



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

State of West Virginia  
**Master Agreement**

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

Order Date: 08-01-2023

<b>Order Number:</b>	CMA 0704 7882 INS2300000001 2	<b>Procurement Folder:</b>	1090570
<b>Document Name:</b>	Technical Staffing Services - Data Base Administrator	<b>Reason for Modification:</b>	Change Order #1 issued to renew the contract.
<b>Document Description:</b>	Technical Staffing Services - Data Base Administrator		
<b>Procurement Type:</b>	Central Master Agreement		
<b>Buyer Name:</b>			
<b>Telephone:</b>			
<b>Email:</b>			
<b>Shipping Method:</b>	Best Way	<b>Effective Start Date:</b>	2022-09-01
<b>Free on Board:</b>	FOB Dest, Freight Prepaid	<b>Effective End Date:</b>	2024-08-31

VENDOR		DEPARTMENT CONTACT	
<b>Vendor Customer Code:</b>	VS0000039276	<b>Requestor Name:</b>	John L Hannan
VIRTUAL SERVICE OPERATIONS LLC 3900 TELEPORT BLVD #141088		<b>Requestor Phone:</b>	(304) 558-6279
IRVING TX 75014 US		<b>Requestor Email:</b>	John.L.Hannan@wv.gov
<b>Vendor Contact Phone:</b>	703.901.0622	<b>Extension:</b>	
<b>Discount Details:</b>			
	<b>Discount Allowed</b>	<b>Discount Percentage</b>	<b>Discount Days</b>
#1	No	0.0000	0
#2	No		
#3	No		
#4	No		

**24**  
 FILE LOCATION \_\_\_\_\_

INVOICE TO	SHIP TO
ACCOUNTS PAYABLE MANAGER OFFICES OF THE INSURANCE COMMISSIONER PO BOX 50540  CHARLESTON WV 25305-0540  US	OFFICES OF THE INSURANCE COMMISSIONER 900 PENNSYLVANIA AVE  CHARLESTON WV 25302  US

8-2-23 BOT

<b>Total Order Amount:</b>	Open End
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Purchasing Division's File Copy

**ENTERED**

*JL 8.1.2023*

**PURCHASING DIVISION AUTHORIZATION**

DATE: *Mon Aug - 8/02/2023*

ELECTRONIC SIGNATURE ON FILE

**ATTORNEY GENERAL APPROVAL AS TO FORM**

DATE: *John L. Gray*

ELECTRONIC SIGNATURE ON FILE

*8/2/2023*

**ENCUMBRANCE CERTIFICATION**

*Beverly Toler*

DATE: *8-2-2023*

ELECTRONIC SIGNATURE ON FILE

**Extended Description:**

Change Order

Change Order One #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, 2023 through August 31, 2024.

Renewals Remaining: Two (2)

No other changes.

All provisions of the original Contract and subsequent Change Orders not modified herein shall remain in full force and effect.

Line	Commodity Code	Manufacturer	Model No	Unit	Unit Price
1	80111609			HOUR	60.320000
	<b>Service From</b>	<b>Service To</b>		<b>Service Contract Amount</b>	
				0.00	

**Commodity Line Description:** Temporary information technology software developers

**Extended Description:**

Database Administrator  
Year 1



STATE OF WEST VIRGINIA  
*Offices of the Insurance Commissioner*

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Allan L. McVey  
Insurance Commissioner

July 17, 2023

Virtual Service Operations  
12625 Fitzwater Drive #12050  
Nokesville, VA 20180

Subject: Renewal ~ CMA INS2300000001

Dear Vendor:

The State of West Virginia, Offices of the Insurance Commissioner is offering to renew the subject contract according to the same terms, conditions, prices, and specifications contained in the original contract including all authorized change orders. If your company agrees to this renewal, please sign below, and return the original to my attention as soon as possible.

**Effective date of the renewal: September 1, 2023, through August 31, 2024**

If you have any questions, please do not hesitate to give me a call at (304) 414-8473 or by email at [beverley.a.toney@wv.gov](mailto:beverley.a.toney@wv.gov).

Sincerely,

Beverley Toney  
Procurement Specialist, Sr.

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We agree to renew the contract for the period as stated above under the same terms and conditions in the original purchase order and any change orders thereto.

*Karla Hester*

7/26/2023

\_\_\_\_\_  
Name/Signature

\_\_\_\_\_  
Date

VP of Operations

\_\_\_\_\_  
Title

