

ENDOR

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

MEDSUP10

| PΑ | GE |
|----|----|
| | 1 |

ADDRESS CORRESPONDENCE TO ATTENTION OF:

JO ANN ADKINS 304-558-8802

SH-P TO ALL STATE AGENCIES
AND POLITICAL SUBDIVISIONS
VARIOUS LOCALES AS INDICATED
BY ORDER

ADDRESS CHANGES TO BE NOTED ABOVE

DATE PRINTED TERMS OF SALE SHIP VIA F.O.B FREIGHT TERMS 02/02/2010 BID OPENING DATE: 03/18/2010 BID OPENING TIME 01:30PM CAT. LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT 0001 EA 475-00-99-001 1 MEDICAL SUPPLIES REQUEST FOR QUOTATION THE PURCHASING DIVISION IS SOLICITING BIDS FOR A BLANKET OPEN-END STATEWIDE CONTRACT TO FURNISH MEDICAL SUPPLIES TO ALL WEST VIRGINIA STATE AGENCIES AND POLITICAL SUBDIVISIONS. AN ELECTRONIC VERSION OF MEDSUPIO PRICING PAGES NOTE: CAN BE FOUND AT: HTTP://WWW.STATE.WV.US/ADMIN/PURCHASE/NEWBUL.HTM VENDOR MUST SUBMIT A PAPER BID WITH THE MEDSUP10 BID. THE PAPER COPY SHALL PREVAIL IF ANY DIFFERENCE EXISTS BETWEEN THE ELECTRONIC COPY AND THE PAPER BID SUBMITTED. MANDATORY PRE-BID A MANDATORY PRE-BID WILL BE HELD ON FEBRUARY 23,2010 AT 11:00 AM IN PURHASING CONFERENCE ROOM LOCATED AT 2019 WASHINGTON ST., E., CHARLESTON, WV (BLDG.15). ALL INTERESTED PARTIES ARE REQUIRED TO ATTEND THIS MEETING. FAILURE TO ATTEND THE MANDATORY PRE-BID SHALL RESULT IN DISQUALIFICATION OF THE BID. NO ONE PERSON MAY REPRESENT MORE THAN ONE BIDDER. SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE **TELEPHONE** TITLE FEIN

GENERAL TERMS & CONDITIONS REQUEST FOR QUOTATION (RFQ) AND REQUEST FOR PROPOSAL (RFP)

- 1. Awards will be made in the best interest of the State of West Virginia.
- 2. The State may accept or reject in part, or in whole, any bid.
- 3. Prior to any award, the apparent successful vendor must be properly registered with the Purchasing Division and have paid the required \$125 fee.
- 4. All services performed or goods delivered under State Purchase Order/Contracts are to be continued for the term of the Purchase Order/Contracts, contingent upon funds being appropriated by the Legislature or otherwise being made available. In the event funds are not appropriated or otherwise available for these services or goods this Purchase Order/Contract becomes void and of no effect after June 30.
- 5. Payment may only be made after the delivery and acceptance of goods or services.
- 6. Interest may be paid for late payment in accordance with the West Virginia Code.
- 7. Vendor preference will be granted upon written request in accordance with the West Virginia Code.
- 8. The State of West Virginia is exempt from federal and state taxes and will not pay or reimburse such taxes.
- 9. The Director of Purchasing may cancel any Purchase Order/Contract upon 30 days written notice to the seller.
- 10. The laws of the State of West Virginia and the Legislative Rules of the Purchasing Division shall govern the purchasing process.
- 11. Any reference to automatic renewal is hereby deleted. The Contract may be renewed only upon mutual written agreement of the parties.
- 12. BANKRUPTCY: In the event the vendor/contractor files for bankruptcy protection, the State may deem this contract null and void, and terminate such contract without further order.
- 13. HIPAA BUSINESS ASSOCIATE ADDENDUM: The West Virginia State Government HIPAA Business Associate Addendum (BAA), approved by the Attorney General, is available online at www.state.wv.us/admin/purchase/vrc/hipaa.htm and is hereby made part of the agreement. Provided that the Agency meets the definition of a Cover Entity (45 CFR §160.103) and will be disclosing Protected Health Information (45 CFR §160.103) to the vendor.
- 14. CONFIDENTIALITY: The vendor agrees that he or she will not disclose to anyone, directly or indirectly, any such personally identifiable information or other confidential information gained from the agency, unless the individual who is the subject of the information consents to the disclosure in writing or the disclosure is made pursuant to the agency's policies, procedures, and rules. Vendor further agrees to comply with the Confidentiality Policies and Information Security Accountability Requirements, set forth in http://www.state.wv.us/admin/purchase/privacy/noticeConfidentiality.pdf.
- 15. LICENSING: Vendors must be licensed and in good standing in accordance with any and all state and local laws and requirements by any state or local agency of West Virginia, including, but not limited to, the West Virginia Secretary of State's Office, the West Virginia Tax Department, and the West Virginia Insurance Commission. The vendor must provide all necessary releases to obtain information to enable the director or spending unit to verify that the vendor is licensed and in good standing with the above entities.
- 16. ANTITRUST: In submitting a bid to any agency for the State of West Virginia, the bidder offers and agrees that if the bid is accepted the bidder will convey, sell, assign or transfer to the State of West Virginia all rights, title and interest in and to all causes of action it may now or hereafter acquire under the antitrust laws of the United States and the State of West Virginia for price fixing and/or unreasonable restraints of trade relating to the particular commodities or services purchased or acquired by the State of West Virginia. Such assignment shall be made and become effective at the time the purchasing agency tenders the initial payment to the bidder.

I certify that this bid is made without prior understanding, agreement, or connection with any corporation, firm, limited liability company, partnership, or person or entity submitting a bid for the same material, supplies, equipment or services and is in all respects fair and without collusion or Fraud. I further certify that I am authorized to sign the certification on behalf of the bidder or this bid.

INSTRUCTIONS TO BIDDERS

- 1. Use the quotation forms provided by the Purchasing Division. Complete all sections of the quotation form.
- 2. Items offered must be in compliance with the specifications. Any deviation from the specifications must be clearly indicated by the bidder. Alternates offered by the bidder as **EQUAL** to the specifications must be clearly defined. A bidder offering an alternate should attach complete specifications and literature to the bid. The Purchasing Division may waive minor deviations to specifications.
- 3. Unit prices shall prevail in case of discrepancy. All quotations are considered F.O.B. destination unless alternate shipping terms are clearly identified in the quotation.
- 4. All quotations must be delivered by the bidder to the office listed below prior to the date and time of the bid opening. Failure of the bidder to deliver the quotations on time will result in bid disqualifications. Department of Administration, Purchasing Division, 2019 Washington Street East, P.O. Box 50130, Charleston, WV 25305-0130
- 5. Communication during the solicitation, bid, evaluation or award periods, except through the Purchasing Division, is strictly prohibited (W.Va. C.S.R. §148-1-6.6).



VEXDOR

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

MEDSUP10

ADDRESS CORRESPONDENCE TO ATTENTION OF ::

JO ANN ADKINS 304-558-8802

D BY ORDER

| RFQ COPY TYPE NAME/ADDRESS | HERE | 333 | ΔΙΙ | STAT | LE | AGENC FICAL | TFC | | |
|----------------------------|-----------|------|-----|-------|----|----------------|--------|------|------|
| THE MANEYADDRESS | 11 - 12 - | 2000 | M I | SIM | · | MOLITO | T F 43 | | |
| | | S | ANI |) POI | ١٦ | TICAL | SUBD | IVIS | IONS |
| | | p | VAR | OUS | LC | CALES | AS | INDI | CATE |
| | | | | | | | | | |

| | | Envisore Alles | | | OU.D | REIGHTEENWS |
|--|--|---|--|---|---|-----------------------|
| 02/02/20 | | | | | | |
| BID OPENING DATE: | 03/18 | /2010 | | BID O | PENING TIME | 01:30PM |
| LINE | QUANTITY | UOP CAT | ITEM NUMB | ER | UNITPRICE | AMOUNT |
| POTOFF PRESENTATION ACCOUNTS HE ALL THE LATER ACCOUNTS HE ACCOUNTS HE ALL THE LATER ACCOUNTS HE ALL THE LATER ACCOUNTS HE ALL THE LATER ACCOUNTS HE ACCO | TENTIAL EFICIAL DO STATE ANY EFINANCE TO DISQUALIZED THE LURE TO DITION, WEIR E-MAILED TO DERS WHO ET AND ANCE THE PRE-TENDANCE EXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX | ICE SHEET WILL NAME OF THE INFORMATION OF THE INFORMATION OF THE INFORMATION OF THE INFORMATION OF THE PRESS | COMPLETE. IFYING ATTE PROVIDE YOU N THE ATTEN F THE BID. MENTATION T IBLE FOR EN TION REQUIR G DIVISION ESPONSIBILI HE PRE-BID THAT ALL PO AND FAX NUM ARE REQUES THE PRE-BI E DISMISSAL D WILL BE P TER CONCLUS D, BUT DURI OT BE PERMI OT BE PERMI OM LIST CON HARD COPY C NT LISTED O HIS CONTRAC ND EXTENDS | THIS WI NDANCE A PANCE ST OURING THE SURING THE ATTENDA TENDAL BER. TO D BERNITE ION ANY TENDAL BER. TO D TRACTOR N THE N THE | HEET WILL RESU ATE WILL NOT Y ATTENDANCE. THEY HAVE HE ATTENDANCE STATE AGENCY A BIDDER-S NCE SHEET. IN BIDDERS INCLU ARRIVE PRIOR T DERS WHO ARRIV TECHNICAL D TO SIGN IN. THE TECHNICAL SUBSEQUENT PAR SIGN THE ALL MEDICAL | RY LT DE O E T |
| | | l i | NEW CONTRA | | | |
| | | SEEF | | IMS AND COND | NTIONS | |
| SIGNATURE | ere ere ere er gemente til fott styrik i flytisk i flytisk | o energia antica (se popular programa) (2000). | | LEPHONE | DA | TE |
| TITLE | | FEIN | | | ADDRESS CHANG | SES TO BE NOTED ABOVE |
| 38711751 | 2500010111 | \ | A | | LODACE ADOVE LADE | |



