


<b>Purchase Change Request</b>				Marshall University Office of Purchasing One John Marshall Drive Huntington, WV 25755-4100		<b>Order #</b> MU19MAINT	
FY 22	Buyer MW	Date 09/26/2022	Account Various	P.O. Date 01/25/2019	Contract MU19MAINT		
<b>Document</b> <input type="checkbox"/> Requisition (Cancellation only) <input type="checkbox"/> Regular Purchase Order <input type="checkbox"/> Contract Purchase Order <input checked="" type="checkbox"/> Open End Contract Purchase <input type="checkbox"/> Agreement			<b>Document Action</b> <input type="checkbox"/> Cancellation <input type="checkbox"/> Increase/Decrease <input type="checkbox"/> Unused Balance <input type="checkbox"/> Freight <input type="checkbox"/> Renewal <input type="checkbox"/> Extension Error <input type="checkbox"/> Error in Total Amount <input type="checkbox"/> Change of Account <input checked="" type="checkbox"/> Change of Vendor Name/Address <input type="checkbox"/> Other				
Vendor Name, Address, Phone #, etc.		Vendor Code <b>310620970</b>		BOG Unit Name & Address			
Atalian US Ohio Valley Inc Atalian Global Services 525 Washington Blvd. Jersey City, NJ 07310				Marshall University Office of Purchasing One John Marshall Drive Huntington, WV 25755-4100			
Ph# 304.962.2818		Fax		FEIN# 31-0620970			
Item#	Quantity	Description of Change			Unit Price	Extended Price	
		<b>Change Order # 14</b>  Janitorial Services  To amend the contract by updating the vendor name and address according to all terms, conditions, prices and specifications contained in the original contract including all authorized change orders.  Formally Read: Atalian Global Services PO Box 74008995 Chicago, IL 60674-8995  Now Reads: Atalian US Ohio Valley Inc Atalian Global Services 525 Washington Blvd. Jersey City, NJ 07310					
Reason for Change: Update vendor name and address					Previous Total	\$ Open-end	
					Increase	\$	
					Decrease	\$	
					New Total	\$ Open-end	

Approved: Michelle Wheeler 9/26/22  
 Authorized Signature Date

N/A  
 Attorney General if required Date

**Subject:** Atalian US Ohio Valley Inc  
**Date:** Monday, September 26, 2022 at 9:24:45 AM Eastern Daylight Time  
**From:** Freeman, Melody  
**To:** Purchasing  
**Attachments:** Older invoice-p0002 - p0042.pdf

Good morning,

Can we get the name changed on MU19MAINT to  
ATALIAN US OHIO VALLEY INC in order to match the invoice, PO, and wvOasis?

Each month, we have to add a VNI form because the name on the contract does not match the invoicing or Oasis. The PO has both names, so we are covered on it... but not the contract.

I attached an older payment so that you can see how they invoice, and the contract attached. The contract is on page 25 of scan. The name on the contract is the issue.

Thank you!  
Melody

Thank you,  
Melody Freeman / *Director of Accounts Payable*  
304.696.2221 / Email: freeman70@marshall.edu

Vendor/Customer

[Menu](#)

Vendor/Customer	Legal Name	Alias/DBA	Vendor Active Status	Customer Active Status	Previous Name
000000171992	ATALIAN GLOBAL SERVICES		Active	Inactive	
000000171993	AETNA INTEGRATED SERVICES		Active	Inactive	
✓ 000000171994	ATALIAN US OHIO VALLEY INC		Active	Inactive	

From 1 to 3 of 3 First Prev Next Last [Attachments](#)

Save [Undo](#) [Delete](#) [Insert](#) [Copy](#) [Paste](#) [Search](#)

**General Info**

Vendor/Customer : 000000171994	Restrict Use by Department :
Legal Name : ATALIAN US OHIO VALL	Miscellaneous Account :
Alias/DBA :	Internal Account :
Vendor Active Status : <input checked="" type="radio"/> Active	Third Party Only :
Vendor Approval Status : Complete	Third Party Vendor :
Customer Active Status : <input checked="" type="radio"/> Inactive	Third Party Customer :
Customer Approval Status : Incomplete	Inventory Customer :
Location Name :	Healthcare Provider :
First Name :	Never Archive :
Middle Name :	Restrict VSS Access : <input checked="" type="radio"/> No
Last Name :	Discontinue - No New Business :
Company Name : ATALIAN US OHIO VALL	Prevent MA Reference :
Previous Name :	PunchOut Enabled :
Previous Street :	Re-PunchOut Enabled :
Previous City :	Electronic Order Enabled :
Previous State/Province :	W-9 Received :
Previous Country :	W-9 Received Date :
	W-8 Received :
	W-8 Received Date :
	Accepts Credit Cards :
	Active From : 01/01/1999
	Active To :
	Last Usage Date : 09/27/2022
	Department :
	Unit :

▶ **Headquarters**

▶ **Organization**

▶ **Disbursement Options**

▶ **Prenote/EFT**

▶ **Remittance Advice**

▶ **Vendor Terms**

▶ **Accounts Receivable**

▶ **eMALL**

▶ **Location Information**

▶ **Fee and Vendor Compliance Holds**

Fee Exempt :	Tax Clearance :
Registration Application Date : 01/23/2014	Unemployment Insurance :
Registration Effective Date : 01/23/2014	Worker's Compensation :
Registration Expiration Date : 01/23/2015	Secretary of State Registration :
Pre-Registration Code :	Federal Debarred :

▶ **Executive Compensation**

▶ **Additional Information**

▶ **Travel**

[Change Management](#)

[Top](#)

CREATE DOCUMENT> [Create New Record](#) [Modify Existing Record](#)

UPDATE> [Headquarters](#) [Add 1099 Information Entry](#) [Add 1042-S Reporting Information Entry](#) [Vendor Business Types By Commodity](#)

SEARCH BY> [Master Contacts](#) [Master Addresses](#) [Vendor Commodity](#) [Vendor Addresses](#) [Vendor Business Types](#) [Vendor Service Areas](#) [VCM Query](#)

[Historical Vendor Information](#) [Vendor Notes](#)

[Vendor Transaction History](#)