

**Exhibit A - Pricing Pa
ARFQ 0608 DCR240000
Kitchen Equipment Maintenance - Saint Mary**

Labor Quote

Item #	Description	Unit of Measure
4.1.1.8	Regular Labor Rate	Hour
4.1.1.9	Overtime Labor Rate	Hour
4.1.1.10	Holiday Labor Rate	Hour
4.1.1.11	Emergency Labor Rate	Hour
4.1.2	Quarterly Preventative Maintenance	Hour
8	Flat Rate Travel Charge	Each

Parts Quote

**Estimated New
Equipment, Devices, &
Parts Markup
Percentage Costs****

Item #	Description	Estimated New Equipment, Devices, & Parts Markup Percentage Costs**
4.1.4	Parts	\$ 5,000.00
Grand Total		

*Vendor must complete the Price Page in full as failure to complete
Vendor's bid being disqualified. A no bid will result in*

Bidder/Vendor Information:

Name:	LA JON INC., d/b/a Hobart
Address:	1623 Garfield Ave. Parkersburg, WV 26101
Phone No.:	(304) 428-0731
Fax No.:	(304)422-5348
Email Address:	hobartservicewv@gmail.com
Authorized Signature	John Pierson

NOTES:

- * Quantities are estimated for bid evaluation purposes only.
- ** Estimated cost for bid evaluation purposes only.

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's Correctional Center & Jail

Estimated Annual Quantity *	Unit Price	Extended Amount
80	\$102.00	\$8,160.00
40	\$153.00	\$6,120.00
40	\$204.00	\$8,160.00
40	\$153.00	\$6,120.00
4	\$1,500.00	\$6,000.00
10	\$101.00	\$1,010.00

	New Equipment, Devices, & Parts Markup Percentage	New Equipment, Devices, & Parts Markup Extended Amount
x	75.00%	\$ 8,750.00
		\$ 44,320.00

the Pricing Page in its entirety will result in Vendor's bid being disqualified.

rt Sales & Service

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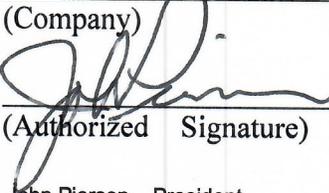
DESIGNATED CONTACT: Vendor appoints the individual identified in this Section as the Contract Administrator and the initial point of contact for matters relating to this Contract.

John Pierson
(Name, Title)
John Pierson President
(Printed Name and Title)
1623 Garfield Ave.
(Address)
Parkersburg, WV 26101
(Phone Number) / (Fax Number)
(304)428-0731 (304) 422-5348
(E-mail address)

CERTIFICATION AND SIGNATURE: By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; that I understand the requirements, terms and conditions, and other information contained herein; that this bid, offer or proposal constitutes an offer to the State that cannot be unilaterally withdrawn; that the product or service proposed meets the mandatory requirements contained in the Solicitation for that product or service, unless otherwise stated herein; that the Vendor accepts the terms and conditions contained in the Solicitation, unless otherwise stated herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

LA JON INC., d/b/a Hobart Sales & Service

(Company)

 *President*
(Authorized Signature) (Representative Name, Title)

John Pierson President

(Printed Name and Title of Authorized Representative)

9/26/2023

(Date)

(304)428-0731 (304)422-5348

(Phone Number) (Fax Number)

ADDENDUM ACKNOWLEDGEMENT FORM

SOLICITATION NO.:

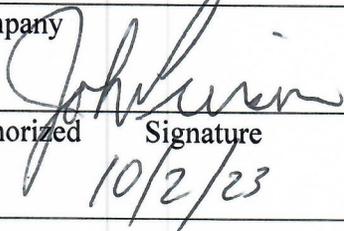
Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification. Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:
(Check the box next to each addendum received)

- | | |
|---|--|
| <input type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

LA JON INC, d/b/a Hobart Sales & Service

Company _____

Authorized Signature _____
Date 10/2/23

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.

STATE OF WEST VIRGINIA
PURCHASING AFFIDAVIT

CONSTRUCTION CONTRACTS: Under W. Va. Code § 5-22-1(i), the contracting public entity shall not award a construction contract to any bidder that is known to be in default on any monetary obligation owed to the state or a political subdivision of the state, including, but not limited to, obligations related to payroll taxes, property taxes, sales and use taxes, fire service fees, or other fines or fees.

ALL CONTRACTS: Under W. Va. Code §15A-3-14, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (W. Va. Code §61-5-3) that: (1) for construction contracts, the vendor is not in default on any monetary obligation owed to the state or a political subdivision of the state, and (2) for all other contracts, that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: La Jon Inc., Hobart Sales & Service

Authorized Signature: [Signature] Date: 10/2/23

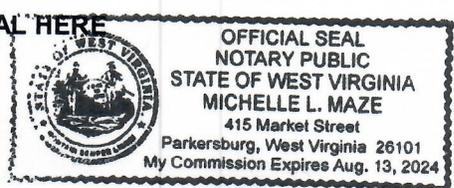
State of WV

County of Wood, to-wit:

Taken, subscribed, and sworn to before me this 2nd day of October, 2023

My Commission expires Aug 13, 2012, 2012.

AFFIX SEAL HERE



NOTARY PUBLIC [Signature]



**State of West Virginia
DRUG FREE WORKPLACE CONFORMANCE AFFIDAVIT
West Virginia Code §21-1D-5**

I, John Pierson, after being first duly sworn, depose and state as follows:

1. I am an employee of LA JON INC.; and,
(Company Name)
2. I do hereby attest that LA JON INC.
(Company Name)

maintains a written plan for a drug-free workplace policy and that such plan and policy are in compliance with **West Virginia Code §21-1D**.

The above statements are sworn to under the penalty of perjury.

Printed Name: John Pierson
 Signature:
 Title: Owner
 Company Name: LA JON INC.
 Date: 9/26/2023

STATE OF WEST VIRGINIA,

COUNTY OF Wood, TO-WIT:

Taken, subscribed and sworn to before me this 2nd day of October, 2023.

By Commission expires 8-13-12

(Seal)

(Notary Public)