A DOUGH

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for Quotation

MEDSUP10

PAGE 3

ADDRESS CORRESPONDENCE TO ATTENTION OF

JO ANN ADKINS 304-558-8802

SH-P TO

ALL STATE AGENCIES
AND POLITICAL SUBDIVISIONS
VARIOUS LOCALES AS INDICATED
BY ORDER

DATE PRINTED TERMS OF SALE SHIP VIA FREIGHT TERMS FOB 02/02/2010 BID OPENING DATE: BID OPENING TIME 03/18/2010 01:30PM CAT. LINE QUANTITY UOP ITEM NUMBER UNIT PRICE AMOUNT ORIGINAL CONTRACT. THE "REASONABLE TIME" PERIOD SHALL NOT EXCEED TWELVE (12) MONTHS. DURING THIS "REASONABLE TIME" THE VENDOR MAY TERMINATE THIS CONTRACT FOR ANY REASON UPON GIVING THE DIRECTOR OF PURCHASING 30 DAYS WRITTEN NOTICE. UNLESS SPECIFIC PROVISIONS ARE STIPULATED ELSEWHERE IN THIS CONTRACT DOCUMENT, THE TERMS, CONDITIONS AND PRICING SET HEREIN ARE FIRM FOR THE LIFE OF THE CONTRACT. RENEWAL: THIS CONTRACT MAY BE RENEWED UPON THE MUTUAL WRITTEN CONSENT OF THE SPENDING UNIT AND VENDOR, SUBMITTED TO THE DIRECTOR OF PURCHASING THIRTY (30) DAYS PRIOR TO THE EXPIRATION DATE. SUCH RENEWAL SHALL BE IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND SHALL BE LIMITED TO TWO (2) ONE (1) YEAR PERIODS. CANCELLATION: THE DIRECTOR OF PURCHASING RESERVES THE RIGHT TO CANCEL THIS CONTRACT IMMEDIATELY UPON WRITTEN NOTICE TO THE VENDOR IF THE COMMODITIES AND/OR SERVICES SUPPLIED ARE OF AN INFERIOR QUALITY OR DO NOT CONFORM TO THE SPECIFICATIONS OF THE BID AND CONTRACT HEREIN. OPEN MARKET CLAUSE: THE DIRECTOR OF PURCHASING MAY AUTHORIZE A SPENDING UNIT TO PURCHASE ON THE OPEN MARKET, WITHOUT THE FILING OF A REQUISITION OR COST ESTIMATE, ITEMS SPECIFIED ON THIS CONTRACT FOR IMMEDIATE DELIVERY IN EMERGENCIES DUE TO UNFORESEEN CAUSES (INCLUDING BUT NOT LIMITED TO DELAYS IN TRANS-PORTATION OR AN UNANTICIPATED INCREASE IN THE VOLUME OF WORK.) QUANTITIES: QUANTITIES LISTED IN THE REQUISITION ARE APPROXIMATIONS ONLY, BASED ON ESTIMATES SUPPLIED BY SEE REVERSE SIDE FOR TERMS AND CONDITIONS SIGNATURE TELEPHONE DATE TITLE FEIN ADDRESS CHANGES TO BE NOTED ABOVE



> USDOR

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

REDSUP10

PAGE

ADDRESS CORRESPONDENCE TO ATTENTION OF:

JO ANN ADKINS 304-558-8802

O+ 4-±0

| | | | .,000,,.,000,000000 | | | | | | |
|-------------------|---|--------------------------|--|----------------|--|-------------|-------------------------------|--------------------------|---------------|
| DATE PRINTED | <u> </u> | JER | MS OF SAL | | SHIP V | Α | F.O.B | FREIGHT TERMS | |
| BID OPENING DATE: | 010 | 07/70/ | | | | W | | | |
| BID OPENING DATE: | 80.000.000.000 | 03/18/ | <u> 2010 </u> | 000 ASS (2000) | na na manana na n | BID | OPENING TIME | 01:30PM | deensalasse |
| LINE | QUA | NTITY | POP | CAT NO | ITEM NUM | BER | UNIT PRICE | AMOUNT | |
| | | | | | (2001) in a serial de la constantitut de la constanti | | | | 200100000000 |
| T I | HE ST | ATE SP | ENDIN | G UNI | T. IT IS | UNDERS | TOOD AND AGRE | - en | |
| 1 | | i | | | | | TITIES ACTUAL | | |
| 1 3 | | | | | | - | F THE CONTRAC | 1 | |
| WI | HETHE | R MORE | OR L | ESS T | HAN THE Q | UANTITI | ES SHOWN. | | |
| 1 | | | | | | | HALL ISSUE A | | |
| 3 | | | | | | | BER WV-39) TO | ı | |
| r I | | | | | | | THIS CONTRACT | | |
| | | | | | | | E MAILED TO T | | |
| | | | | | | | A SECOND COPY A THIRD COPY | | |
| | | | | | NG DIVISI NG UNIT. | UN, AND | M INTED COLT | | |
| | | | | | | | | · · | |
| B | ANKRU | PTCY: | IN T | HE EV | ENT THE V | ENDOR/C | ONTRACTOR FIL | _ES | |
| F | OR BA | NKRUPT | CY PR | OTECT | ION, THIS | CONTRA | CT IS AUTOMAT | ri- | |
| C | ALLY | NULL A | ND VO | ID, A | ND IS TER | MINATED | WITHOUT FURT | THER | |
| 01 | RDER. | | | | | | | | |
| | | | | | | | | _ | |
| | | | | | | | THIS CONTRACT | | |
| | | | | | | | TERMS AND ACHED PRINTED | , | |
| 1 | | | | | | | ORMS, SALES | | |
| 1 | | | | | - | | INCLUDING ANY | <i>,</i> | |
| 1 | | | | | AS CD-RO | | | - | |
| 19.000 miles | | | | | | | | | |
| RI | E V. 0 | 4/11/2 | 001 | | | | | | |
| | | | | | | | | , | |
| , | | 0.7.11.0 | | | | | | | |
| | | | | | | | OF WEST VIRG ARD PROGRAM W | | |
| | | UED TH | | | | | ARD PROGRAM W FUL VENDOR | AHICH | |
| | | 1 | 1 | | | | VISA PURCHAS | STNC | |
| | | | | | | | BY ANY STATE | , in a | |
| | | | | | | | 2,500 AS A CO | DNDI- | |
| | | F AWAR | | | | | | | |
| | | | | | | | | *** | |
| - | | | | : | | | | | |
| | 000000000000000000000000000000000000000 | | 3634563574 | SEERF | VERSE SIDE FOR TE | RMS:AND CON | IDITIONS | | 0000000 |
| SIGNATURE | <u> </u> | ocotes pousitis gistilia | | | | TELEPHONE | | DATE | 1000000000000 |
| TITLE | | FE | IN | | | | | | |
| | | | | | | | ADDRESS CH | HANGES TO BE NOTED ABOVE | |



プロロス四く

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

MEDSUP10

| PA | GE :: |
|----|-------|
| | |
| | 5 |

ADDRESS CORRESPONDENCE TO A FIENTION OF:

