019	04/15/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Terrorism Coverage \$ included
A	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY			BA 6F331749	04/15/2019	04/15/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Underinsured motorist \$ 1,000,000
A	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 5,000 <input type="checkbox"/> CLAIMS-MADE			CUP-006F332710-19-42	04/15/2019	04/15/2020	COMBINED SINGLE LIMIT EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ 4,000,000
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A	UB-2J051298	06/15/2019	06/15/2020	PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

## CERTIFICATE HOLDER

WV Educational Broadcasting Authority  
124 Industrial Park Road  
Beaver WV 25813

## CANCELLATION

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

AUTHORIZED REPRESENTATIVE  
*Nancy R. Payne*

STATE OF WEST VIRGINIA  
Purchasing Division

# PURCHASING AFFIDAVIT

**CONSTRUCTION CONTRACTS:** Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

**ALL CONTRACTS:** 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: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, 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: Alpha Technologies

Authorized Signature: [Signature] Date: 04-02-20

State of West Virginia

County of Marshall, to-wit:

Taken, subscribed, and sworn to before me this 2nd day of April, 2020

My Commission expires Aug 29, 2021.



NOTARY PUBLIC [Signature]  
Purchasing Affidavit (Revised 01/19/2018)