



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: 01-14-2026

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

|                              |                                       |                                 |                                      |
|------------------------------|---------------------------------------|---------------------------------|--------------------------------------|
| <b>Order Number:</b>         | CMA 0511 2519 MIS14756030 2           | <b>Procurement Folder:</b>      | 1627839                              |
| <b>Document Name:</b>        | TECHNICAL TEMPORARY STAFFING SERVICES | <b>Reason for Modification:</b> | Change Order 01<br>To renew contract |
| <b>Document Description:</b> | Change Order 01- To renew contract    |                                 |                                      |
| <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>    | 2025-03-01                           |
| <b>Free on Board:</b>        | FOB Dest, Freight Prepaid             | <b>Effective End Date:</b>      | 2027-02-28                           |

| VENDOR   |                         | DEPARTMENT CONTACT         |                           |
|--|-------------------------|----------------------------|---------------------------|
| <b>Vendor Customer Code:</b>                             | VS0000046947            | <b>Requestor Name:</b>     | Stephanie F Pettry        |
| Techgene Solutions LLC<br>300 East Royal Lane, suite 109 |                         | <b>Requestor Phone:</b>    | (304) 356-4011            |
|  |                         | <b>Requestor Email:</b>    | stephanie.f.pettry@wv.gov |
| Irving   | TX                      | 75039                      |                           |
| US   |                         |                            |                           |
| <b>Vendor Contact Phone:</b>                             | 2147322477              | <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                      |                            |                           |

**2026**  
 FILE LOCATION \_\_\_\_\_

| INVOICE TO  | SHIP TO  |
|---|--|
| BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>MANAGEMENT INFORMATION SERVICE<br>ONE DAVIS SQUARE, RM 211<br>CHARLESTON WV 25301<br>US | BUYER - 304-957-0209<br>HEALTH AND HUMAN RESOURCES<br>MANAGEMENT INFORMATION SERVICE<br>321 CAPITOL ST, STE 200<br>CHARLESTON WV 25301<br>US |

*CR 1-23-26*

|                            |          |
|----------------------------|----------|
| <b>Total Order Amount:</b> | Open End |
|----------------------------|----------|

Purchasing Division's File Copy

**PURCHASING DIVISION AUTHORIZATION**  
 DATE: *Tara Ke 1/22/2026*  
 ELECTRONIC SIGNATURE ON FILE

**ATTORNEY GENERAL APPROVAL AS TO FORM**  
*1/15/2026*  
 DATE: *John S. Gray*  
 ELECTRONIC SIGNATURE ON FILE  
*1/28/2026*

**ENCUMBRANCE CERTIFICATION**  
*Cody Rose*  
 DATE: *1-29-26*  
 ELECTRONIC SIGNATURE ON FILE

**Extended Description:**

Change Order

Change Order No. 01 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 3/1/2026 through 2/28/2027.

Renewal Years Remaining: 2

No other changes.

| Line | Commodity Code      | Manufacturer      | Model No | Unit                           | Unit Price |
|------|---------------------|-------------------|----------|--------------------------------|------------|
| 17   | 80111608            |                   |          | hour                           | 26.000000  |
|      | <b>Service From</b> | <b>Service To</b> |          | <b>Service Contract Amount</b> |            |
|      |                     |                   |          | 0.00                           |            |

**Commodity Line Description:** Help Desk Analyst

**Extended Description:**

4.1.5 Help Desk Analyst

Award Level 2.



Techgene Solutions LLC  
300 E Royal Lane, Suite # 109  
Irving, Texas - 75039  
Phone # (972) 580 0247

Date: 01/06/2026

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

Dear Sir/Madam,

This letter is to confirm that Techgene Solutions, LLC agrees to renew Contract CMA MIS14756030 for another year, effective 03/01/2026 to 02/28/2027, under the same terms, conditions, prices, and specifications as the original contract, including any change orders.

Please feel free to reach out if you need any additional information.

Sincerely,  
For TECHGENE SOLUTIONS, LLC

A handwritten signature in blue ink that reads "Madhavi".

Madhavi Yadavalli  
HR Manager

Agreed

A handwritten signature in black ink that reads "Heather White".