JO ANN ADKINS 304-558-8802

| * | |
|----|-------|
| | |
| | |
| | |
| | |
| | |
| | . · F |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| œ. | |
| | |

| | | | | | | there's | | | | |
|---|---|-------------|------------|----------|---|-----------------------|---|-----------------|---|----|
| DATE PRIN | <u>ารู้ใช้ใหยอย่างใหม่ในสมัยสมัย</u> | TER | IMS OF SAI | F | SI | IIP VIA | F | 0.8 | FREIGHT TER | MS |
| 02/02/ BID OPENING DATE: | | 07/10/ | | | | | | | | |
| 000000000000000000000000000000000000000 | 100000000000000000000000000000000000000 | 03/18/ | | CAT. | | | OPENING | | 01:30PM | |
| LINE | QUAI | NTITY | UOP | NO. | ITEM | NUMBER | UN | ITPRICE | AMOUNT | |
| | | | | | | | | | | |
| | EXHIBI | T 10 | | | | | | | | |
| | | | | | | | : | | | |
| 15. | | | | | REQ | UISITION | ND.: | • • • • • • • | • • | |
| | ADDEND | IIM ACE | MODIE | DOEME | L1 T | | | | | |
| | ADDEND | UM ACK | NUWLE | Deelie | N I | | | | | |
| ************************************** | I HERE | BY ACK | NOWLE | DGE R | ECEIPT | OF THE FO | DILOWING | CHECKED | | |
| | | | | | | NECESSAF | | | MY | |
| | | | | | | ICATION, | | | | |
| | | | | | | | | | | |
| | ADDEND | UM NO. | 'S: | | *************************************** | | *************************************** | | | |
| | NO 1 | | | | | | | | | |
| , | NO. I | • • • • • • | • • | | | | | | *************************************** | |
| | NO. 2 | | | | | | | | | |
| | | | | | | | | | ****** | |
| | NO. 3 | | | | | | | | | |
| | WW. | | | | | | | | | |
| | NO. 4 | | • • | | | | | | *************************************** | |
| | NO E | | | | | | | | | |
| | NO. 5 | • • • • • | • • | | | | | | | |
| | I UNDE | RSTAND | THAT | FAIL | URE TO | CONFIRM | THE RECE | IPT OF T | 4 F | |
| | 1 | | 3 | ; | 1 | REJECTION | Į. | | | |
| | | | | | | | | | | |
| | l . | | ŧ. | 1 | 1 | D THAT A | I | | | |
| | | | | | | D TO BE | | | | |
| | 1 | | l | f . | 1 | VENDOR'S T BINDING | 1 | | | |
| 1 | ! . | | } | ŧ . | 1 | AND ADDE | 1 | | | |
| | | | | | | ADDENDU | | | | |
| ************************************** | | | | | | | | | , | |
| ************************************** | | | | | | | | | | |
| | | | | | • • | • • • • • • • • | | • • • • • • • • | • • | |
| | | | | | | SIC | NATURE | | | |
| | | | | | | | | | | |
| | J | | | SEERE | L VERSE SIDE FO | R TERMS AND CO | NDITIONS | | | |
| SIGNATURE | | | | | | TELEPHONE | | DAT | E | |
| TITLE | | FE | IN | | | | AD | DRESS CHANG | ES TO BE NOTED AR | |



MODZE

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia Department of Administration Purchasing Division 2019 Washington Street East Post Office Box 50130 Charleston, WV 25305-0130

Request for Quotation

MEDSUP10

| PA | GE : |
|----|------|
| | 4 |

ADDRESS CORRESPONDENCE TO ATTENTION OF:

JO ANN ADKINS 304-558-8802

SH-P TO

| DATE PRIN | TED | TERMS OF SAL | E | SHIP | /IA | FOB | | FREIGHT TERMS |
|------------------|--|---|-----------|------------------------|-------------|---------------|-------------|-------------------|
| 02/02/ | | | | | | | | |
| BID OPENING DATE | 03/ | 18/2010 | | | BID | OPENING TI | ME 01 | :30PM |
| LINE | QUANTITY | UOP | CAT NO | ITEM NUI | VIBER. | UNIT PRIC | Œ | AMOUNT |
| | | | | * * * * | co | MPANY | * * * * * | |
| | 10.00 V | | | * * * * * | DA | TE | • • • • • • | |
| | NOTE: THI WITH THE | 1 | UM AC | KNOWLEDGE | MENT SH | OULD BE SU | BMITTED | • |
| | REV. 09/2 | 1/2009 | | | | | | |
| | ****** | *************************************** | NOT | ICE | | * | | |
| | A SIGNED | BID MUST | BE S | UBMITTED | TO: | | ; | |
| | PURC | RTMENT O HASING D DING 15 | | INISTRATI ON | DN | | • | |
| | ; | | | TREET, EA 5305-0130 | | | 7777 | |
| | 19 A T T T T T T T T T T T T T T T T T T | · | | | | | | |
| | THE BID S | | | | | N ON THE FA | ACE OF | |
| | SEALED BI | D | | , | | | ; | |
| | BUYER: | | | | | FILE 4 | 2 | |
| | RFQ. NO.: | | | | | MEDSUP | 10 | |
| | 1 | L | SEE RE | VERSE SIDE FOR T | ERMS AND CO | I NDITIONS | | |
| SIGNATURE | • | | | | TELEPHONE | | DATE | |
| TITLE | * | FEIN | | | 1 | ADDRES | S CHANGES | TO BE NOTED ABOVE |



VENDOR

RFQ COPY

TYPE NAME/ADDRESS HERE

State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
Charleston, WV 25305-0130

Request for Quotation

MEDSUP10

| · P | AGE | |
|-----|-----|---|
| | | 7 |

ADDRESS CORRESPONDENCE TO ATTENTION OF

JO ANN ADKINS 304-558-8802

| | | 1 |
|---|--------|----|
| | | 1 |
| ì | î | |
| 1 |)) | ١ |
| • | Γ | |
| (|) | 1 |
| | | -1 |

| DATE PRIN | red Te | RMS OF SALE | SHIP VIA | | FO'B | FREIGHTTERMS |
|-------------------|----------------------------|---|----------------------------|----------------|-----------------------|-------------------|
| 02/02/ | 2010 | | | | | |
| BID OPENING DATE: | | /2010 | | BID OP | ENING TIME 01 | :30PM |
| LINE | QUANTITY | UOP CAT. | ITEM NUMBE | R | UNITPRICE | AMOUNT |
| | BID OPENING BID OPENING | *************************************** | | | 03/18/2010 1:30 PM | |
| | PLEASE PROV TO CONTACT | | | | S NECESSARY | |
| | CONTACT PER | SON (PLEASE | PRINT CLEA | ARLY): | | |
| | ***** THI | S IS THE EN | n of RFO | MEDSUPI | 0 ***** TOTAL: | |
| | | | | | · AAAAA TOTAL. | |
| | | | | | | |
| | • | | | | | |
| SIGNATURE | | SEERE | VERSE SIDE FOR TERM TEL | MS AND CONDITI | IONS | |
| | | | | | | |
| TITLE | | FEIN | | | ADDRESS CHANGES | TO BE NOTED ABOVE |

SCOPE

Products to be provided under this contract shall be all types of medical supplies, bandages, hospital care products, personal care products, etc. Vendors may bid one or more catalogs to supply these products. We plan to make a single award; however, we always reserve the right to award multiple contracts if it is deemed to be in the best interests of the State of West Virginia. Contract(s) awarded shall be based on discount from list.

**** SHALL not include incontinence products ****

All terms and conditions in the written specifications which are absolute and the compliance with can not be waived. Mandatory terms are indicated by the use of the terms *shall*, *will*, *must*, *maximum* or *minimum*.

Mandatory Pre-Bid Meeting

A mandatory pre-bid meeting shall be held on February 23, 2010, at 11:00 a.m. The meeting will be held in the Purchasing Division Conference Room located at 2019 Washington Street, East (Capitol Complex - Building 15), Charleston, WV 25305. Any vendor who wishes to bid on this contract must be represented at this meeting. Failure to attend the mandatory pre-bid conference shall disqualify a vendor from bidding on this contract. No person can represent more than one bidder.

The State reserves the right to utilize inter-state agreements, such as the WSCA (Western States Contracting Alliance), GSA, MMCAP to purchase medical supplies outside of the terms and conditions of any contract resulting from an award to the RFQ, pursuant to West Virginia Code, Section §5A-3-19.

Questions

Written questions shall be accepted through close of business on Thursday, February 18, 2010. Written questions may be sent via USPS, fax, courier, hand delivered, or e-mail. E-mail questions are preferred. Send questions to:

Jo Ann Adkins
Department of Administration
Purchasing Division
2019 Washington Street, East
Charleston, WV 25305
Fax: 304-558-4115

Email: jo.a.adkins@wv.gov

General Information

- 1. All products bid, furnished and delivered **must** be listed in a current catalog(s) that contains product lines broad enough to meet the needs of the State of West Virginia. Each item bid on the pricing page from the catalog must be identified by a reference number.
- 2. Vendor shall quote a percentage discount from the lowest price listed in the price list(s)/catalogs submitted. The state prefers a single percentage discount from the price list / categories, but will consider bids containing different percentage discounts for different brands, lists or categories of supplies. Vendors MAY submit alternate bids using a separate or additional catalog(s). All items in the discount category must have the exact same discount. (For example, if a personal care product on the pricing page has a discount of 40%, EVERY personal care product sold must have the 40 % discount.) Bids must plainly and clearly indicate the different classes of products with percentage discount for each. Bids that are not clearly identified, by easily identified classes, may be disqualified. Bids that have multiple discounts by category MUST list a discount for a miscellaneous category that would be applied to any product not identified by a category discount shown. For evaluation purposes, an estimate of quantity has been inserted to give the miscellaneous category a value in the bid evaluation. NOTE: The category discount must be for all items in that category. Bidders shall not offer greater discounts for items on the pricing pages than the category discount offered for that item.

