### **Purchase** Order # Marshall University Office of Purchasing MU23CREMATION **Change Request** One John Marshall Drive Huntington, WV 25755-4100 FY P.O. Date Buyer Date Account Contract MD 01/25/24 05/02/2023 24 **VARIES** MU23CREMATION **Document Action Document** Error in Total Amount Cancellation Requisition (Cancellation only) Change of Account ☐ Increase/Decrease Regular Purchase Order Change of Vendor Name/Address Unused Balance Contract Purchase Order ☐ Other Freight Open End Contract Purchase ∇ Renewal Agreement Agreement Extension Error Vendor Code 311552242 Vendor Name, Address, Phone #, etc. **BOG Unit Name & Address** Marshall University E Hall Funeral Home Inc. Office of Purchasing **DBA OH River Valley Crematory** One John Marshall Drive PO Box 391, Proctorville, OH 45669 Huntington, WV 25755-4100 Ph# 740-886-6164 Fax FEIN#311552242 Description of Change Unit Price **Extended Price** Item# Quantity Change Order # 1 Cremation Services To make the following changes in accordance with the same terms and conditions, prices, and specifications contained in the original contract and all authorized change orders. 1. To Renew the contract for one (1) year. Renewal Term: 03/01/2024 - 02/28/2025. Renewal one (1) of Four (4) Renewals Remaining: three (3) one-year renewals. No other changes made. Vendor Contact: Evan Hall: ehallfuneralhome@outlook.com Previous Total \$ Open-End Reason for Change: Renewal Increase

	Decrease	\$ _	
	New Total	\$ Open-End	
Michelle & Dr. let.			
Authorized Signature			Date
N/A			
Attorney General if required			Date

Approved:



Office of Purchasing

01/12/2024

Renewal Letter

E Hall Funeral Home Inc. DBA Ohio River Valley Crematory PO Box 391, 544 County Road 775 Proctorville, OH 45669

Re: Contract Extension for Contract MU23CREMATION

Hello,
The above-referenced contract expires on $\underline{02/29/2024}$ . There is a provision for extension upon written mutual agreement of the parties.
Please complete the section below if you agree to extend the contract effective $\underline{03/01/2024}$ through $\underline{02/28/2025}$ , under the same terms and conditions as the original contract including all approved change orders.
Please return the executed letter via email at your earliest convenience.
If you have any questions, please feel free to contact me at <u>delong16@marshall.edu</u> .
Sincerely,
Mixty Disilvio
Misty DiSilvio Contract Specialist
I agree to renew the contract referenced above for an additional one (1) year period under the same terms and conditions as the original contract.
Yes, subject to the following changes indicated below or in the attached letter.

on R. Hell

1-25-24



## Office of Purchasing

•	Pricing			
	4.1 Units per cadaver up to 400 lbs.	\$	220	)
	4.2 Unit price per cadaver over 400 lbs.	\$	320	<u>(†                                     </u>
	4.3 Unit price per cremation container	\$	25	
	Hall Funeral Home DBA: Ohio Vendor	River	Valley	Crematory
	1 mm R. Hell			// 22
	Authorized Signature			4-23-2023

## STATE OF WEST VIRGINIA Purchasing Division

# **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 §5A-3-10a, 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 exceed 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: Hall Funeral Home DBA: Ohio River	Valley Crematory
Authorized Signature: Exam & Hell	Date: 4.28-2023
State of Olice	
County of Lawkence to-wit:	
Taken, subscribed, and sworn to before me this $\frac{38}{48}$ day of $\frac{\Delta pr. I}{1}$	. 20 <u>23</u> .
My Commission expires	×
	0

**AFFIX SEAL HERE** 



Notary Public
State of Ohio

Purchasing Affiday

My Comm, Expires January 8, 2028 Purchasing Affidavit (Revised 01/19/2018)

### Vendor/Customer

Vendor/Customer	Legal Name	Alias/DBA   Vendor Active Status				
	L FUNERAL HOME INC	Active	Inactive			
	RIVER VALLEY CREMATORY		Inactive			
	EIDER HALL FUNERAL HOME		Inactive			
	FUNERAL HOME	Active	Inactive			
From 1 to 4 of 4 First Prev N						
Save <u>Undo</u> Delete Insert <u>Cop</u>	<u>y</u> Paste <u>Search</u> ♥೩					
■ General Info						
Vendor/Customer :	000000173915	Restrict Use by Department :				
	E HALL FUNERAL HOME IN	Miscellaneous Account :				
Alias/DBA :	L HALL I GIVENAL HOWE IN	Internal Account :				
Vendor Active Status :	Active ~	Third Party Only :				
Vendor Approval Status :		Third Party Vendor :				
Customer Active Status :		Third Party Customer :				
Customer Approval Status :		Inventory Customer :				
Location Name :	moompiete	Healthcare Provider :				
First Name :		Never Archive :				
Middle Name :		Restrict VSS Access :	No 🗸			
Last Name :		Discontinue - No New Business :				
	E HALL FUNERAL HOME IN	Prevent MA Reference :				
Previous Name :		PunchOut Enabled : Re-PunchOut Enabled :				
Previous Street :		Electronic Order Enabled :				
Previous City :		W-9 Received :				
Previous State/Province :	<b></b>	W-9 Received Date :				
Previous Country :	<u>-</u>	W-8 Received :				
<b></b> ,	ت	W-8 Received Date :				
		Accepts Credit Cards :				
		Active From :				
		Active To :	01/01/1000			
		Last Usage Date : (				
		Department :	<u> </u>			
		Unit :	-			
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