STATE OF WEST VIRGINIA  
DEPARTMENT OF ADMINISTRATION  
OFFICE OF TECHNOLOGY

Eric L. Householder  
Cabinet Secretary

State Capitol  
Charleston, West Virginia 25305

Heather D. Abbott  
Chief Information Officer

**TO:** Ashley Huffman, Information Services Consultant 1  
DHHR, Office of Shared Administration

**FROM:** Heather D. Abbott, Chief Information Officer  
Office of Technology *Heather D. Abbott*

**SUBJECT:** INFORMATION TECHNOLOGY PROCUREMENT  
WVOT Number 2026-0360

**DATE:** January 12, 2026

West Virginia Code §5A-6-4(a) permits the Chief Information Officer to review and approve technology purchases for suitability to ensure such purchases comport with the State of West Virginia's overall strategic information technology goals.

West Virginia Code §5A-6-4c requires the Chief Information Officer to review and approve "technology projects."

West Virginia Code §5A-6-5 requires that "any state spending unit that pursues an information technology purchase that does not meet the definition of a 'technology project' and that is required to submit a request for proposal to the State Purchasing Division prior to purchasing goods or services shall obtain the approval of the Chief Information Officer, in writing, of any proposed purchase of goods or services related to its information technology and telecommunication systems.

A review has been conducted of your request for approval to purchase a 1 year renewal for contract: CMA MIS14756030 with Techgene Solutions LLC, the Office of Technology has determined:

Your request is approved.

That your request is not subject to the review and approval provisions contained in Chapter 5A, Article 6 of the Code, therefore, it does not need approval by the Office of Technology.

This memorandum constitutes this office's official review and a copy should be attached to your purchase order and any other correspondence related to this request. If you have questions, or need additional information, please contact Consulting Services at [Consulting.Services@wv.gov](mailto:Consulting.Services@wv.gov).



Scheduled SAM Maintenance [Show Details](#)  
Jan 12, 2026



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Revolutionary FWR Overhaul Impacts to SAM.gov [Show Details](#)  
Aug 15, 2025



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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.*

#### TECHGENE SOLUTIONS LLC

| Organization Information |                |                  |             |         |        |           |                  |                    |
|--------------------------|----------------|------------------|-------------|---------|--------|-----------|------------------|--------------------|
| Org Type                 | Effective Date | Established Date | Filing Date | Charter | Class  | Sec. Type | Termination Date | Termination Reason |
| ELC   Exempt LLC         | 2/18/2025      |                  | 2/18/2025   | Foreign | Profit |           |                  |                    |

| Organization Information  |  |   |
|---------------------------|--|---|
| <b>Business Purpose</b>   |  | <b>Capital Stock</b>                    |
| <b>Charter County</b>     |  | <b>Control Number</b> 9BAWB             |
| <b>Charter State</b> TX   |  | <b>Excess Acres</b>                     |
| <b>At Will Term</b>       |  | <b>Member Managed</b>                   |
| <b>At Will Term Years</b> |  | <b>Par Value</b>                        |
| <b>Authorized Shares</b>  |  | <b>Young Entrepreneur</b> Not Specified |

| Addresses                        |  |
|----------------------------------|--|
| Type                             | Address  |
| <b>Notice of Process Address</b> | LAXMI P VATTUMALLI<br>300 E ROYAL LN, #109<br>IRVING, TX, 75039<br>USA |
| <b>Principal Office Address</b>  | 300 E ROYAL LN, #109<br>IRVING, TX, 75039<br>USA                       |
| Type                             | Address  |

[File Your Current Year Annual Report Online Here.](#)

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

Thursday, January 15, 2026 — 9:49 AM

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# COMPLIANCE VERIFICATION CHECKLIST FOR REQUISITION SUBMISSION

|   |   |
|---|---|
| <i>Purchasing Division Use:</i><br>Buyer: <u># 13</u> Date: <u>11/15/2020</u> | Agency:<br>OSA OMIS   |
| Solicitation No. <u>CMA MIS 14756030</u><br><u>CRFQ MIS 25 0000000</u>        | Procurement Officer Submitting Requisition:<br>Stephanie Pettry |
|   | Requisition No.<br>CMA MIS14756030                              |
|   | PF No.:<br>1627839  |

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<br>[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<br><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 |
|-----------|--|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>10</b> | <b>Insurance requirements</b>                    |                          |                          |                          |                          |
|           | 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"/> |
| <b>11</b> | <b>Office of Technology CIO pre-approval</b>     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| <b>12</b> | <b>Treasurer's Office (banking) pre-approval</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**FOR CHANGE ORDERS/RENEWALS:**

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