

EXHIBIT A – Pricing Page
ARFQ 0608 DCR2300000176
SAVIN ProC5310 Copier or Equal, Services, and Supplies

Section	Description	Unit of Measure	Quantity	Unit Cost	Extended Cost
3.1.1	Contract Item #1 - Savin ProC5310 Copier or Equal	Monthly	1	1300.00	\$ 46,800.00
3.1.2	Contract Item #2: Professional Services	Monthly	36		\$ -
3.1.3	Contract Item #3: Maintenance and Support	Monthly	36		\$ -
3.1.4	Contract Item #4: Unit Charge for Color	Monthly	36	2000.00	\$ 72,000.00
3.1.5	Contract Item #5: Unit Charge for Black and White	Monthly	36	750.00	\$ 27,000.00
3.1.6	Contract Item #6: Color Click Charges	Ea	1	.04	\$ 4/16
3.1.7	Contract Item #7: Black and White Click Charges	Ea	1	.00375	\$ 4/16
				Overall Total Cost	\$ 145,800.00

Please note: This information is being captured for auditing purposes.

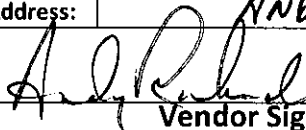
Vendor must complete the Pricing Pages in their entirety as failure to do so will result in Vendor's bids being disqualified. A no bid entered on the Pricing Page will result in Vendor's bid being disqualified.

Any product or service not on the Agency provided Pricing Pages will not be allowable. The state cannot accept alternate pricing pages, failure to use Exhibit A Pricing Pages could lead to disqualification of vendors bid.

The Pricing Pages contain a list of the Contract Items and estimated purchase volume. The estimated purchase volume for each item Vendor should type or electronically enter the information into the Pricing Page to prevent errors in the evaluation.

BIDDER /VENDOR INFORMATION:

Vendor Name:	RICHARDSON COPY CONCEPT
Address:	72 G Cove Ave
City, St. Zip:	Wheeling WV 26003
Phone No.:	304-242-1030
Email Address:	ANDY@RICHARDSONCOPY.COM


 Vendor Signature: _____

4-6-2023
 Date: _____

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: RICHANSON COPY CONCEPTS

Authorized Signature: [Signature] Date: 4-6-2023

State of West Virginia

County of Ohio, to-wit:

Taken, subscribed, and sworn to before me this 6 day of April, 2023

My Commission expires March 3, 2025

AFFIX SEAL HERE

NOTARY PUBLIC Renee Mercer





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/19/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. IF SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Gleason Wharton & Andrews Insurance, LLC 2084 National Road Wheeling WV 26003		CONTACT NAME: Erin Bell PHONE (A/C, No, Ext): (304) 243-9071 FAX (A/C, No): (304) 243-9073 EMAIL ADDRESS: erin@gwainurance.com	
INSURED Richardson Copy Concepts, Inc. 72 E Cove Ave Wheeling WV 26003		INSURER(S) AFFORDING COVERAGE INSURER A: Westfield Insurance Company NAIC # 24112 INSURER B: Brickstreet 12372 INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES **CERTIFICATE NUMBER:** CL22101910706 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	SUBROGATION	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR			BOP3388281	02/24/2022	02/24/2023	EACH OCCURRENCE \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	OTHER:						MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$ 1,000,000
	AUTOMOBILE LIABILITY						GENERAL AGGREGATE \$ 2,000,000
	ANY AUTO						PRODUCTS - COMP/OP AGG \$ 2,000,000
	OWNED AUTOS ONLY	<input type="checkbox"/> SCHEDULED AUTOS					
	HIRED AUTOS ONLY	<input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$
	UMBRELLA LIAB						BODILY INJURY (Per person) \$
	EXCESS LIAB	<input type="checkbox"/> OCCUR					BODILY INJURY (Per accident) \$
		<input type="checkbox"/> CLAIMS-MADE					PROPERTY DAMAGE (Per accident) \$
	DED	RETENTION \$					
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WCB1031537	05/02/2022	05/02/2023	EACH OCCURRENCE \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in WA) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N Y	N/A				AGGREGATE \$
							PER STATUTE <input checked="" type="checkbox"/> OTH-ER <input type="checkbox"/>
							E.L. EACH ACCIDENT \$ 1,000,000
							E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
In respects to Liability for the following job:
West Virginia Correctional Industries, 112 Northern Regional Correctional Drive, Moundsville, WV

CERTIFICATE HOLDER **CANCELLATION**

Evidence of Insurance	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE

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.

(Name, Title)
ANDY RICHARDSON OWNER

(Printed Name and Title)
72 E COVE AVE WHEELING WV 26003

(Address)
304-242-1030 304-242-8009

(Phone Number) / (Fax Number)
ANDY@RICHARDSONCOPY.COM

(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.