Bidders should mark the items in the catalogs that appear on the pricing pages, to assist in the evaluation and verification of the bids. This is an excel document and will be available electronically after the mandatory pre-bid. Failure to indicate the minimum order quantity on the pricing sheets shall require the vendor to ship any quantity of that product ordered, regardless of size.

- 3. Bidders must attach current catalog/price list to their bid. The discount shall be taken from the lowest price column in the price list. The percentage discount shall be indicated for each list/category, etc. If multiple percentage discounts are bid, the bidder must clearly indicate which list, category, or brand to which the percentage applies. If any discrepancies exist in the prices and the bid schedule and the actual price list and percentage discount bid, the actual price list and percentage bid shall prevail and be corrected by the buyer for evaluation purposes. This catalog(s)/price list(s) will be used with any resulting contract. Vendors are requested to type the pricing pages.
- 4. Successful vendor shall provide catalogs/price lists, at no charge, upon request to various state agencies. Additional price lists/catalogs may be

required from the vendor at any time. These shall be provided at no cost to the State. State agencies may obtain the catalogs/price lists by contacting the contract coordinator.

- 5. Bidders shall complete the pricing on "MEDSUP10 Pricing Pages". Bidders should complete all columns and information requested. This is a list of items anticipated to be purchased. Quantities for each item represent the approximate volume of anticipated purchases. No future use of contract is guaranteed or implied. The discount rate must be extended to all items found and ordered from the price list. The "unit price" must be the final price that will be charged to the State of West Virginia.
- 6. The lowest cost, most complete, bid shall be awarded a contract. The discount from list shall remain the same during the entire contract period, including any renewals. The contract awarded shall be based on the entire contract; exceptions are items that are covered by other specific contracts, such as latex gloves and lab supplies are specifically excluded from MEDSUP010 contract.
- 7. The catalog/price list may be updated at renewal. If the Purchasing Division extends the offer to renew and the new catalogs have significant price increases, Purchasing may decline and re-bid the commodity.
- 8. Amount is shown for informational purposes only and is not to be construed as a guarantee of any future contract usage.
- 9. Orders shall be delivered within five (5) working days after orders are received. Spending unit must be advised in writing if orders will be delayed for any reason. Contractor shall carry an adequate stock to insure such delivery service for the duration of the contract.
- 10. All deliveries must be made during normal working hours for the delivery location. All shipments of products requiring a material safety data sheet (MSDS) shall include a MSDS included with the product.
- 11. All bids are to be quoted as F.O.B. destination to any West Virginia location. The minimum order for prepaid shipping to one, in-state destination shall be \$200.00. For orders less than \$200.00, transportation charges (if any) will be invoiced as a separate charge with the original freight bill attached to the invoice. Agencies may make purchases that fall under the \$200.00 limit at a local source to avoid the delivery charges. Note: Stringing orders to circumvent purchasing regulations is expressly prohibited.

- 12. All items must have a current manufacture's date. Items received by an agency that has an expiration date within 180 days of receipt, will not be accepted and returned to the vendor for replacement or credit.
- 13. Verification of product quality is the responsibility of the vendor. The State of West Virginia may require certified mail test data, certifications or samples for testing of material bid. All costs of test samples shall be borne by the vendor as well as freight costs to and from the agency.
- 14. The successful bidder shall not substitute any other brand of products from those awarded, nor sell any additional items under their contract not specifically covered herein, without prior written permission of the Purchasing Division.
- 15. All products must be highly efficient and effective in the performance of the tasks for which the product is intended to be used.
- 16. Bidders must be a manufacturer or a regular stocking licensed dealer for the products offered at the time of the bid.
- 17. Successful vendor shall provide quarterly reports and annual summaries showing the quantities, dollar value and agencies (including political subdivisions) which have used this contract. Successful vendor shall also be able to provide report showing the top 50 items purchased during the contract period. This report is mandatory and failure of the successful bidder to supply such reports may be grounds for cancellation of contract. Report is to be sent electronically to: kelli.a.winebrenner@wv.gov.
- 18. Nonconforming products and materials shall be returned to the vendor at no expense to the State of West Virginia at any time during the life of this contract.
- 19. Internet Access Vendor should be able to provide internet ordering access. If vendor has such capabilities, this should be so noted in their quotation and describe the process for setting up such ordering for state agencies.

Reminders to Bidders:

Prior to submitting bids, bidders are cautioned to comply with all mandatory bid requirements.

Bidders shall quote a single discount from price list for all items or shall quote a discount from list by category. If multiple category discounts are given, bidders

MUST offer a "miscellaneous" discount category for all items that may not be included in the category discount list.

Include dated and numbered catalog/price list(s) – Two Sets Please supply and electronic copy of catalog/price list(s)

Complete the Pricing Pages – including the name and other requested information on the contract coordinator to respond to agency inquiries on using the contract.

If the price list makes reference to prices being subject to change, those terms are null and void. All price changes shall be in accordance with Paragraph 7.

Samples MAY be requested during the bid evaluation. Samples shall be received within seven days after request is made and at no cost to the State of West Virginia.

MEDSUP10- PRICING PAGE

| | VENDORS SHOU | LD COM | VENDORS SHOULD COMPLETE ALL COLUMNS | MNS | | | | | | | | | | | | | |
|---------------|--|--------------|--|---|--|--|------------------|--------------|-------|-----------|------|---|-----------|---|-------------------|----------------------|-----------------|
| ACTION NOTICE | | | THE PROPERTY OF THE PROPERTY O | 200000000000000000000000000000000000000 | The second secon | West of the second seco | - | Min. | | | List | | | | | | |
| Item # | Description | Est. | Equal To | Brand | Mfa.# | Size/Wt | Qty. per Pkg. | Order Ott | Brand | Product # | | Discount Pkg. Qty. % Bid | Pkg. Qty. | Unit Bid Price | Case Bid Price | Per Oz. Bid Price | Bid Total |
| | WOUND CARE PRODUCTS | STOTION | | | | Section (Section) | | | | | | | | | | | |
| - | Alginates - Dressings | _ | Kaltostat | Convatec - Bristol Myers | 168210 | 2"X2" | 10/box | | | | | | | | | | |
| 2 | Alginates . Dressings | 1 | | Convatec - Bristol Myers | 168212 | 3"X4 3/4" | 10/box | | | | | | | | | | |
| က | Alginates - Dressings | 1 | | Johnson & Johnson | 2981 | 2"X2" | 12/box | | | | | | | | | | |
| 4 | Alginates - Dressings | I | Fibracol Plus Collogen | Johnson & Johnson | 2982 | 4"X4 3/8" | 12/box | | | | | | | | | | |
| 2 | Collogen - Dressings | I | n Matrix | Johnson & Johnson | PG019 | 19.1 sq. in. | 10/box | | | | | | | | | | |
| 9 | Compression - Bandages | 10000 | Setopress | Convatec - Bristol Myers | 153505 | 4"X120" | 1/box | | | 770 | | | | | | | |
| 7 | Compression - Bandages | 10000 | | Convatec - Bristol Myers | 650947 | 4"X3.2 yds. | 1/box | | | | | | | | | | |
| 80 | Foam Dressings | | | Convatec - Bristol Myers | 164855 | 4"X4" | 20/box | | | | | | | | | | |
| တ | Foam Dressings | 1 | | Convatec - Bristol Myers | 165655 | 4"X4" | 15/box | | | | | | | *************************************** | | | |
| 10 | Foam Drassings | 5000 | dropolymer | Johnson & Johnson | MTL 100 | 2 3/4"X3 1/2" | 10/box | | | | | | | | | | |
| 7 | Foam Dreesings | 2000 | Hydropolymer | Johnson & | MTL103 | "TX" | 5/box | | - | | | | | - | | | |
| 12 | Hydrocolloids | 2000 | cel AG | Convatec - Bristol Myers | 403706 | 2"X2" | 10/box | | | | | | | | | | |
| 13 | Hydrocolloids | 5000 | (D) | Convatec - Bristol Myers | 403710 | 6"X6" | 5/box | | | | | | | | | | |
| 14 | MILDERM | 2000 | Wound | Johnson & | HCB102 | 2"X2" | 20/frav | | | - | | | | | | | |
| 15 | NET-DERM | 2009 | Hydrocid, Wound Dressing | Johnson & | HCB107 | 3.15"X4 3/4" | 10/tray | | | | | | | | | | ~~~~ |
| 9 | | 2000 | Collagen | Johnson & Johnson | 2489 | 30 gm. Tube | 5/box | | | | | | | | | | |
| 12 | Oil Impulsion | 2500 | | Kendali | 6112 | 3"X3" | 50/box | | | | | | | | | | |
| 18 | 1 | 2500 | ssive | Kendall | 6116 | .6X5 | 12/box | | | | | | | | | | |
| 19 | 1 | 2000 | Щ | Johnson & Johnson | 8755 | 1/4"X5 yds. | 12/cs | | | | | *************************************** | | | | | |
| 8 | † | 2000 | | Johnson & Johnson | 8751 | 1/2"X5 yds. | 12/cs | | | | | | | | | | 10,000 |
| 27 | Petrolatum Gauze | | ADAPTIC PG Non- Adherent | Johnson & Johnson | 2045 | 1"X8" | 50/box | | | | | · | | | | | SONIES |
| 22 | | ╁— | ADAPTIC PG Non- | Johnson & | 2047 | 3″X9″ | 12/box | | | | | | | | | | No. of the last |
| 23 | | - | Curasalt | Kendall | 3339 | 6"X6 3/4" | 24/box | | | | | | | | | | |
| 24 | | 2000 | BICLUSIVE Sterile | Johnson & Johnson | 2474 | 1 3/4"X2 3/4" | 100/box | | | | | | | | | | 0.000 |
| 25 | T | 2000 | 1 | Johnson & Johnson | 2475 | 3"X4" | 50/box | | | | | | | | |) ()) () | 840 |
| 78 | T | 2000 | BIOPATCH- Antimicrobial | Johnson & Johnson | 2150 | 1" disc | 10/box | | | | | | | | | | Vetta S |
| 27 | Wound Cleansers | 10000 | | | 1063 | 6 02. | 12/box | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | |

