




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 3

 List View

General Information

Contact

Default Values

Discount

Document Information

Procurement Folder: 616302

Procurement Type: Central Master Agreement

Vendor ID: VS0000005897 

Legal Name: INFOJINI INC

Alias/DBA:

Total Bid: \$105,456.00

Response Date: 09/25/2019 

Response Time: 14:42

SO Doc Code: CRFQ

SO Dept: 0618

SO Doc ID: BVH2000000006

Published Date: 9/16/19

Close Date: 10/1/19

Close Time: 13:30

Status: Closed

Solicitation Description: Temporary Registered Nurse

Total of Header Attachments: 3

Total of All Attachments: 3



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

**State of West Virginia
 Solicitation Response**

Proc Folder : 616302
Solicitation Description : Temporary Registered Nurse
Proc Type : Central Master Agreement

Date issued	Solicitation Closes	Solicitation Response	Version
	2019-10-01 13:30:00	SR 0618 ESR09251900000001958	1

VENDOR
VS0000005897 INFOJINI INC

Solicitation Number: CRFQ 0618 BVH2000000006

Total Bid : \$105,456.00 **Response Date:** 2019-09-25 **Response Time:** 14:42:37

Comments:

FOR INFORMATION CONTACT THE BUYER
 Stephanie L Gale
 (304) 558-8801
 stephanie.l.gale@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	Temporary Registered Nurse	2080.00000	HOUR	\$50.700000	\$105,456.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Extended Description :	Provide an RN for full time work See attached for specifications
-------------------------------	---

**STATE OF WEST VIRGINIA
WV VETERANS HOME**

**RESPONSE TO REQUEST FOR QUOTATION
FOR
SOLICITATION: CRFQ 0618 BVH2000000006
TEMPORARY REGISTERED NURSE**

Response

Electronic Bid Due: October 01, 2019 by 01:30 PM EDT




Submitted by: Infojini
Address: 10015, Old Columbia Road
Suite B215, Columbia, MD 21046
Contact: Sandeep Harjani
Phone: (443) 257-0086
Email: statebids@infojiniconsulting.com

Submitted To: State of WV Veteran's Home
Buyer: Stephanie L Gale
Phone: (304) 558-8801
Email: stephanie.l.gale@wv.gov

Table of Contents

1	Bid Form	3
2	Designated Contact	4
3	Pricing Page	5

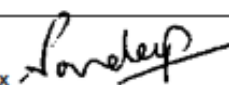
1 Bid Form

	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: 616302			
Doc Description: Temporary Registered Nurse			
Proc Type: Central Master Agreement			
Date Issued	Solicitation Closes	Solicitation No	Version
2019-09-16	2019-10-01 13:30:00	CRFQ 0618 BVH2000000006	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: Infojini, Inc. 10015, Old Columbia Road, Suite B215, Columbia, MD 21046 (443) 257-0086

FOR INFORMATION CONTACT THE BUYER		
Stephanie L Gale (304) 558-8801 stephanie.l.gale@wv.gov		
Signature X 	20-4624920 FEIN #	09/25/2019 DATE

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

Page : 1 FORM ID : WV-PRC-CRFQ-001

2 Designated Contact

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.

Sandeep Harjani, Director

(Name, Title)

Sandeep Harjani, Director

(Printed Name and Title)

10015, Old Columbia Road, Suite B215, Columbia, MD 21046

(Address)

Phone: (443) 257-0086 / Fax: 443-283-4249

(Phone Number) / (Fax Number)

statebids@infojiniconsulting.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.

Infojini, Inc.

(Company)



Sandeep Harjani, Director

(Authorized Signature) (Representative Name, Title)

Sandeep Harjani

(Printed Name and Title of Authorized Representative)

09/25/2019

(Date)

Phone: 443-257-0086 | Fax: 443-283-4249

(Phone Number) (Fax Number)

Revised 08/15/2019

3 Pricing Page

PRICING PAGE

BVH410 TEMPORARY NURSE STAFFING SERVICES				
Item #	Description	Estimated Annual Usage Hours	Rate Per Hour	Extended Price
	REGISTERED NURSE SHIFTS			
1	6:45am - 3 pm Weekdays Monday - Friday	100	\$ 50.70	\$ 5,070.00
2	2:45pm - 11 pm Weekdays Monday - Friday	500	\$ 53.30	\$ 26,650.00
3	10:45pm - 7am Weekdays Monday - Friday	500	\$ 54.60	\$ 27,300.00
4	Holiday Shifts starting the night before at 11pm*	72	\$ 68.25	\$ 4,914.00
			\$	\$
	REGISTERED NURSE SHIFTS			
			\$	\$
			\$	\$
			\$	\$
			\$	\$
			Total	\$ 63,934.00
Failure to use this form may result in disqualification				
<i>Bidder / Vendor Information:</i>				
Name:	Infojini, Inc.			
Address:	10015, Old Columbia Road, Suite B215,			
	Columbia, MD 21046			
Phone# :	(443) 257-0086			
Email Address:	statebids@infojiniconsulting.com			
<i>Contract Coordinator Information:</i>				
Name:	Sandeep Harjani, Director			
Address:	10015, Old Columbia Road, Suite B215			
	Columbia, MD 21046			
Phone# :	(443) 257-0086			
Email Address:	statebids@infojiniconsulting.com			
This form is for bidding evaluation purposes only. Usage hours are only an estimation.				
*Holiday Shifts include only: Christmas, Thanksgiving and New Year's only - the shift starts at 11:00pm the night before and ends the next day at 11:00pm				

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: Infojini, Inc.

Authorized Signature: S. Tejasvir Date: 09/25/2019

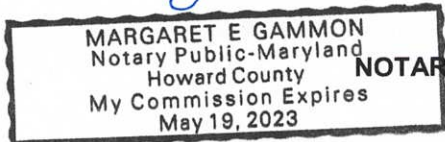
State of Maryland

County of Howard, to-wit:

Taken, subscribed, and sworn to before me this 25th day of September, 2019.

My Commission expires May 19, 2023.

AFFIX SEAL HERE



NOTARY PUBLIC

Margaret E. Gammon



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: 616302

Doc Description: Temporary Registered Nurse

Proc Type: Central Master Agreement

Date Issued	Solicitation Closes	Solicitation No	Version
2019-09-16	2019-10-01 13:30:00	CRFQ 0618 BVH2000000006	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:

Infojini, Inc.
 10015, Old Columbia Road, Suite B215, Columbia, MD 21046
 (443) 257-0086

FOR INFORMATION CONTACT THE BUYER

Stephanie L Gale
 (304) 558-8801
 stephanie.l.gale@wv.gov

Signature X

20-4624920
 FEIN #

09/25/2019
 DATE

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 WV Veterans Home to establish an open-end contract for Licensed Practical Nurse(s) to comply with staffing needs of the State owned and operated facility.

INVOICE TO		SHIP TO	
WEST VIRGINIA VETERANS HOME 512 WATER ST		WEST VIRGINIA VETERANS HOME 512 WATER ST	
BARBOURSVILLE	WV25504	BARBOURSVILLE	WV 25504
US		US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	Temporary Registered Nurse	2080.00000	HOUR	\$50.70	\$ 105,456.00

Comm Code	Manufacturer	Specification	Model #
85101601			

Extended Description :

Provide an RN for full time work
See attached for specifications

BVH200000006	Document Phase Final	Document Description Temporary Registered Nurse	Page 3 of 3
---------------------	--------------------------------	---	------------------------------

ADDITIONAL TERMS AND CONDITIONS

See attached document(s) for additional Terms and Conditions