RICHARDSON COPY CONCEPT

(Company)
Andy Richardson OWNER

(Authorized Signature) (Representative Name, Title)
ANDY RICHARDSON OWNER

(Printed Name and Title of Authorized Representative)
4-6-2023

(Date)
304-242-1030 304-242-8009

(Phone Number) (Fax Number)



State of West Virginia
Agency Request for Quote
Miscellaneous

Proc Folder: 1207977		Reason for Modification:	
Doc Description: Savin ProC5310 Copier or Equal, Services, and Supplies			
Proc Type: Agency Master Agreement			
Date Issued	Solicitation Closes	Solicitation No	Version
2023-04-05	2023-04-19 14:00	ARFQ 0608 DCR2300000176	1

BID RECEIVING LOCATION

VENDOR

Vendor Customer Code:

Vendor Name: RICHARDSON COPY CONCEPT

Address: 72 B COVE AVE

Street:

City: WHEELING


State: WV Country: USA Zip: 26003

Principal Contact: ANDY RICHARDSON

Vendor Contact Phone: 304-242-1030 Extension: N/A

FOR INFORMATION CONTACT THE BUYER

Mary R Kemper
304-957-8226
mary.r.kemper@wv.gov

Vendor Signature X  FEIN# 55-0713489 DATE 4-6-2023

ADDITIONAL INFORMATION

The West Virginia Department of Homeland Security, Division of Administrative Services is soliciting bids on behalf of the West Virginia Division of Corrections and Rehabilitation, West Virginia Correctional Industries located at Northern Correctional Facility at 112 Northern Regional Correctional Drive, Moundsville, WV 26041 to establish a lease contract for SAVIN ProC5310 or Equal, Services, and Supplies. The current environment is a Savin 8100 and a Savin ProC5310.

INVOICE TO		SHIP TO	
NORTHERN CORRECTIONAL FACILITY 112 NORTHERN REGIONAL CORRECTIONAL DR MOUNDSVILLE WV US		NORTHERN CORRECTIONAL FACILITY 112 NORTHERN REGIONAL CORRECTIONAL DR MOUNDSVILLE WV US	

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
1	3.1.1 - SAVIN ProC5310 Copier or Equal	1.00000	EA	1300.00	46,800.00

Comm Code	Manufacturer	Specification	Model #
80161801	SAVIN:		Pro C5310

Extended Description:

- 3.1.1.2 Vendor must provide a Savin ProC5310 Copier or Equal that is new.
- 3.1.1.2.1A Vendor submitting bids with equipment listed as remanufactured, refurbished, or "like new" will be disqualified.

See attached Specifications for more details.

INVOICE TO	SHIP TO
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NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

MOUNDSVILLE WV
US

MOUNDSVILLE WV
US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
2	3.1.2 - Professional Services	1.00000	EA	—	—

Comm Code	Manufacturer	Specification	Model #
80161801			

Extended Description:

- 3.1.2Contract Item #2: Professional Services
- 3.1.2.1Vendor must provide the following services for the Savin ProC5310 Copier or Equal.
- 3.1.2.1.1Delivery and Installation
- 3.1.2.1.1.1Vendor must include delivery and installation into their cost.
- 3.1.2.1.2Training
- 3.1.2.1.2.1Vendor must include training and training manuals.

See Attached Specification for more details

INVOICE TO	SHIP TO
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NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

MOUNDSVILLE WV
US

MOUNDSVILLE WV
US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
3	3.1.3 - Maintenance and Support	1.00000	EA	—	—

Comm Code	Manufacturer	Specification	Model #
80161801			

Extended Description:

- 3.1.3.1Vendor must be authorized by the manufacturer to provide maintenance and support services, install manufacturers engineering changes, and modifications. Vendor must provide product manuals with bid response from the manufacturer.
- 3.1.3.2Vendor must provide maintenance coverage twenty-four (24) hours a day, seven (7) days a week, three hundred sixty-five (365) days a year.

See attached Specifications for more details.

INVOICE TO	SHIP TO
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NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

MOUNDSVILLE WV
US

MOUNDSVILLE WV
US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
4	3.1.4 - Unit Charge for Color	1.00000	EA	2600.00	22,000.00

Comm Code	Manufacturer	Specification	Model #
80161801	JAVIN		PRO C5310

Extended Description:

3.1.4.1 Vendor must provide a unit charge for a minimum of 50,000 color copies per month.

See Attached Specification for more details

INVOICE TO	SHIP TO
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NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

MOUNDSVILLE WV
US

MOUNDSVILLE WV
US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
5	3.1.5 - Unit Charge for Black and White	1.00000	EA	250.00	27,000.00

Comm Code	Manufacturer	Specification	Model #
80161801	JAVIN		PRO C5310

Extended Description:

3.1.5.1 Vendor must provide a unit charge for a minimum of 200,000 black and white copies per month.

See Attached Specification for more details

INVOICE TO	SHIP TO
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NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

MOUNDSVILLE WV
US

MOUNDSVILLE WV
US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
6	3.1.6 - Color Click Charges	1.00000	EA	<i>.04</i>	<i>4/K</i>

Comm Code	Manufacturer	Specification	Model #
80161801	<i>SAVIN</i>		<i>PRO C 5310</i>

Extended Description:

3.1.6.1 Vendor must provide a per click charge for color copies exceeding the monthly allowed unit charge as outlined in 3.1.4 above.

See Attached Specification for more details

INVOICE TO	SHIP TO
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NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

NORTHERN CORRECTIONAL FACILITY
112 NORTHERN REGIONAL CORRECTIONAL DR

MOUNDSVILLE WV
US

MOUNDSVILLE WV
US

Line	Comm Ln Desc	Qty	Unit Issue	Unit Price	Total Price
7	3.1.7 - Black and White Click Charges	1.00000	EA	<i>1.00375</i>	<i>4/K</i>

Comm Code	Manufacturer	Specification	Model #
80161801	<i>SAVIN</i>		<i>PRO C 5310</i>

Extended Description:

3.1.7.1 Vendor must provide a per click charge for black and white copies exceeding the monthly allowed unit charge as outlined in 3.1.5 above

See Attached Specification for more details

SCHEDULE OF EVENTS

Line	Event	Event Date
1	Questions due by 2:00pm EST	2023-04-12

	Document Phase	Document Description	Page 6
DCR2300000176	Final	Savin ProC5310 Copier or Equal, Services, and Supplies	