| · |
|----|
| 2 |
| ge |
| ď |
| |

| | i. | Bid lotal | | | | | | | | | | | | | | | | | | | | | | | · | *************************************** | | | | | | | |
|----------------------|--|-------------|-----------------------------|-----------------------------|-----------|------------|------------|---------|---|---------|---------------|----------------------------|-----------------|----------------|-----------------------------------|---------------------|--------------|--------------|---------------|---------------|---------------|---|---------------|---|------------------|---|----------------------------|----------------------------|----------------------------|----------------------------|--------------------------|-----------------------|----------------------------|
| | Per Oz. | Brd Price | | | | | 7347787046 | | | | | | | | | | | | | | | 100000000000000000000000000000000000000 | | | | | | | | | | | |
| | Case Bid | Price | | | | | | | | | | | | | | | | | | | | | | 2000 00 00 TO 00 00 | | | | | | | | | |
| | Unit Bid | Price | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | ձ | Bid | | | | | | | | | | | | | · | | | | | | | | | | | | | | | | | | |
| | Discount | % | | | | | | | | | | | www | | | | | | | | | | | | | | | | | | | | |
| | is is | Price | | | | | | | | | | | | | | | | \downarrow | | - | | | | | | | | | | | | | |
| | | Product# | | | | - American | | | *************************************** | | | | | | | | | | | | | | | | | | | | | | | | |
| | Brand | Bid | | | | | | | | | | | | | | | | | | | | | | 200000000000000000000000000000000000000 | | | | | | | | | |
| | Min. Order | aty. | | | | | | | | | | | | | | | | | | | | | | . (Ca (150 (150 (150 (150 (150 (150 (150 (150 | | | | | | | | | |
| | Qty. per | Pkg. | 25/cs | 6/cs | 50hov | Vaccion | 50/box | 20/tray | 70/fray | 50/tray | 30/box | 24/box | 25/box | 25/box | 25/box | 25/box | 100/box | 50/box | 6 rl/box | 4 rl/box | 12/cs. | 12 r/box | 6 rl/box | 6 1/00X | 12 pr/box | 12 pr/box | 12 pr/box | 6 pr/box | 6 рг/вох | 6 pr/box | 12/cs. | 12/cs. | 100/box |
| | a principal way and the control of t | Size/Wt | 1 | 12 02. | 4 n X B K | OV - | 5"X9" | 5 X8 | 2'X2" | 4"X4" | 1"X5" yds. | 3"X5" yds. | 4"X4" | 4"X6" | 3 7/8"X4 5/8" | 5 7/8"X5 7/8" | 2"X2" | 4"X4" | 2"X10 yds. | 3"X10 yds, | 4"X10 vds. | 1"X10 yds. | 2"X10 yds. | Z'X5 1/2 yds. | Small | Medium | Larde | Small | Medium | Large | 1.5 oz | 2.0 02. | 7.63"X9" |
| | | Mfg.# | 125199 | 159712 | acuc | 2007 | 2007 | 7196 | 7089 | 7088 | 1581 | 1583 | 46-001 | 46-002 | 2954 | 2956 | 7770 | 7772 | 1527-2 | 1527-3 | 2962 | 1530-1 | 1530-2 | 1528-2 | 7071 | 7115 | 7203 | 3130 | 3416 | 3728 | 80896 | 95008 | 48100 |
| UNS | Commence of the commence of th | Brand | Convatec - Bristol Myers | Convatec - Bristol Mvers | Johnson & | Johnson & | Johnson | Kendall | Kendall | Kendall | 3M HealthCare | 3M HealthCare | | | 3th HealthCare | 3M HealthCare | Kendall | Kendall | 3M HealthCare | 3M HealthCare | 3M HealthCare | 3M HealthCare | 3M HealthCare | 3M HealthCare | Kendail | Kendall | Kendall | Kendall | Kendall | Kendall | Coloate | Colgate | Georgia Pacific |
| COMPLETE ALL COLUMNS | | Equal To | Optipore Sponge | · | X - Non- | X - Non- | i. | | Sterile Excilon AMD | | # | 3M Coban-Self- Adherent | CovadermDeRoyal | CovademDeRoyal | Medipore Soft Cloth Tane, etc. | Medipore Soft Cloth | Curex Sponge | Curex Sponge | Transpore | Transpore | Medipore | Micropore | Micropore | Microfoam | TED Knee I enoth | TED Knee Length | TED Knee i englh | TED Thigh Length | TED Thigh Length | TED Thigh Length | Diai Lady Speed Sfirk | Mennen Speed Stick | Preference Near Premium |
| COMPL | Est. | Qty | 10000 | 10000 | | +- | | \top | 2500 E | 1 | | 10000 A | } | 2500 C | ļ | T | Т | 1 | | - | 10000 | | | 5000 N | 2000 | | 1 | 7 | ī | | | | 1 |
| VENDORS SHOULD | | Description | Wound Cleansers 1 | _ | ╅┈┈ | + | Sauze | | ABD Pads Antimicrobial Dressings | ial | Vraps | | | | seings | ╫ | ╁ | | | 1 | Tape - Cloth | <u> </u> | Tape - Paper | Tape - Retention 5000 Mic | Anti-Enbolism | Anti-Enbolism Stockings | Anti-Enbolism Stockings | Anti-Enbolism Stockings | Anti-Enbolism Stockings | Anti-Enbolism Stockings | Doodorante | Deodorants | Tissue |
| ^ | Item | # | 28 8 | 29 | 88 | 31 | | | 34 4 | 35 4 | 36 | 37 | 38 | 36 | 40 | 41 | 42 (| 1 | | | 46 | Τ | 49 | | 51 | 52 | 53 | 54 | 55 | 999 | 22 | 58 | 59 |

MEDSUP10- PRICING PAGE

| ICING PAG |
|-----------|
| |
| |
| |
| CING |
| |
| <u>z</u> |
| ਨੂ |
| <u></u> |
| ***** |
| |
| Ē. |
| Ω., |
| 1 |
| 0 |
| ~ |
| α. |
| |
| |
| ⋽ |
| S |
| nsa |
| EDSO |
| MEDSO |

