



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

State of West Virginia  
**Master Agreement**

Order Date: 12-03-2024

CORRECT ORDER NUMBER MUST  
 APPEAR ON ALL PACKAGES, INVOICES,  
 AND SHIPPING PAPERS. QUESTIONS  
 CONCERNING THIS ORDER SHOULD BE  
 DIRECTED TO THE DEPARTMENT  
 CONTACT.

Order Number:	CMA 0506 2818 HHR1341025A 4	Procurement Folder:	1341025
Document Name:	ACCOUNTING TECHNICIAN IV TEMPORARY STAFFING	Reason for Modification:	Change Order 2 To Renew Contract
Document Description:	ACCOUNTING TECHNICIAN IV TEMPORARY STAFFING		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2024-02-15
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2026-02-14

VENDOR				DEPARTMENT CONTACT	
Vendor Customer Code:	000000206538			Requestor Name:	Tara L Buckner
SAUNDERS STAFFING INC				Requestor Phone:	(304) 558-9138
1116 SMITH STREET				Requestor Email:	tara.l.buckner@wv.gov
CHARLESTON	WV	25302			
US					
Vendor Contact Phone:	3043256817	Extension:			
<b>Discount Details:</b>					
	Discount Allowed	Discount Percentage	Discount Days		
#1	No	0.0000	0		
#2	No				
#3	No				
#4	No				

**2025**  
 FILE LOCATION \_\_\_\_\_

INVOICE TO	SHIP TO
BUYER - 304-957-0209	BUYER - 304-957-0209
HEALTH AND HUMAN RESOURCES	HEALTH AND HUMAN RESOURCES
FINANCE	ADMINISTRATION AND FINANCE
ONE DAVIS SQUARE, STE 300	ONE DAVIS SQUARE, RM 300
CHARLESTON WV 25301	CHARLESTON WV 25301
US	US

*CR 12-5-24*

Total Order Amount:	Open End
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Purchasing Division's File Copy

*CH 12/4/24*  
 PURCHASING DIVISION AUTHORIZATION  
 DATE: *Tara L. Buckner 12/5/24*  
 ELECTRONIC SIGNATURE ON FILE

ATTORNEY GENERAL APPROVAL AS TO FORM  
 DATE: *John S. Gray*  
 ELECTRONIC SIGNATURE ON FILE

ENCUMBRANCE CERTIFICATION  
*Cody Rose*  
 DATE: *12-6-24*  
 ELECTRONIC SIGNATURE ON FILE

*12/6/2024*

**Extended Description:**

Change Order

Change Order No. 2 is issued to renew the original contract according to all terms, conditions, prices, and specifications contained in the original contract, including all authorized change orders.

Effective date of renewal 2/15/2025 through 2/14/2026.

Renewal Years Remaining: 2

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	80111605			HOUR	23.760000
	<b>Service From</b>	<b>Service To</b>			<b>Service Contract Amount</b>
					0.00

**Commodity Line Description:** Accounting Technician IV

**Extended Description:**

Accounting Technician IV-Award Level 1

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	80111605			HOUR	35.640000
	<b>Service From</b>	<b>Service To</b>			<b>Service Contract Amount</b>
					0.00

**Commodity Line Description:** Accounting Technician IV - Overtime/Holiday

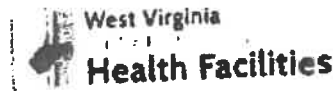
**Extended Description:**

Accounting Technician IV- Overtime/Holiday

To be paid at 1.5 times the hourly rate per 3.1.2 of specifications



Sherri A. Young, D.O., MBA, FAFP  
DH Cabinet Secretary



Michael J. Caruso  
DHF Cabinet Secretary



Cynthia A. Persily, Ph.D.  
DoHS Cabinet Secretary

STATE OF WEST VIRGINIA  
DEPARTMENTS OF HEALTH, HEALTH FACILITIES, AND HUMAN SERVICES

Office of Shared Administration  
Tara L. Buckner, CPA, MBA  
Chief Financial Officer

October 31, 2024

Saunders Staffing, Inc.  
1116 Smith Street, Suite 314  
Charleston, WV 25301

Dear Vendor:

Office of Shared Administration would like to renew Contract CMA HHR 1341025A for the period of February 15, 2025 through February 14, 2026 under the same pricing, terms and conditions as the original contract including any subsequent change orders or modifications. We will need an insurance certificate showing a minimum of \$1 million general liability insurance with the State listed as the certificate holder and an additional insured.

Please sign, date and print your name and title below in acceptance of the renewal. Please return this letter to email [Elizabeth.A.Webb@wv.gov](mailto:Elizabeth.A.Webb@wv.gov).

Accepted:	<u>Connie Saunders</u>	<u>11/25/24</u>
	Signature	Date
	<u>Connie Saunders</u>	<u>11/25/24</u>
	Printed Name	Date

If you have any questions or need additional information, please contact Ms. Webb via email.

