



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: 10-22-2024

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 1400 1400 AGR2400000001 2	Procurement Folder:	1241053
Document Name:	AVIAN INFLUENZA VIRUS TEST KITS/ ELISA	Reason for Modification:	CHANGE ORDER #1 TO RENEW CONTRACT
Document Description:	CHANGE ORDER #1 - AVIAN INFLUENZA VIRUS TEST KITS/ ELISA		
Procurement Type:	Central Master Agreement		
Buyer Name:			
Telephone:			
Email:			
Shipping Method:	Best Way	Effective Start Date:	2023-09-01
Free on Board:	FOB Dest, Freight Prepaid	Effective End Date:	2025-08-31

VENDOR		DEPARTMENT CONTACT	
Vendor Customer Code:	VC0000006995	Requestor Name:	Cynthia D Fisher
BIOCHEK USA CORP 3 SOUTHGATE RD		Requestor Phone:	(304) 558-2221
		Requestor Email:	cfisher@wvda.us
SCARBOROUGH ME 04074 US		<div style="font-size: 2em; font-weight: bold;">2025</div> <div style="font-weight: bold;">FILE LOCATION _____</div>	
Vendor Contact Phone: 207-883-3003 Extension:			
Discount Details:			
#1	No	0.0000	0
#2	No		
#3	No		
#4	No		

INVOICE TO	SHIP TO
PROCUREMENT OFFICER 304-558-2221 AGRICULTURE DEPARTMENT OF ADMINISTRATIVE SERVICES 1900 KANAWHA BLVD E CHARLESTON WV 25305-0173 US	AUTHORIZED RECEIVER 304-538-2397 AGRICULTURE DEPARTMENT OF MOOREFIELD FIELD OFFICE 60B INDUSTRIAL PARK RD MOOREFIELD WV 26836-0302 US

CR 11-6-24

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

11/6/24

PURCHASING DIVISION AUTHORIZATION
 DATE: *Tara* *11/4/24*
 ELECTRONIC SIGNATURE ON FILE

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

ENCUMBRANCE CERTIFICATION
Cody
 DATE: *11-6-24*
 ELECTRONIC SIGNATURE ON FILE

Extended Description:

Change Order

Change Order No. 1 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 September 1, 2024, through August 31, 2025.

Renewal Years Remaining: 2

No other changes.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	41116126			EA	376.000000
	Service From	Service To		Service Contract Amount	
				0.00	

Commodity Line Description: Avian Influenza Virus Test Kits / ELISA

Extended Description:

Unit Price must include all shipping and handling charges

West Virginia Department of Agriculture

Kent A. Leonhardt, Commissioner
Joseph L. Hatton, Deputy Commissioner



21 October 2024

Biochek USA Corp
3 Southgate Rd
Scarborough, ME 04074
ATTN: Timothy J. Goode

RE: CMA 1400 24*1 – Avian Influenza Virus Test Kits/ELISA

The West Virginia Department of Agriculture is offering to renew the above-referenced contract under the same terms and conditions, pricing, and specifications as the current contract and all subsequent change orders, if applicable. The renewal dates are September 1, 2024, through August 31, 2025. If your company agrees to this renewal, please fill out and sign the renewal letter and return to my attention as soon as possible.

Please let me know if you have any questions.

Sincerely

Alan Clemans
Alan Clemans (Oct 21, 2024 13:15 EDT)

Alan Clemans, CFO / Director
Administrative Services Division

Approved:

James L. Maxwell, DVM

Division Director

We agree to new the contract for the period as stated above under the same terms and conditions and pricing as the original contract and any change orders thereto.

Timothy J. Goode
Name/Signature

10/21/2024
Date

VP In The Americas
Title

West Virginia Department of Agriculture

Kent A. Leonhardt, Commissioner
Joseph L. Hatton, Deputy Commissioner



MEMORANDUM

TO: State of WV Auditor's Office
FROM: WV Department of Agriculture
DATE: 21 October 2024
SUBJECT: CMA AGR24*1 – Avian Influenza
Virus Test Kits/ELISA

The above contracts was originally not going to be renewed in favor of purchasing more comprehensive test kits which Biochek does not offer; however, after research of the pricing of the more comprehensive tests, it was determined that the above-contract should be renewed, and purchase of the more comprehensive testing kits be made on a case-by-case basis when necessary.

Approved by CFO/Director of Administrative Services

Alan Clemans

A handwritten signature in black ink, appearing to read "Alan Clemans", written over a horizontal line.

Date

10/21/24

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app
JD*

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Business Organization Detail

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BIOCHEK USA CORP

Organization Information								
Org Type	Effective Date	Established Date	Filing Date	Charter	Class	Sec Type	Termination Date	Termination Reason
C Corporation	8/15/2023		8/14/2023	Foreign	Profit			

Organization Information	
Business Purpose	5419 - Professional, Scientific and Technical Servies - Professional, Scientific and Technical Servies - Other Professional/Scientific/Technical Services (marketing research, public opinion polling, photographic, translation & interpretation, veterinary services)
Charter County	Hardy
Charter State	ME
At Will Term	
At Will Term Years	
Authorized Shares	
Capital Stock	
Control Number	
Excess Acres	
Member Managed	
Par Value	
Young Entrepreneur	No

Addresses	
Type	Address
Local Office Address	3 SOUTHGATE RD STE 2 SCARBOROUGH, ME, 04074
Mailing Address	3 SOUTHGATE RD STE 2 SCARBOROUGH, ME, 04074
Principal Office Address	3 SOUTHGATE RD STE 2 SCARBOROUGH, ME, 04074
Type	Address

Officers	
Type	Name/Address
Vice-President	TIMOTHY GOODE 3 SOUTHGATE RD STE 2 SCARBOROUGH, ME, 04074
Type	Name/Address

Annual Reports	
Filed For	
2024	
Date filed	

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

Friday, November 1, 2024 — 10:09 AM

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e.g. 123456789, Smith Corp

"BIOCHEK USA" ✕

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- Ineligible (Proceedings Complete)
- Prohibition/Restriction
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COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

<i>Purchasing Division Use:</i> Buyer: <u>Larry D. McDonald</u> Date: <u>11/01/24</u> Solicitation No. <u>CMA AGR 24*01 c/p 1</u>	Agency: WEST VIRGINIA DEPARTMENT OF AGRICULTURE Procurement Officer Submitting Requisition: RITA R GAINER Requisition No. CMA AGR 24*1 PF No.: 1241053
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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 checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input 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: _____