| *************************************** | VENDORS SHOU | LD CON | VENDORS SHOULD COMPLETE ALL COLUMNS | MNS | 6 To 10 To 1 | | | | 8 | The state of the s | | 2000 | c) called a constant of the | The second second | | 100 | |
|---|--------------------------------|-------------|---------------------------------------|--|--|--|------------------|-----------------------|--------------|--|--------------|---|--|--|--|----------------------|-----------|
| ltem # | Description | Est. Oty | Equal To | Brand | Mfg.# | Size/Wt | Qty. per Pkg. | Min. Order Qty. | Brand Bid | Product# | List Unit | Discount % | Pkg. Oty. Bid | Unit Bid Price | Case Bid Price | Per Oz. Bid Price | Bid Total |
| 90 | Economy Unbreakable Comb | 2500 | 1/2 narrow combs- | NA | N/A | 5" | Ea. | | | | | | | | | | 1 |
| 61 | Lotions & Creams | 5000 | | Provon | 4231-244 oz | | 24/cs. | | | | | | | | | | |
| 62 | Lotions & Creams | 5000 | | Provon | 4232-12 | 12 02. | 12/cs. | | | | | | | | | | |
| 63 | Lotions & Creams | 2500 | | Provon | 4236-04 | 1 Gal. | 4/cs. | | | | | | The state of the s | | | | |
| 64 | Oral Care | 10000 | Toothpaste - Cavity protection | Colgate | 50200 | ,85 oz. | 48/cs. | | | | | | | | | | |
| 65 | Oral Care | 2000 | Toothpaste - Cavity protection | Colgate | 20500 | 2.7 oz. | 36/cs. | | | | | | | | | | |
| 99 | Oral Care | 10000 | Toothbrush - Med. Stiffness | N/A | N/A | Adult | Ea. | | | | | | | | | | |
| 67 | Oral Care | 9000 | Toothbrush - Soft Stiffness | NA | N/A | Adult | E 3 | | | | | | | | | PU | |
| 68 | Oral Care | 2000 | sh - Soft | N/A | N/A | Child | Ēa, | | | | | | | | | | |
| 69 | Oral Care | 10000 | Alcohol-Free Mint Mouthwash | Antibacterial | Α'N | 40z. | E Sa | | | | | | | | | | |
| 202 | Oral Care | 10000 | Toothette Swabs | Sage Products | 5602 | N/A | 250/box | | | | | | | | | f (4) | |
| 72 | Oral Gare | 2000 | Efferdent Denture | PFIZER | 63639 | Tablets | 90 (b/box | | | | | | | | | | |
| 72 | Oral Care | 5000 | if Denture e Cream | PFIZER | 63965 | 2.5 oz. | 12/cs. | | | 1 | | | | | | | |
| 73 | Powders | 10000 | | Donovan Industries | BP35 | 4 02. | 48/cs. | | | | | | | | | | |
| 74 | | 10000 | Baby Powder w/Comstarch | Donovan Industries | BP35C | 3.5 oz. | 48/cs. | | | | | | | | | | |
| 75 | 1 | | | American safety Razor | 75-0022 | Stnd. Wt. | Ea. | | | | | | | | | | |
| 92 | 1 | <u> </u> | 1 | Colgate | 84912 | 11 02. | 12/cs. | | | | | | | | | | |
| 77 | Tongue Blades | 10000 | Sterile Tongue Blades | GS Select | 22-9598 | Stnd. Size | 100/box | | | | | *************************************** | | | | | |
| | 1998 | ROL | | | | | 100 E | | | 450 Sec. 542.0 | | Section of the Control | 630 TV | | | | |
| 78 | Hand Disinfectants | 2000 | Provon Lotion Soap - Antimicrobíal | Provon | 2118-08 | 1000 ml. | 8/cs. | | | | | | | *** | And the second s | | |
| 62 | | 5000 | Provon Lotion Soap - Antimicrobial | Provon | 4216-04 | Pour Gallon | 4/cs. | | | | | | | | | | |
| 8 | | 10000 | | | 4022-12 | 1000 ml. | 10/cs. | | | | | 1 | | | | | |
| 84 | Hand Sanitizers | 2000 | | Johnson & Johnson | 37008 | 8 oz. | 24/cs. | | | | | | | | | | 1 |
| 82 | | 9000 | Prevcare Antimicrobial Hand Gel | Johnson & Johnson | 37432 | 32 oz. | 6/cs. | | | | | | | | | | |
| 83 | | 2000 | | 3M Health Care | 1800+ | One Size | 50/box | | | | | | | Comment of the Commen | | | 300000 |
| 84 | 1 | 2000 | | 3M Health Care | 1860 | One Size | 20/box | | | | | | | | | | |
|] | | 1 | | TO THE | | The state of the s | l | Dana 3 of 5 | | | | ! | | | | | 10 |