Sincerely,

Tara L. Buckner  
Tara L. Buckner, Chief Financial Officer  
Office of Shared Administration

Agreed

[Signature]





Sherri A. Young, D.O., MBA, FAAFP  
DH Cabinet Secretary



Michael J. Caruso  
DHF Cabinet Secretary



Cynthia A. Persily, Ph.D.  
DoHS Cabinet Secretary

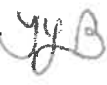
STATE OF WEST VIRGINIA  
DEPARTMENTS OF HEALTH, HEALTH FACILITIES, AND HUMAN SERVICES

Office of Shared Administration  
Tara L. Buckner, CPA, MBA  
Chief Financial Officer

**MEMORANDUM**

**DATE:** December 3, 2024

**TO:** Robert Price, CPPO, CPPB, WVDHHR Buyer Supervisor  
WVDHHR – Office of Purchasing

**FROM:** Tara L. Buckner, Chief Financial Officer   
Office of Shared Administration

**SUBJECT:** Renewal of Contract for Accounting Technician IV Staff

We are requesting that Contract Number CMA 0506 2818 HHR1341025A be renewed because the need still exists for additional staff in order to maintain timely processing.

Attached is the result of the letter going to the Saunders Staffing, Inc. for renewal. If you have any questions, please do not hesitate to contact me at (304) 558-9138.

TB/eaw

Attachment



- Any Words <sup>(i)</sup>
- All Words <sup>(i)</sup>
- Exact Phrase <sup>(i)</sup>

e.g. 123456789, Smith Corp

"saunders staffing" ×

"saunders staffing" ×

- Classification ▼
- Excluded Individual ▼
- Excluded Entity ▼
- Federal Organizations ▼
- Exclusion Type ▼
- Exclusion Program ▼
- Location ▼
- Dates ▼

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## West Virginia Secretary of State — Online Data Services

### Business and Licensing

Online Data Services Help

### Business Organization Detail

*NOTICE: The West Virginia Secretary of State's Office makes every reasonable effort to ensure the accuracy of information. However, we make no representation or warranty as to the correctness or completeness of the information. If information is missing from this page, it is not in the The West Virginia Secretary of State's database.*

### SAUNDERS STAFFING, INC.

*\* See Attached \**

Organization Information								
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C   Corporation	3/2/1989		3/2/1989	Domestic	Profit			

Organization Information			
<b>Business Purpose</b>	5613 - Admin/Support Waste Mgt/Remediation Services - Administrative and Support Services - Employment Services (placement, executive search, temporary help, professional employer orgs)		<b>Capital Stock</b> 3000.0000
<b>Charter County</b>	Mercer	<b>Control Number</b>	0
<b>Charter State</b>	WV	<b>Excess Acres</b>	0
<b>At Will Term</b>		<b>Member Managed</b>	
<b>At Will Term Years</b>		<b>Par Value</b>	30.000000
<b>Authorized Shares</b>	100	<b>Young Entrepreneur</b>	Not Specified

<b>Addresses</b>	
<b>Type</b>	<b>Address</b>
<b>Local Office Address</b>	400 NORTH ST BLUEFIELD, WV, 24701
<b>Mailing Address</b>	P.O. BOX 211 BLUEFIELD, WV, 24701 USA
<b>Notice of Process Address</b>	CONNIE SAUNDERS 37 COLLEGE DRIVE BLUEFIELD, VA, 24605
<b>Principal Office Address</b>	400 NORTH STREET BLUEFIELD, WV, 24701 USA
<b>Type</b>	<b>Address</b>

<b>Officers</b>	
<b>Type</b>	<b>Name/Address</b>
<b>Incorporator</b>	DEBRA ARCHER P.O. BOX 5706 PRINCETON, WV, 24740
<b>President</b>	CONNIE SAUNDERS 400 NORTH ST BLUEFIELD, WV, 24701
<b>Secretary</b>	W R. WELLONS JR 400 NORTH STREET BLUEFIELD, WV, 24701
<b>Treasurer</b>	W R. WELLONS JR. 400 NORTH STREET BLUEFIELD, WV, 24701
<b>Vice-President</b>	R. M. SAUNDERS 400 NORTH ST BLUEFIELD, WV, 24701
<b>Type</b>	<b>Name/Address</b>

<b>DBA</b>			
<b>DBA Name</b>	<b>Description</b>	<b>Effective Date</b>	<b>Termination</b>
DUST BUNNIES OF BLUEFIELD	TRADENAME	9/10/1997	8/1/2000
<b>DBA Name</b>	<b>Description</b>	<b>Effective Date</b>	<b>Termination Date</b>

<b>Name Changes</b>	
<b>Date</b>	<b>Old Name</b>
<b>8/14/2002</b>	SAUNDERS EMPLOYMENT SERVICES, INC.
<b>Date</b>	<b>Old Name</b>

<b>Date</b>	<b>Amendment</b>
<b>8/14/2002</b>	NAME CHANGE: FROM SAUNDERS EMPLOYMENT SERVICES, INC.
<b>1/19/1996</b>	CHANGE OF NAME FROM SAUNDERS TEMPORARY SERVICES, INC. TO SAUNDERS EMPLOYMENT SERVICES, INC.
<b>Date</b>	<b>Amendment</b>

<b>Annual Reports</b>	
<b>Filed For</b>	
2024	
2023	
2022	
2021	
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2019	
2018	
2017x	
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1998
<b>Date filed</b>

For more information, please contact the Secretary of State's Office at 304-558-8000.

