



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: 12-17-2024

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 0702 7813 TAX2500000001 2	Procurement Folder:	1572519
Document Name:	Printing MV-1 Property Tax	Reason for Modification:	Change Order 01 To Cancel Contract
Document Description:	CO 1 Printing MV-1 Property Tax Adjustment Cancel Contract		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2024-11-27
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2025-12-17

VENDOR	DEPARTMENT CONTACT																				
Vendor Customer Code: VS0000018634 DATA INTEGRATORS INC 1190 INTERNATIONAL PARKWAY STE 109 FREDERICKSBURG VA 22406 US Vendor Contact Phone: 540-752-9740 Extension: Discount Details: <table border="1"> <thead> <tr> <th></th> <th>Discount Allowed</th> <th>Discount Percentage</th> <th>Discount Days</th> </tr> </thead> <tbody> <tr> <td>#1</td> <td>No</td> <td>0.0000</td> <td>0</td> </tr> <tr> <td>#2</td> <td>No</td> <td></td> <td></td> </tr> <tr> <td>#3</td> <td>No</td> <td></td> <td></td> </tr> <tr> <td>#4</td> <td>No</td> <td></td> <td></td> </tr> </tbody> </table>		Discount Allowed	Discount Percentage	Discount Days	#1	No	0.0000	0	#2	No			#3	No			#4	No			Requestor Name: Nora M Adams Requestor Phone: 304-558-8699 Requestor Email: nora.m.adams@wv.gov <div style="text-align: center; font-size: 2em; font-weight: bold;">2025</div> FILE LOCATION _____
	Discount Allowed	Discount Percentage	Discount Days																		
#1	No	0.0000	0																		
#2	No																				
#3	No																				
#4	No																				

INVOICE TO	SHIP TO
OPERATIONS DIVISION TAX DIVISION OF PO BOX 11748 CHARLESTON WV 25339-1748 US	PROPERTY TAX DIVISION TAX DIVISION OF 1001 LEE STREET EAST CHARLESTON WV 25301 US

12/16/24 66

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

AWP 12/17/24
PURCHASING DIVISION AUTHORIZATION
DATE: *JA 12.17.24*
ELECTRONIC SIGNATURE ON FILE

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

ENCUMBRANCE CERTIFICATION
John S. Gray
DATE: *12-18-24*
ELECTRONIC SIGNATURE ON FILE

12/18/2024

Extended Description:

Change Order

Change Order No. 01 is issued to cancel this contract/purchase order in its entirety and all funds associated with the contract. Effective date of cancellation 12/17/2024.

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	82121500				0.000000
	Service From	Service To		Service Contract Amount	
				0.00	

Commodity Line Description: Printing MV-1 Property Tax Adjustment Credit Schedule

Extended Description:

See attached Exhibit "A" Pricing Page to input pricing.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
2	82121500				0.000000
	Service From	Service To		Service Contract Amount	
				0.00	

Commodity Line Description: Printing MV-1 Property Tax Adjustment Credit Envelopes

Extended Description:

See attached Exhibit "A" Pricing Page to input pricing.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
3	78102203				0.000000
	Service From	Service To		Service Contract Amount	
				0.00	

Commodity Line Description: Direct and Bulk Mailing MV-1

Extended Description:

See attached Exhibit "A" Pricing Page to input pricing.



Larry Pack
Secretary of Revenue

Matthew Irby
State Tax Commissioner

STATE TAX DEPARTMENT

December 17, 2024

Data Integrators
Attn: Robert Denton
1190 International Parkway
Suite 109
Fredericksburg, VA 22554

Dear Mr. Denton,

The West Virginia State Tax Department agree to your request to cancel TAX25*01 Printing MV-1Tax Adjustment Credit contract effected immediately.

This cancellation is due to the vendor being unable to execute the contract according to the RFQ. Since this contract was cancelled before any work being completed there is no financial responsibility on the be half of the WV Tax Department to Data Inegrators.

Please sign below in acceptance to this cancellation of the above mentioned contact.

Upon acceptance, please return the signed document via email to nora.m.adams@wv.gov.

Sincerely,

Nora Adams

Nora Adams, Procurement Specialist
Operation Division

Accepted by: ROBERT DENTON

Company Name: DATA INTEGRATORS, INC

Signature: *[Signature]*

Title: PRESIDENT

Date: 12-17-2024

COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>8</u> Date: <u>12/17/24</u> Solicitation No. <u>CMA TAX25*01</u>	Agency: Tax Procurement Officer Submitting Requisition: Nora Davis Requisition No. CMA TAX25*01 PF No.: 1572519
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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 (www.state.wv.us/admin/purchase/TCP.pdf)	<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 checked="" type="checkbox"/>
4	Justification for price increases/backdating/other	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
5	Bond Rider (Construction)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" 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: David Pauline

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Business Organization Detail

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DATA INTEGRATORS, INC

Organization Information									
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason	
C Corporation	6/17/2019		6/17/2019	Foreign	Profit				

Organization Information		
Business Purpose	3231 - Manufacturing - Printing and Related Support Activities - Printing and Related Support Activities (commercial printing, books)	
Charter County	Control Number	9AR4Y
Charter State	VA	Excess Acres
At Will Term	Member Managed	
At Will Term Years	Par Value	
Authorized Shares	Young Entrepreneur	Not Specified

Addresses	
Type	Address
Local Office Address	1190 INTERNATIONAL PARKWAY STE 109 FREDERICKSBURG, VA, 22406
Mailing Address	1190 INTERNATIONAL PARKWAY SUITE 109 FREDERICKSBURG, VA, 22406 USA
Notice of Process Address	ROBERT DENTON 1190 INTERNATIONAL PARKWAY SUITE 109 FREDERICKSBURG, VA, 22406
Principal Office Address	1190 INTERNATIONAL PARKWAY SUITE 109 FREDERICKSBURG, VA, 22406 USA
Type	Address

Officers	
Type	Name/Address
President	ROBERT L DENTON 10 CHERRY BLOSSOM LANE STAFFORD, VA, 22554
Type	Name/Address

Annual Reports	
Filed For	Date filed
2024	
2023	
2022	
2021	
2020	

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

Tuesday, December 17, 2024 --- 11:16 AM

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