| GE |
|-----|
| , P |
| ¥ |
| 줐 |
| 9 |
| 핕 |
| |
| SC |

| Personal 5000 Bourfleat Cap - Biue GS Select 45320 24" 100box Personal 5000 Bourfleat Cap - Biue GS Select 465632 Unit-Size 50/Cs. Personal 5000 Bourfleat Cap - Biue GS Select 46502 Unit-Size 50/Ds. Alcohol Boute 1000 NuA NuA NuA NuA Case Alcohol Boute 1000 NuA NuA NuA NuA Case FIRSTADIOKITS 3cm Commercial NuA NuA Min. 200 Iems Imm. 200 Alcohol Perg Pads 100 NuA NuA NuA Min. 150 Iems Min. 150 Iems Basic First Add Kit 2500 Commercial NuA NuA Min. 150 Iems Min. 150 Iems Ad kit 2500 Commercial NuA Aplicare 82.73044 Ap. 2.7 72/Cs. Lotions & Creams 5000 Basic First Add Kit 2500 Cam/ Home Cap | Pkg. Oty. | Brand Bid Product# | List Price | Discount Pke | Pkg. Qty. Unit Bid Bid Price | d Case Bid Price | Per Oz. Bid Price |
|--|-----------|-----------------------|--|---|---|---|----------------------|
| Signor Sicilation Gown | × | | | | | | |
| Stood Size | | | | | | | |
| 1000 NI/A | ×ŏ | | | | | | |
| 100 NIA | 1 | | | | | | |
| 10000 Commercial NIA | es es | 22000 | 30.000 | 1000 | 000000000000000000000000000000000000000 | 100000000000000000000000000000000000000 | \$ 2000 |
| 1000 Egg Craft Mile Mile | 00 | | | | | | |
| 1000 EKG Thermal Paper 1000 EKG Thermal | 8 | | | | | | |
| 1000 Car / Home / Office NIA | 2 10 | | | | | | |
| 2500 Individual Use - Pos N/A N/A N/A Min. 25 Items 5000 Rash Cream N/A N/A 4 oz. 5000 Baby Lotion - Pink Aplicare 82-7344 oz. 5000 Baby Lotion - Pink Aplicare 82-7344 oz. 5000 Hand & Body Aplicare 82-73944 oz. 5000 Lean & Body Aplicare 82-73944 oz. 5000 Eye Wash N/A #034540 Box 5000 Eye Wash N/A #034640 Box 5000 Patch N/A N/A \$0.2. 5000 Patch N/A N/A \$2.3° 10000 Patch N/A N/A \$2.4° 1000 Cold & Alicage #5005685 #1621 - 200 EKG Thermal Paper #30 | 200 | _ | | | | | |
| s 5000 Rash Cream N/A N/A 4 oz. s 5000 Baby Lofion - Pink Aplicare 82-72344 oz. s 5000 Baby Lofion - Pink Aplicare 82-72344 oz. s 5000 Hand & Body Aplicare 82-72344 oz. s 5000 Eye Wash N/A #034540 Box s 5000 Eye Wash N/A N/A 8 oz. s 5000 Patch N/A N/A 2-3° NTER MEDICATIONS N/A N/A N/A 2-3° NTER MEDICATIONS Ascensia #7090 - S Microfill Strips Ascensia #7090 - R Coley Zoff S GC Foley #30015682 - S N/A #0501 - | Items | | | | | | |
| Rash Cream NIA NIA 4 oz. Deaby Lotion - Pink Aplicare 82-72344 pz. Deaby Lotion - Pink Aplicare 82-73044 pz. Deaby Lotion - Pink Aplicare 82-73044 pz. Deaby Lotion - Pink NIA Box Death Relevers - Pink NIA Box Death Relevers - Pink NIA NIA Box Discarries Solution NIA NIA 2.9° Discarries Allergy NIA NIA 2.9° Discarries Allergy NIA Allergy - Discarries Mattress Microfil Strips Ascensia #7090 - Discarries Mattress Microfil Strips #30015682 - - Discarries Mattress NIA #4860CA - - Discarries Mattress NIA MIA H050. </td <td></td> <td></td> <td></td> <td></td> <td></td> <td>400 CENTER 1</td> <td>7.20</td> | | | | | | 400 CENTER 1 | 7.20 |
| 5000 Baby Lotion - Pink Aplicare 82-72344 pz. 5000 Hand & Body Aplicare 82-73044 pz. 2000 N/A Aplicare 82-73044 pz. 5000 Eye Wash N/A M/A 8 oz. 5000 Eye Wash N/A N/A 8 oz. 5000 Saline Solution N/A N/A 8 oz. 5000 Path N/A N/A 2.9x 10000 Path Relevers / Fev N/A N/A N/A 2/pk 10000 Cold & Affergy N/A N/A 2/pk 10000 Cold & Affergy N/A N/A 2/pk 1000 Cold & Affergy N/A N/A 2/pk 200 Mitorofill Strips Ascensia #FS82650 - 200 EKG Thermal Paper #S30015682 Large 200 EKG Thermal Paper #S30015682 Large 200 Corvical Collar N/A #4860CA Large 200 | ś | | | 1 | | | |
| 5000 Hand & Body Aplicare 82.79044 pz. 2000 NA MIA #034540 Box 5000 Eye Wash NIA MIA 8 oz. 5000 Saline Solution NIA NIA 8 oz. 5000 Saline Solution NIA NIA 2.9% 1000 Patch NIA NIA 2.9% 1000 Patch NIA NIA 2.9% 1000 Cold & Aliergy NIA NIA 2.1pk 1000 Cold & Aliergy NIA NIA 2.1pk 1000 Antihistamines NIA NIA 2.1pk 200 Antihistamines MIA NIA 2.1pk 200 Microfill Strips Ascensia #7080 - 200 EKG Electrodes #ES82650 #ES82650 - 80 NIA Foley #30015682 - 200 Cervical Collar Foley #3050 - 2 | ý | | | | | | |
| 2000 N/A M/A #Q34540 Box 5000 Eye Wash N/A N/A 8 oz. 5000 Saline Solution N/A N/A 8 oz. 5000 Patich Solution N/A N/A 8 oz. 1000 Patich Solution N/A N/A 2-3° 1ER, MEDICATIONS N/A N/A 2-3° 10000 Pain Releivers / Fev N/A N/A N/A 2/pk 10000 Cold & Aliergy N/A N/A 2/pk 10000 Antihistamines N/A N/A 2/pk 200 Microfill Strips Ascensia #FS82650 - 800 EKG Electrodes #ES82650 #ES82650 - 200 EkG Thermal Paper #S0015682 #30015682 - 200 Foley 20FR 5 CC Foley #1621 - 200 Cervical Collar N/A #4860CA Large 200 Cervical Collar N/A H0SPU. Bed <td>S.</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> | S. | | | | | | |
| Sum Sum NiA NiA 8 oz. | 97 | | | | | | |
| 5000 Eye Wash N/A N/A 8 oz. 5000 Saline Solution N/A N/A 8 oz. 5000 Saline Solution N/A N/A 8 oz. 1000 Patch N/A N/A 2-3" 10000 Pair Relevers / Fev N/A N/A 2/pk 10000 Colid & Allergy N/A N/A 2/pk 1000 Antihistamines N/A N/A 2/pk 200 Microfili Strips Ascensia #7090 - 200 Microfili Strips Ascensia #7080 - 200 Microfili Strips Ascensia #7080 - 200 Microfili Strips Ascensia #7080 - 200 EKG Electrodes #ES82650 #ES82650 - 200 EKG Thermal Paper #30015682 #3050 - 200 Cervical Collar N/A #4860CA Large 1000 Cervical Collar N/A Hospt. Bed | | | | | | | |
| 5000 Saline Solution NIA NIA 8 oz. 5000 Patch NIA NIA 2.3" 10000 Patch NIA NIA 2.4" 10000 Cold & Aliergy NIA NIA 2/pk 1000 Cold & Aliergy Ascensia #7090 200 Microfili Strips Ascensia #7090 200 EKC Electrodes #ES82650 #ES82650 200 Cold & Aliergy #1621 200 Cold & Aliergy #1621 200 Cold & Aliergy MIA Hospi. Bed 1000 Egg Crate Mattress NIA NIA Hospi. Bed 1000 Exam Table Paper - NIA NIA 20" | xo | | | | | | |
| 5000 Patch 1000 Patch 1000 Pain Releivers / Fev NVA NVA 2/pk 10000 Cold & Alfergy NVA NVA 2/pk 200 Microfill Strips Ascensia #7090 | X | | | | | | |
| 10000 Pain Releivers / Fev N/A N/A 2/pk 10000 Cold & Aliergy N/A N/A 2/pk 10000 Cold & Aliergy N/A N/A 2/pk 10000 Anithistamines N/A N/A 2/pk 200 Microfili Strips Ascensia #7090 200 Microfili Strips Ascensia #7090 200 EKG Electrodes #ES82650 #ES82650 200 Coley 20FR 5 CC Foley #1621 200 Cenical Collar N/A #14860CA Large 1000 Egg Crate Mattress N/A #4860CA Large 1000 Exam Table Paper - N/A N/A Hospti. Bed 1000 Exam Table Paper - N/A N/A 20" | XX | | SHAPE SALES | SE SUSSE S. | | ************************************** | |
| 10000 Pain Releivers / Fey MA NIA Zipk 10000 Cold & Aliergy NIA NIA Zipk INA 10000 Cold & Aliergy NIA NIA Zipk INA Zipk INA Zipk INA Zipk INA Zipk Zio Microfili Strips Ascensia #7090 Zio EKG Electrodes #ES82050 #ES82050 Zio EKG Thermal Paper #30015692 #30015692 Zio Foley Zio Foley #1621 Zio Cervical Collar NIA #1621 Zio Cervical Collar NIA #4050CA Large It Zio Crutches NIA #4050CA Large It Zio Crutches NIA MA Hospt. Bed Per' 1000 Exam Table Paper NIA NIA Zio Zio Zio Exam Table Paper NIA NIA Zio | | | | | | | 42 V |
| 10000 Cold & Alfergy NVA NVA 2/pk 10000 Antihistamines NVA NVA 2/pk 200 Microfil Strips Ascensia #7090 200 Microfil Strips Ascensia #7090 200 EKG Electrodes #ES82650 #ES82650 100 EKG Thermal Paper #30015682 #30015682 200 Cervical Collar Foley #1621 200 Cervical Collar NVA #1620 Large 1000 Egg Crate Mattress NVA #4860CA Large 1000 Exam Table Paper NVA NVA Hospti. Bed 1000 Exam Table Paper NVA NVA 20" | X | | | | | - | NV STORES |
| 10000 Anthristamines N/A N/A Z/pk 200 Microfil Strips Ascensia #7090 200 Microfil Strips Ascensia #7090 200 EKG Electrodes #ES82650 #ES82650 100 EKG Thermal Paper #30015682 #3060 200 Foley 20FR 5 CC Foley #1621 200 Foley 20FR 5 CC Foley #3050 100 Egg Crate Mattress N/A #4960CA Large 100 Egg Crate Mattress N/A #4860CA Large 100 Exam Table Paper N/A N/A Hospti. Bed | XO | | | | | | |
| Crofil Strips Ascensia #7090 - (G Electrodes #ES82650 #ES82650 - (G Thermal Paper #30015682 #30015682 - (G Thermal Paper #30015682 - - (A Thermal Paper #30015682 - - (A Thermal Paper #30015682 - - A Thermal Paper #30016682 - - | xo | | ************************************** | SEC. 00.000000000000000000000000000000000 | 00000000000000000000000000000000000000 | 7.00 V400 V 0 V 0 V 0 V 0 V 0 V 0 V 0 V 0 | |
| 200 Microfil Strips Ascensia #7090 - 800 EKG Electrodes #ES82650 #ES82650 - 100 EKG Thermal Paper #30015682 +30015682 - 200 Foley 20FR 5 CC Foley #1621 - 80 NA Foley #3050 - 200 Cervical Collar N/A #0702-05 Large 200 Crutches N/A #4860CA Large 1000 Egg Crate Mattress N/A Hospti. Bed er 100 Exam Table Paper - N/A N/A 20" | | | | | | | |
| 800 EKG Electrodes #ES82650 #ES82650 - 100 EKG Thermal Paper #30015682 - - 200 Foley 20FR 5 CC Foley #1621 - 80 N/A #702.05 Large 200 Cervical Collar N/A #4860CA Large 200 Crutches N/A #4860CA Large 1000 Egg Crate Mattress N/A N/A Hospti. Bed er 100 Exam Table Paper - N/A N/A 20" | y/Box | | | | | | |
| 100 EKG Thermal Paper #30015682 - 200 Foley 20FR 5 CC Foley #1621 - 80 N/A Foley #3050 - 200 Cervical Collar N/A #40702-05 Large 200 Coulches N/A #4860CA Large 1000 Egg Crate Mattress N/A N/A Hospti. Bed er 100 Exam Table Paper - N/A N/A 20" | y/Pk. | | | | | | |
| 200 Foley 20FR 5 CC Foley #1621 . 80 NA Foley #3050 . 200 Cervical Collar N/A #0702-05 Large 200 Crutches N/A #4860CA Large 1000 Egg Crate Mattress N/A N/A Hospti. Bed er 100 Exam Table Paper N/A N/A 20" | y/Box | | | | | | |
| 80 N/A Foley #3050 - 200 Cervical Collar N/A #4702-05 Large 200 Crutches N/A #4860CA Large 1000 Egg Crate Mattress N/A Hospti. Bed er 100 Exam Table Paper N/A N/A 20" | 3. | | | | | | |
| 200 Cervical Collar N/A #0702-05 Large 200 Crutches N/A #4860CA Large 1000 Egg Crate Mattress N/A N/A Hosptl. Bed er 100 Exam Table Paper - N/A N/A 20" | y/Box | | | | | | |
| 200 Crutches N/A #4660CA Large 1000 Egg Crate Mattress N/A Hospti. Bed er 100 Exam Table Paper - N/A N/A 20" | ď | | | | | | |
| 1000 Egg Crate Mattress N/A N/A Hospti. Bed e Paper 100 Exam Table Paper - N/A N/A 20" | ıir. | | | | | | |
| 100 Exam Table Paper N/A N/A 20" | ei. | | | | | | |
| *************************************** | fy/cs. | | | | | | |
| 000 | 'v/Box | | | | | | |
| 22 Ga Catheter Intima #383323 22Ga X 3/4" | y/Box | | | - | | | |