Tuesday, November 12, 2024 — 10:59 AM

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Vendor/Customer

[Menu](#)

Address

Address Type	Street 1	City	State/Province	Zip/Postal Code	Principal Contact
✓ Ordering	1116 SMITH STREET	CHARLESTON	WV	25302	CONNIE SAUNDERS
Payment	PO BOX 211	BLUEFIELD	WV	247010211	PRISCILLA LEEDY
Ordering	PO BOX 211	BLUEFIELD	WV	24701	CONNIE SAUNDERS

First Prev Next Last

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Vendor/Customer : 000000206538  
SAUNDERS STAFFING INC

Active From : 01/17/2024

Address Type : Ordering

Active To :

Division/Department :

Default Record :

Additional Address Info. :

Mail Returned :

Prevent New Spending :

Active Address : Yes

Default Currency : USD - US Dollar

▼ Address Information

Address ID : AD000002	Country Phone Code : 1
Street 1 : 1116 SMITH STREET	Phone : 304-325-6817
Street 2 : SUITE 314	Phone Extension : <input type="text"/>
City : CHARLESTON	County : <input type="text"/>
State/Province : WV	County Name : <input type="text"/>
Zip/Postal Code : 25302	Country : US
DUNS : <input type="text"/>	
Extended DUNS : <input type="text"/>	
Unique Entity Identifier : <input type="text"/>	
CAGE Code : <input type="text"/>	

▶ Prenote/EFT

▶ Remittance Advice

▶ Contact Information

▶ Contact Address Information

▶ Geographic Designation

▶ Change Management

[Top](#)

[Modify Existing Record](#) [Add New Address](#)

[Master Address](#) [Master Contacts](#) [Languages](#)

[Vendor Transaction History](#)

# COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>Crystal Husted</u> Date: <u>12/1/24</u>  Solicitation No. <u>CMA HHR1341025A</u>	Agency: WV Office of Shared Administration  Procurement Officer Submitting Requisition: Heather White  Requisition No. CMA HHR1341025A  PF No.: 1341025
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This checklist **MUST** be completed by a state agency's designated procurement officer and submitted with the Purchase Requisition to the Purchasing Division. The purpose of the checklist is to verify that an agency procurement officer has obtained and included required documentation necessary for the Purchasing Division to process the requisition without future processing disruptions. At the agency's preference, the agency **MUST** either submit the checklist by attaching it to the requisition's Header **OR** by placing it in the requisition's Procurement Folder.

## FOR ALL SOLICITATION TYPES:

#	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
1	Specifications and Pricing Page included	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Use of correct specification template	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Use of correct requisition type [CRQS → CCT or CPO] or [CRQM → CMA]	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Use of most current terms and conditions ( <a href="http://www.state.wv.us/admin/purchase/TCP.pdf">www.state.wv.us/admin/purchase/TCP.pdf</a> )	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Maximum budgeted amount in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Suggested vendors in wvOASIS	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Capitol Building Commission pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Financing (Governor's Office) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Fleet Management Division pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Compliance Check Type	Required	Provided, if Required	Not Required	Purch. Div. Confirmation
10	Insurance requirements				
	Commercial General Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Automobile Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Workers' Compensation/Employer's Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Cyber Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Builder's Risk/Installation Floater	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Professional Liability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Other (specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Office of Technology CIO pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	Treasurer's Office (banking) pre-approval	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**FOR CHANGE ORDERS/RENEWALS:**

1	Two-party agreement	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
2	Standard change order language	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
3	Office of Technology CIO approval	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4	Justification for price increases/backdating/other	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5	Bond Rider (Construction)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6	Secretary of State Verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
7	State debarment verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
8	Federal debarment verification	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

*\*The items pre-checked are required before a Purchase Requisition may be submitted to the Purchasing Division. Failure to complete and verify this documentation may result in rejection of the requisition back to the agency. It is up to the agency procurement officer to determine if pre-approvals, insurance, or other documentation is needed for the purchase. The referenced information below may be used to make this determination.*

*For Purchasing Division Use Only:*

I have reviewed the requisition identified above and find that it is sufficient to advertise publicly to the vendor community. My review does not preclude the possibility that the vendor community, or some other entity, will identify an area of concern; however, should such issues or concerns arise, they will be reviewed and addressed as may be appropriate.

Signature: \_\_\_\_\_

*Crystal Husted*