| α, |
|----|
| ♂ |
| S |
| 0 |
| 8 |
| Α. |

| Description Cby Est Es | | VENDORS SHOULD COMPLETE ALL COLUMNS | D COM | PLETE ALL COLU | MNS | | | | | | | | | | | | | |
|---|------------|-------------------------------------|------------|--|------------------|---------------|--|-----------------------|---------------|-------|---------------------------|---|---------------|------------------|------|------------|----------------------|---|
| Description Est Description Est Description City Description City City City Description City C | 200 200 | | 7 | Second and special second seco | | | T TO SECURE OF THE PARTY OF THE | N. ASSULTED BOOK | Min. | | NAME OF TAXABLE PROPERTY. | 4 | | | | | | |
| Needle 500 Needle N/A #20503040 15 Ga X T SpecifyBox SpecifyBox SpecifyBox SpecifyBox SpecifyBox M/A #51740.00 M/A #51740.00 M/A #51740.00 M/A Ea. SpecifyBox Sprint Aniely Sprint | Item # | | Est. | Equal To | Brand | Mfg.# | Size/Wt | Qty. per Pkg. | Order Oty. | Brand | Product # | | Discount % | Pkg. Qty. Bid | | | Per Oz. Bid Price | Bid Total |
| Silppers, Adult 700 Silppers MA \$45514 Adult larg Ea. Splint, Adult MA \$4170.00 NIA Ea. Splint, Adult MA \$4170.00 NIA Ea. Splint, Adult Splint MA \$4170.00 NIA Ea. Splint, Adult Splint, Adul | 114 | Needle | | | N/A | #20503040 | | Specify/Box | | | | | | | | | | |
| Spinit, Anite 100 Splint Mu/A #1740-00 Nu/A Ea. | 115 | | П | | N/A | #9514 | Adult Larg. | Ea. | | | | | | | | | | |
| Landing Gear 100 Splint MA #1740-00 N/A Ea. | 116 | | Ι | | | | | | | | | | | | **** | | | |
| Suture Removal 7:00 Suture Removal Tra NIA #266000 NIA SpecifyBox Syringe 3cc Luer LoylyA #219334 NIA SpecifyBox Syringe 3cc Luer LoylyA NIA SpecifyBox Syringe 3cc Luer LoylyA Syringe | | Landing Gear | | Splint | N/A | #1740-00 | NA | Ea. | | | | | | | | | 100 miles | |
| Tray 700 Suture Removal Tra N/A #206000 N/A Ea. | 117 | | | | | | | | | | | | | | | | | |
| Syringe 3 oc Luer 300 Syringe 3 oc Luer Lo NuA Specify/Box Lock Loc | | | | Suture Removal Tra | N/A | #266000 | N/A | Ea. | | | | | | | | | | |
| Lock | 118 | 3 | 1 | | | | | | | | | | | | | | | |
| Use out Percentages | | | | Syringe 3cc Luer Log | N/A | #513934 | NIA | Specify/Box | | | | | | | | | | *************************************** |
| Use additional sheets if needed for number of discount percentages being offered.) Use additional sheets if needed for number of discount percentages being offered.) Use additional sheets if needed for number of discount percentages being offered.) Use additional sheets if needed for number of discount percentages being offered.) | | | | | | | 0.000 | State of the state of | | | 200 Car (200 Car) | | | | | | | |
| Use additional sheets if needed for number of discount percentages being offered. | 15 | st Discount Percentage | res: | | | | | | | | | | | | | | | |
| Category DISCOUNT | | (Use additional shee | ets if nee | ded for number of d | liscount percent | 'ages being o | ffered.) | | | | | | | | | | | |
| Category DISCOUNT Category WOUND CARE PRODUCTS Control of the product of the product of the product of the product coordinator Information below: Control of the product of the pro | | · · | | | % | | - Constitution of the Cons | | | | | | | | | | | |
| | 000 | Category | - | | DISCOUNT | | | | | | | | | | | | GRAN | D TOTAL |
| 1 | <u> </u> - | WOUND CARE PRO | DUCTS | | | | | | | | | | | | | | | |
| | = | PERSONAL CARE P | RODUC | TS | | | | | | | | | | | | | | |
| | ≡ | INFECTION CONTRO | | | | | | | | | | | | | | | | |
| 1 1 1 1885. | ≥ | FIRST AID KITS | | | | | | | | | | | | | | | | |
| 196 | > | BABY CARE PRODU | UCTS | | | | | | | | | | | | | | | |
| 196 | = | EYE CARE | | | | | | | | | | | | | | | | |
| | ₹ | | R MEDI | CATIONS | | | | | | | | 1 | | | | | | |
| * Miscellaneous discount | ₹ | Г. | HES/MIS | ڹۣ | | | | | | | | | | | | | | |
| Miscellaneous discount | | | | | | 200 | | | | | | | | | | 20028-8000 | A. 1. 1987 MAG | |
| Vendors should complete the contract coordinator information below: | * | Miscellaneous dis | scount . | | % X \$25,000 | = (| | | | | | | | | | | | |
| Vendors should complete the contract coordinator information below: | | | | | | | | | | | | | | | | | | |
| | | Vendors should con | notete th | e contract coordina | tor Information | below: | | | | | | | | | | | | |

MEDSUP10- PRICING PAGE

| PHONE: | FAX: | | (Date) | |
|-----------------|--------------------------------|-------------------------------|--|---------|
| VENDOR NAME: | CONTACT PERSON: (Please print) | AUTHORIZED REPRESENTATIVE: | (Signature) AUTHORIZED REPRESENTATIVE: | (Print) |

| RFQ N |) | |
|-------|---|--|
| | | |

STATE OF WEST VIRGINIA Purchasing Division

PURCHASING AFFIDAVIT

West Virginia Code §5A-3-10a states: 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 the debt owed is an amount greater than one thousand dollars in the aggregate.

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.

"Debtor" means any individual, corporation, partnership, association, limited liability company or any other form or business association owing a debt to the state or any of its political subdivisions. "Political subdivision" means any county commission; municipality; county board of education; any instrumentality established by a county or municipality; any separate corporation or instrumentality established by one or more counties or municipalities, as permitted by law; or any public body charged by law with the performance of a government function or whose jurisdiction is coextensive with one or more counties or municipalities. "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 exceed five percent of the total contract amount.

EXCEPTION: The prohibition of this section does not apply where a vendor has contested any tax administered pursuant to chapter eleven of this 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.

Under penalty of law for false swearing (West Virginia Code §61-5-3), it is hereby certified that the vendor affirms and acknowledges the information in this affidavit and is in compliance with the requirements as stated.

WITNESS THE FOLLOWING SIGNATURE

| Vendor's Name: | | | |
|---|-------|------|---------|
| Authorized Signature: | Date: | | <u></u> |
| State of | | | • |
| County of, to-wit: | | | |
| Taken, subscribed, and sworn to before me this day of | | , 20 | |
| My Commission expires, 20 | | | |
| AFFIX SFAL HERE NOTARY PUBLIC | : | | |

Rev. 09/08

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 Resident Vendor Preference, if applicable.

| 1. | Application is made for 2.5% resident vendor preference for the reason checked: Bidder is an individual resident vendor and has resided continuously in West Virginia for four (4) years immediately preced- | | |
|--|--|--|--|
| Literatur | ing the date of this certification; or, Bidder is a partnership, association or corporation resident vendor an business continuously in West Virginia for four (4) years immediatel ownership interest of Bidder is held by another individual, partnershi maintained its headquarters or principal place of business continu preceding the date of this certification; or, | y preceding the date of this certification; of 80% of the p, association or corporation resident vendor who has ously in West Virginia for four (4) years immediately | |
| | Bidder is a nonresident vendor which has an affiliate or subsidiary which has maintained its headquarters or principal place of bus years immediately preceding the date of this certification; or, | ich employs a minimum of one hundred state residents iness within West Virginia continuously for the four (4) | |
| 2. | Application is made for 2.5% resident vendor preference for the Bidder is a resident vendor who certifies that, during the life of the working on the project being bid are residents of West Virginia who himmediately preceding submission of this bid; or, | contract, on average at least 75% of the employees | |
| 3. | Application is made for 2.5% resident vendor preference for the reason checked: Bidder is a nonresident vendor employing a minimum of one hundred state residents or is a nonresident vendor with an affiliate or subsidiary which maintains its headquarters or principal place of business within West Virginia employing a minimum of one hundred state residents who certifies that, during the life of the contract, on average at least 75% of the employees or Bidder's affiliate's or subsidiary's employees are residents of West Virginia who have resided in the state continuously for the two years immediately preceding submission of this bid; or, | | |
| 4. | Application is made for 5% resident 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% resident 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% resident vendor preference who Bidder is a resident vendor who is a veteran of the United States ar purposes of producing or distributing the commodities or completing continuously over the entire term of the project, on average at leas residents of West Virginia who have resided in the state continuous | med forces, the reserves or the National Guard, it, for the project which is the subject of the vendor's bid and it seventy-five percent of the vendor's employees are | |
| 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) reject the bid; 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. | | | |
| Under penalty of law for false swearing (West Virginia Code, §61-5-3), 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 | der:Signed: | 100000000000000000000000000000000000000 | |
| Date:_ | te: Title: | | |

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